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“We Don’t Have to Carry the Shame”:
Autobiographical Documentary Filmmaking as a Collective Healing
Artifact for Child Abuse Survivors

A thesis
submitted in fulfilment
of the requirements for the degree
of
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Abstract

Sitting at the intersection between autobiographical documentary theory and child abuse-related trauma theory, this thesis explores the wellbeing outcomes and impacts for child abuse survivors who create and view autobiographical documentaries that represent discourses about child abuse, intergenerational trauma, and healing. Adopting an anti-pathologising approach to trauma, this thesis explores and amplifies the historically silenced voices of child abuse survivors. Life is given to the underrepresented experiential accounts of autobiographical documentarians, with a focus on an uncharted community of practitioners: survivor-filmmakers. Further elevating survivor narratives, I position myself as a survivor-researcher, embracing an autoethnographic approach wherein my ‘presence’ remains integral to the research (Ellis et al., 2000; Bochner et al., 2016; Bochner, 2022; 2016). As a secondary research focus, this thesis seeks to understand what affordances survivor-researchers may bring to research projects that explore the experiences of child abuse survivors.

A tripartite model for analysis of audio-visual texts frames the exploration, spanning three domains: production, text, and (potential) audience reception (Thompson, 1990). Trauma-and-violence-informed interviews were conducted to investigate the experiences of four survivor-filmmakers: Gwen van de Pas (*Groomed*, 2021); Tracey Arcabasso Smith (*Relative*, 2022); Jasmín Mara López (*Silent Beauty*, 2022); and Ginene Humphrey (*Dandelions*, TBC). Audio-visual methods of textual analysis, critical discourse analysis (Fairclough, 1992a; 1992b; 1998; 2001), and affect analysis (Rose, 2016; Tait, 2016; Plantinga & Tan, 2007) were applied to identify affordances and examine the discursive functionality of the documentaries. Interviews with wellbeing professionals were conducted to investigate the potential therapeutic value of the texts for survivor-viewers. Interview transcripts were analysed using reflexive thematic analysis (Braun et al., 2022a; 2022b; 2019).

Synthesising the findings across the three domains, the research reveals how autobiographical documentary filmmaking and viewing can function as therapeutic healing tools, affording survivor-filmmakers and survivor-viewers the ability to re/process, challenge and let go of shame – a central aspect of the survivor experience, perpetuated and reinforced by victim-blaming culture. The filmmaking process functions as a ‘platform of vulnerability’ for survivor-filmmakers, a double-edged sword where traumatic stress and retraumatisation can be evoked, and where shame can be challenged. Challenging shame occurs through therapeutically impacting other survivors, experiencing survivorship, and re/processing in a

myriad of ways, which engagement with representational strategies helps afford (including reenactments to represent traumatic memories and the child self, animation to represent, connect with and re-parent the inner-child, and using ocean imagery and sound as a mode of cultural memory). Post-release, autobiographical documentaries about abuse and healing may function as ‘collective healing artefacts,’ taking on an immortal life of their own that leads to ongoing therapeutic impact for survivors. The concept ‘vicarious therapy’ is coined to encapsulate how survivor-viewers may vicariously experience therapeutic impact, such as gaining a sense of survivorship, and re/processing possibilities of traumatic growth. This occurs through the intertwined processes of witnessing and feeling survivors – the elicitation of memories and affect(s) – and how autobiographical documentary representations can speak survivors’ shared language of shame. In other words, they can authentically represent aspects of the survivor experience.

Contrasting individualistic healing approaches that dominate mainstream therapeutic practice, the findings magnify the value of collective approaches to heal abuse related trauma and shame. Autobiographical documentary filmmaking, and cinematherapy utilising autobiographical documentaries, may function as tools of collective healing. Findings suggest the need to move towards shame-sensitive approaches to autobiographical documentary filmmaking, building on the trauma-informed guidelines created by the Documentary Accountability Working Group (2022).

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Dedication

For my inner-child, and all the trouble-making survivors.

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Chapter One: Introduction

This introductory chapter discusses the cultural landscape of Aotearoa New Zealand to exemplify the pervasiveness of child abuse and victim-blaming culture, and to demonstrate how media representations influence understandings about and responses to child abuse. The Aotearoa based statistics help contextualise the perspectives of the interviewed wellbeing professionals (see chapter seven), who are based in Aotearoa and assess the international documentaries within the context of Aotearoa's cultural landscape. As it will become clear to readers, the localised statistics and discussions are ultimately indicative of a global culture of abuse and victim-blaming, which the autobiographical documentaries and the survivor-filmmakers comment on and challenge.

1.1 Breaking the Silence: Child Abuse in Aotearoa

Child abuse is everywhere: in our homes, at family gatherings; in public, at the local swimming pool; and within institutions, at our schools, universities, and workplaces. Child abuse that is perpetuated by the very people entrusted to care for and safeguard the precious taonga¹ that children are.

Child abuse and family violence thrive in Aotearoa, which has consistently produced some of the highest rates of family harm (OECD, 2013) and child abuse when compared to other developed nations (UNICEF, 2017). The quality of life for children in Aotearoa is devastatingly poor. This is reflected in Aotearoa's consistently low rankings for the quality of child wellbeing compared with other developed nations. Most recently, Aotearoa ranked 32nd out of 36 nations (UNICEF, 2025), while one child continues to be murdered every five weeks (UNICEF, 2020). In 2024, Aotearoa's Ministry for Children, Oranga Tamariki,² recorded 95,422 reports of concern for 84,163 distinct children, demonstrating a 34.5% increase compared to reports of concern recorded in 2023 (Oranga Tamariki Insights Team, 2025). Furthermore, in their report, *Understanding Reports of Concern*, the Oranga Tamariki Insights Team (2025) concludes that

¹ Within a Māori worldview, children are 'treasures' or taonga.

² Formerly known as 'Child, Youth and Family,' Oranga Tamariki—Ministry for Children is the government department responsible for the wellbeing and safety of children in Aotearoa.

over the next one to two years, harm to children and reports to Oranga Tamariki are likely to increase, while system responsiveness remains strained. Evidently, child abuse continues to be a significant issue in Aotearoa, and one that is only escalating in severity.

Issues of abuse and violence are systemic, woven into the fabric of society in colonial Aotearoa. The justice and protective systems that child victims and adult survivors rely on are the very systems that perpetrate abuse, protect abusers, and sustain victim-blaming culture. Oranga Tamariki has a notoriously longstanding reputation of failing children, adults who report concerns, and whānau ³ involved or implicated by the investigations – particularly for Māori. In the year ending June 2023, nine percent, over 500 children, were abused while under the care of Oranga Tamariki; a significant increase of over three percent since the first report in 2019 (Safety of Children in Care Team, 2024). Findings of the *Children in care: Complaints to the Ombudsman 2019-2023* report exemplify how Oranga Tamariki fails to meet its own standards of care (Boshier, 2024). Oranga Tamariki fails to adequately consult whānau when investigating reports of concern and when uplifting children; to transparently document and present information to the courts without bias; to respond to children’s complaints with care; and to take accountability and apologise. Oranga Tamariki thus requires “change on a scale rarely required of a government agency” to rebuild lost trust among survivors and the public (Boshier, 2024, p. 3; 102).

The complacency of protective and criminal justice systems in enabling child abuse, and this call for institutional reform, is substantially evident across the findings of the Royal Commission inquiry into abuse in state care and faith-based institutions between 1950-1999; Aotearoa’s most expensive, complex and lengthiest public inquiry in history. Instances of abuse from 1999 to 2019 were included, demonstrating the ongoing relevance of the issue: not much has changed. The final report, *Whanaketia: Through Pain and Trauma, From Darkness to Light*, was released in July 2024 (Abuse in Care Royal Commission Inquiry). The report is informed by the experiences of almost 3000 survivors and over one million evidential documents, providing irrefutable evidence of widespread and systemic violence. The report estimates 200,000 children

³ Whānau refers to family networks and relationships, often encompassing relationships beyond immediate family, and relationships that are beyond biological ties.

and vulnerable adults were abused since the 1950s, exposing caregivers, social workers, religious leaders, and medical professionals as perpetrators (Abuse in Care Royal Commission Inquiry, 2024).

Many identified perpetrators remain in positions of power within child abuse prevention related fields, where contact with children is likely. Government inquiries and apologies remain meaningless for many survivors when exposed abusers remain protected, and when colonial violence continues marginalising and killing Māori; overrepresented in the report, their abuse related trauma compounded by historical and intergenerational trauma (Abuse in Care Royal Commission Inquiry, 2024). Paora Crawford-Moyle (Ngāti Porou), survivor, social worker, and principal advisor to the Māori hearing of the inquiry, criticises the hypocrisy and ongoing failure to Māori:

...for myself and my whānau, we're not getting anything out of this [national apology]...You're still sending our babies into boot camps. You're still sending them into residences where you say you will protect them, but you're not protecting them. They're still harmed while they're in there. The same things that happened to us when we were babies are still happening in facilities in this country (Stewart, 2024)

The enquiry and the discourse that is materialising in response come against a backdrop of failing criminal justice and legal processes, which harm and retraumatise child victims and survivors who report in adulthood. Police investigation and court processes often victim-blame and shame abuse survivors. Engaging with formal justice systems and processes is often as, if not more, traumatising than the abuse survivors have endured and seek support for. The Law Commission (2015) found that criminal court proceedings in Aotearoa often fail to appropriately respond to survivors of sexual violence, contributing to low reporting rates and high rates of re-victimisation and traumatisation. Consequently, engaging with formal justice systems is often counterproductive to healing. Survivors distrust their ability to protect them and often refrain from reporting due to such distrust. This is especially true if the abuse is sexual, compounding stigma. Highlighting this, the Ministry of Justice (2022) estimates that 92% of sexual abuse crimes are not reported to police, revealing that survivors of sexual crimes were significantly more likely to give the reasons of “shame/embarrassment/further humiliation” and “fear of reprisals/would make matters worse” (p. 154).

These injustices are reflected and echoed in the report, *Te Aorerekura: National Strategy to Eliminate Family Violence and Sexual Violence* (New Zealand Government, 2021a):

Women impacted by violence and their children want to feel safe and protected when they reach out for help from the justice system (the police, the courts and lawyers). They want to be believed and they want the professionals they encounter to take the violence and the risks they face seriously (p. 58)

Consequently, one recommendation is to reform police protocols and responses in such contexts. However, the New Zealand Police have been resistant. Police Commissioner Andrew Coster announced a phased process for police forces to withdraw from responding to mental health crises and family harm incidents (New Zealand Police, 2024). This is despite family harm callouts occurring approximately every three to four minutes (Lambie, 2018; New Zealand Police, 2022), consuming the majority of frontline police time and resources (New Zealand Police, 2022). Thus, child abuse and family violence are complex, relentless issues that even government agencies, whom society entrusts to keep communities safe, fail to respond to adequately.

On this, law scholar Carrie Leonetti (2024) criticises the New Zealand Police for having “essentially decriminalised family violence” (para. 16), positioning certain abuse experiences as worthy of a response, and de-prioritising others. Decriminalising family violence will exacerbate the prevalence of abuse and sustain a culture of silence and victim-blaming, through normalising violence; enabling perpetrators to abuse without repercussions; placing additional pressure on health services and staff; and by keeping survivors in a ‘too complicated’ basket, where they remain marginalised, unprotected, and hopeless about their present and future lives.

The ability for survivors to live fulfilling lives is complicated further by the inaccessibility of professionally guided therapeutic support services. Aotearoa’s mental health system is in crisis – and it has been for decades (Mulder et al., 2022; Meier et al., 2021). Seemingly, there is little hope for improvement. A study involving over 500 psychiatrists and trainees across Aotearoa, reveals a “pessimistic” consensus among professionals providing therapeutic support to tāngata whaiora (people seeking wellbeing/supports): “The majority of psychiatrists believe specialist

mental health and addiction services in New Zealand are not currently fit for purpose and that they are not heading in the right direction” (Every-Palmer et al., 2024, p. 89).

How did we get here? How can child abuse be so pervasive, prevalent, and obvious, yet remain overlooked, minimised, and unaddressed with significant affect – hidden in plain sight? Why are we not responding in ways that facilitate and support the healing for child victims and adult survivors? Why is there so much disconnect between the lived experiences of abuse survivors and how government agencies and wider society respond to them?

Why do I [know and believe all the above to be true, but] still feel waves of immense shame – about myself, the experiences of abuse, how it has impacted me, how I have responded, having to ‘heal’ as an adult, and how I choose to heal?

Why do I feel ashamed for feeling shame – when that shame should not belong to me?

1.2 Victim-blaming Culture

The culture surrounding abuse victim-blames and shames survivors. By ‘culture’, I refer to cultural theorist Stuart Hall’s (1997) understanding of culture, as not a:

set of things – novels and paintings or TV programmes or comics – as a process, a set of practices. Primarily, culture is concerned with the production and exchange of meanings – the ‘giving and taking of meaning’ – between the members of society or a group. ... Thus culture depends on its participants interpreting meaningfully what is around them and ‘making sense’ of the world, in broadly similar ways (p. 2)

That is, meaning is culturally bound and co-constructed between people and within communities, evolving fluidly through ongoing interactions. Regarding abuse, victim-blaming is “the transference of blame” from the perpetrator of abuse to the victim or survivor (Taylor, 2020, p. 26). They are framed as responsible, where their behaviour, situational context, and identity characteristics are used to justify abuse occurring (Taylor, 2020).

Victim-blaming culture thrives in Aotearoa. A study conducted by Hargrave et al., (2024) exposes the high prevalence of victim-blaming experienced by victims of crime. However, most victim-blaming experiences occurred in response to disclosures of sexual abuse and family harm

and were mostly perpetuated by those closest to the survivor (Hargrave et al., 2024).

Responsibility and blame are placed onto survivors through personal responses and institutional responses and processes. A study examining image-based sexual abuse across the United Kingdom, Australia, and Aotearoa revealed that one in three respondents (representative of the population) held victim-blaming attitudes about image-based sexual abuse experiences, as do police (Flynn et al., 2023; Flynn et al., 2022). Police often victim-blame survivors when investigating incidents of family harm and violence, child sexual abuse, and sexual abuse broadly (Clark, 2021; Grant & Rowe, 2011; Newbold & Cross, 2008; Giles et al., 2005).

Cross-examination processes of child victims, witnesses, and adult survivors of sexual abuse draw on rape and sexual abuse myths with regularity (Denne et al., 2023a; Denne et al., 2023b; St. George et al., 2022; Randell, 2021). Attorneys are often “strategic in their use of myths and employ these adult rape myths in ways that are plausible, purposeful, and likely impactful” (Denne et al., 2023b, p. 11915). Child victims and adult survivors are interrogated about their behaviour, decisions, relationship and medical history, while their character and credibility are put into question.

Judges’ attitudes and rulings are governed by victim-blaming discourse, using victim-blaming and gender biased language towards survivors of family harm and violence, as findings from an AI analysis of family court judgements and appeals across England and Wales reveal (Hall, 2024).⁴ When children ask for protection from violent fathers, family court judges often rule that the child is ‘brainwashed’ by the mother/parent, granting the abuser custody and rewarding abuse: “The court holds a strong, folkloric ideology that children always need extensive time in the care of both parents, even when one is violent and dangerous” (Leonetti, 2022, para. 8).

“Victim-blaming is not reducing, but it does seem to be getting more palatable and socially (and professionally) acceptable” (Taylor, 2020, p. 32). Figure 1.1 illustrates examples of stigmatising discourses about child sexual abuse, which contribute to the construction and perpetuation of victim-blaming culture. The diagram synthesises findings from an assessment conducted for the

⁴ The findings are the result of a novel project called ‘herEthical AI’, which trains computers to identify victim-blaming attitudes and discourse, analysing family court transcripts. Findings are in the process of being formally peer-reviewed and published.

Independent Inquiry into Child Sexual Abuse in England and Wales (Lovett et al., 2018). While specific to this context, the diagram is reproduced here because it represents victim-blaming discourses that any survivor may encounter, regardless of the abuse being sexual: discourses of deflection, denial, disbelief, and the counter or competing discourses of power and belief.

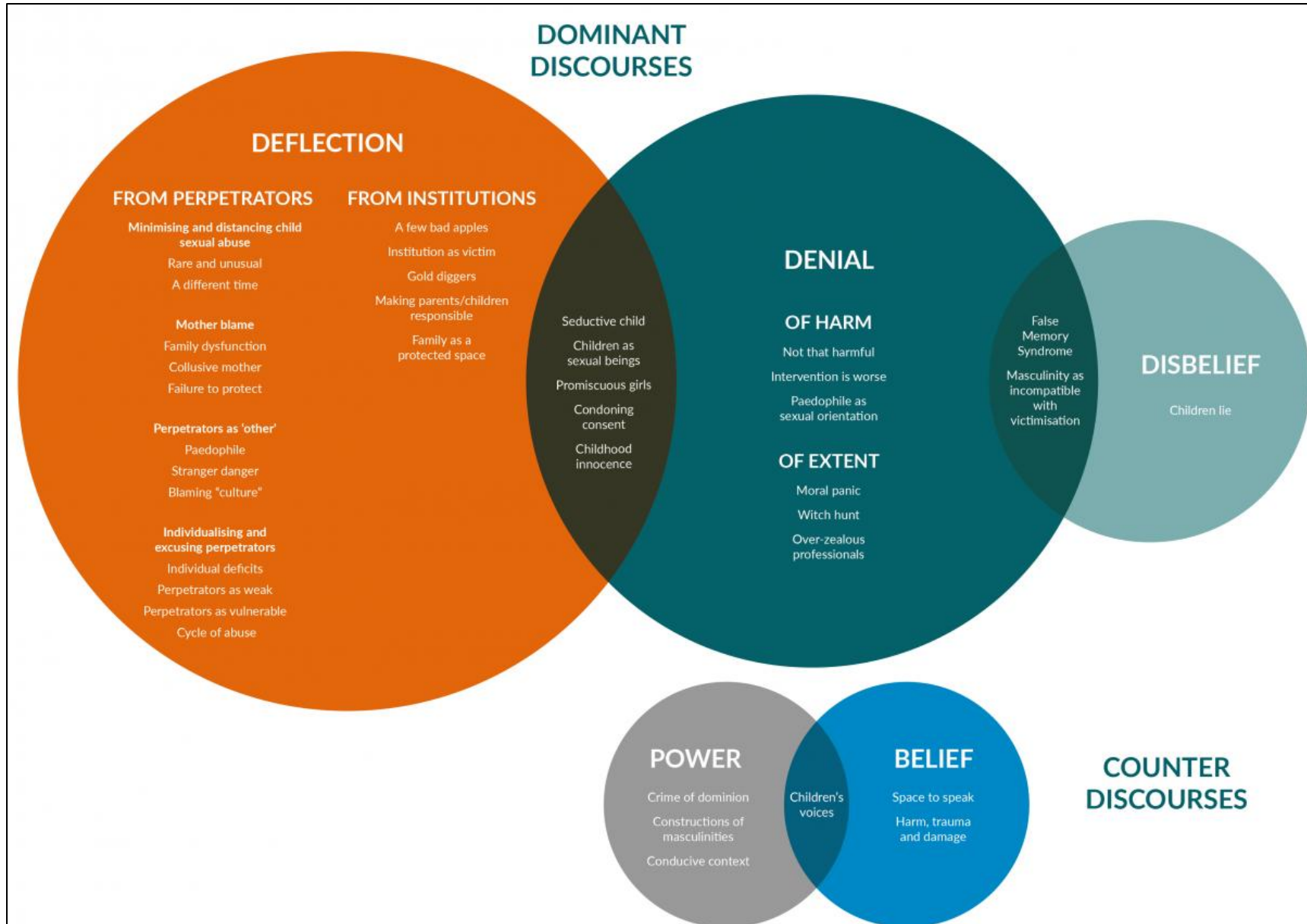


Figure 1.1

Child (Sexual) Abuse related Victim-blaming Discourses.

Note: Reproduced from Lovett et al., 2018. This publication is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated.

Victim-blaming reinforces existing power structures and allows child abuse to continue thriving, creating a relaxed environment for perpetrators and a hostile environment for survivors. Whether individuals and institutions realise it or not, victim-blaming functions to protect perpetrators, empowering them to abuse and evade criminal justice. Thus, survivors are pushed into silence, where they refrain from disclosing abuse, reporting, and seeking out supports to process trauma due to fears of not being believed or not being considered as ‘real’ victims. Survivors are blamed, shamed, trapped, exploited, and retraumatised by the very justice systems and supports that they are directed to seek help from. Ultimately, it is in the best interests of abuse perpetrators, including state and faith-based institutions, for victim-blaming discourse to sustain cultural dominance – and media representations play a significant role in achieving this.

1.2.1 Mass Media Representations

Meaning and discourse are constructed, exchanged, and articulated through language, reliant on our shared access to it (Hall, 1997; 2013). Within this thesis, ‘language’ is theorised fluidly, extending the bounds beyond “linguistic aspects of wider social practices” (van Dijk, 2006). Language is thus any “system of representation” (du Gay et al., 1997, p. 13), with sign systems that become codified through repeated use and reiteration via mediatised sites. In alignment, social psychologist Kenneth J. Gergen (1992) highlights that there is a primary message across literature to be drawn:

...our formulations of what is the case are guided by and limited to the systems of language in which we live. What can be said about the world – including self and others – is an outgrowth of shared conventions of discourse (p. 4)

Across communication and discourse studies, it has long been recognised that mass media representations possess the persuasive power to shape and distribute social knowledge, meaning and discourse (Matheson, 2005). Such social knowledge is constructed and articulated across five interconnected cultural sites of media texts, theorised as the ‘Circuit of Culture’ (du Gay et al., 2013; du Gay et al., 1997): production, concerning the contexts, processes and practices of

creation, marketing and distribution; consumption, concerning audience interpretations, responses, and whether they align or diverge from the creator's intentions; regulation, concerning the rules, frameworks, and ethical guidelines that have guided and/or restricted production and dissemination; identity, concerning how language is informed by, and informs, individual and collective identities, identities that are "always in process" (van Zoonen, 1994, p. 123); and representation, concerning the language systems used and discourses represented, informing us of the possible "identities we can become – and how" (du Gay et al., 1997, p. 39). Within these five cultural sites, social knowledge and meaning are constructed, interpreted, accepted and/or challenged, ultimately informing attitudes and beliefs and shaping culture.

Media representations have thus undoubtedly perpetuated stigmatising discourses about child abuse and violence against women and girls, enabling victim-blaming to sustain cultural dominance. Hargrave et al. (2024) conclude their study by highlighting the media's influence: "The media, justice system, and public discourse should emphasise that crime is the fault of criminals, not victims" (p. 2). Chartered forensic psychologist and violence against women and girls expert, Dr Jessica Taylor (2020), highlights the influence of media representations within her exploration of victim-blaming culture, as Figure 1.2 represents. Each level of this ecological framework overlaps with and informs the other, and discourse permeates, informs and is informed by each level. Although specific to victim-blaming in contexts of male violence against women and girls, similar mechanisms, systems, beliefs, and global communication sources work in tandem to inform discourse about child abuse and healing, influencing the victim-blaming of abuse survivors.

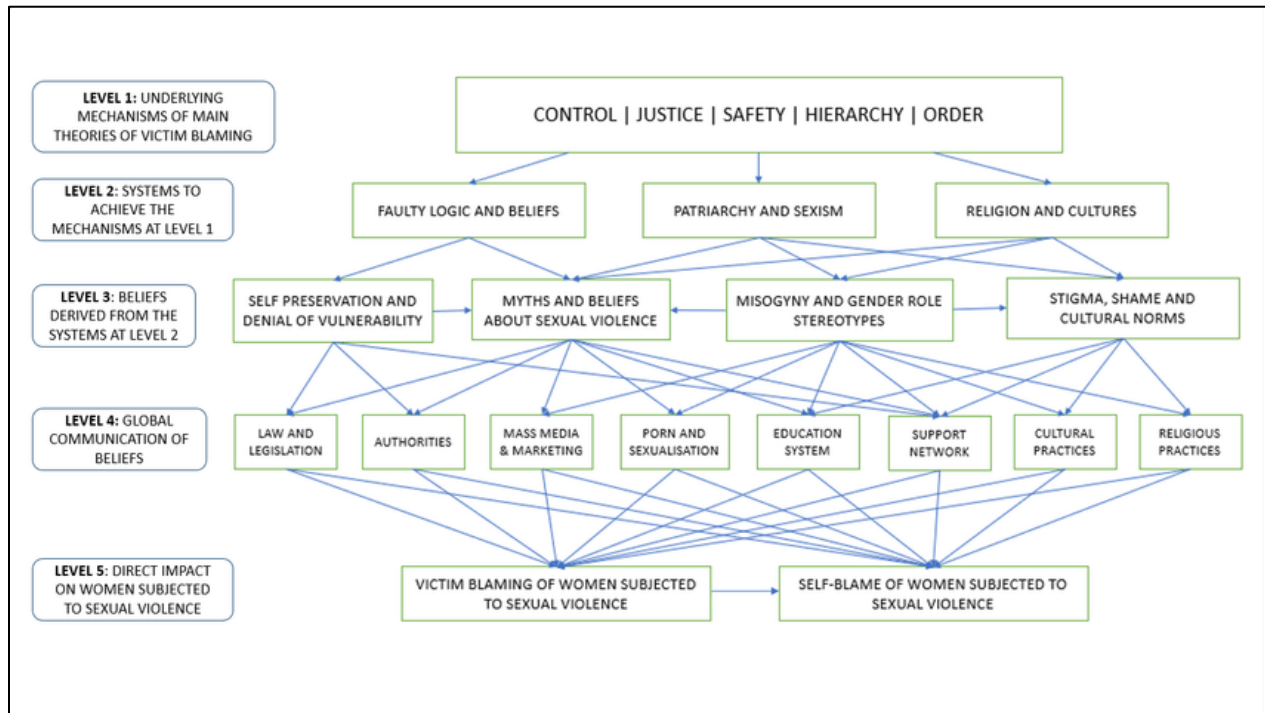


Figure 1.2

Framework of Victim-blaming of Women Subjected to Sexual Violence.

Note: Reprinted from *Why women are blamed for everything* (p. 359), by Jessica Taylor, 2020. © VictimFocus and Dr Jessica Taylor, 2020. Reprinted with permission.

Across mass media, child abuse – how it presents, where it occurs, to which children, and who perpetrates abuse – has been typified and represented in ways that are informed by intersecting forms of oppression and violence, including racism, sexism, and classism. Societal understandings, beliefs, and attitudes about child abuse, and what it means to survive abuse, are formed in association with such mass media representations. A longstanding discourse in Aotearoa, which mass media representations have formed, is that child abuse is a ‘Māori problem.’ This discourse positions Māori as likely to abuse and as the sole perpetrators of child abuse, sustaining “the oldest colonial stereotypes of the lazy, ignorant native or wild savage” (Meek, 2013, p. 32). Much evidence exposes how media representations have contributed to constructing and perpetuating this discourse, sustaining “simplistic racial dichotomies” (Keenan, 2000, p. 5), colonial violence, and informing victim-blaming culture. McCreanor et al. (2014) highlight the deliberate use of violent and threatening language in newspaper reporting about abuse involving Māori, particularly child abuse and family harm. The study involved a focus group of participants who indicated that such discourses influence the discrimination against Māori in the ‘real world’ (McCreanor et al., 2014).

Māori mothers are over-represented as child abusers, vilified by media and society (Beddoe, 2014; Deckert, 2020). Most news stories (83.3%) about Māori women offenders are framed unfavourably, in comparison to reporting on the crimes of Pākehā women (Deckert, 2020). Similarly, in an analysis of news media surrounding two sensationalised and high-profile cases of child abuse/murder (Nia Glassie and the Kahui twins), the Māori Mothers were unfairly represented by news media as partially responsible for the deaths, despite being absent from the scene of the murders (Maydell, 2018; Kenix, 2011). They were victim-blamed – an interpretation consistent with McCreanor et al.’s (2014) finding that Māori are “frequently labelled as possible or actual perpetrators of crime [based] on superficial judgements, often by victims” (p. 1).

These findings and the implications of media representations on social attitudes towards Māori were explored by Angela Moewaka Barnes & McCreanor (2023), echoing the argument that lawyer Moana Jackson (1987) made decades ago about racist media representations of Māori. Moewaka Barnes & McCreanor (2023) summarise:

Our new empirical work with audience data points out the implications of diverse media formats in reproducing and maintaining racist, colonising discourse and practice in contemporary society. We are clear that such dominant discourses impact Māori and Pākehā but in very different ways, including uncritical acceptance of stereotypes and norms by the latter. Māori, however, do not consider such representations as merely entertainment or neutral but understand and experience their power to cause harm and pain (p. 30)

Revisiting Figure 1.1, the notion that child abuse is a Māori problem is a ‘discourse of deflection’. It deflects from the fact that Māori (alongside queer and disabled groups) are disproportionately affected by crime (including abuse related) and harmful stereotypes that may perpetuate victim-blaming, and consequently experience compounding harm (Hargrave et al., 2024). It deflects from the impacts of historical trauma and colonisation, “the root cause of intergenerational issues, particularly child abuse within Māori families,” as Māori Research scholar Leonie Pihama explains (2016, as cited in Kerr, 2016, para 4.). It ignores how colonisation has shattered the cultural framework of Māori, which enabled them to keep their children safe: “And I think that model of the nuclear family, the domestic unit, is actually an unhealthy model for a culture of people who are used to having a collective relationship” (Kerr,

2016, para. 4). It deflects from how colonial institutions continue to abuse and traumatise Māori children, who disproportionately represent the abuse in state care survivors (Abuse in Care Royal Commission Inquiry, 2024). Survivor advocate and social worker Gwyneth Beard draws on decades of experience to argue that:

Oranga Tamariki needs to be shut down, they don't deserve to have the name Oranga Tamariki. They are an organisation that is just about power and control. I have sat at many tables over the last five years and probably only 5% have sat there for good outcomes, the rest are just all about trying to disempower whānau (2021, p. 258)

How could child abuse ever be a 'Māori problem,' when child abuse is an issue of power and colonial violence – and therefore, is an *everyone* problem that we must give attention to? Yet, this discourse remains dominant; one example of how media representations can inform and uphold victim-blaming culture. As aforementioned, discourses of deflection (and victim-blaming discourses broadly) function to help abusers evade accountability, impacting how survivors are interacted with, responded to, and how survivors identify with and feel about themselves. Moreover, impact upon wellbeing often manifests as self-blame and shame, whether survivors identify with the abuse experiences and dominant discourses that are represented.

I received my documents from the NZ police. Memories and details are foggy, and I wanted clarity, validation, and evidence of the abuse occurring, and the frequency of the violence over the first 18 years of my life. I was not expecting a stack of documents, but I was expecting more than 7 recordings, more detail than a few sentences, professional language and confirmation of at least one investigation into child abuse: "All of these events occurred prior to a major review of our family harm attendance procedures so the amount of information recorded is minimal unfortunately...I can see no occurrences where an investigation into child abuse was launched by police." But the evidence is glaring, even in the seven documents I received covering a period between 2006-2007⁵:

⁵ Spelling and grammatical errors are presented here exactly as they were written by police at the time and presented in the documents I obtained upon request.

09/02/2006: [Father's] drug taknig and not working – resulted in load shouting and anthea becoming scared and phoning police

09/09/2006: While on the phone to the police, [Father] told children if their mother wouldn't let him in he would cut his own throat

13/01/2006: [Father] ARRESSTED FOR WILLFUL TRESSPASS

01/01/2007: Children did not hear any threats. Female inconsistencies in previous statements to Police. Both parties couldn't lie straight in bed!!!!

15/02/2007: [Father] K9'd for BOB [breach of bail] and WTA [warrant to arrest]

I fell through the cracks, countless times, despite the evidence being clear. My experiences were trivialised, and I was dehumanised. And I wonder, almost fifteen years later, how much influence the stigma and misconceptions surrounding abuse, mediated how police responded. We were a nuclear family, and although working class, always looked presentable, and there were no visible physical signs of violence. I always did well in school and made friends easily. And both, particularly my father, knew how to victim-blame and say all the right things when it came to interacting with police and the courts. Neither of them looked like 'monsters,' and I didn't seem like a victim...

1.3 Autobiographical Documentaries: Sites of Power & Social Impact

This research is informed by the understanding that meaning is culturally bound, articulated through language, and heavily influenced by how media communications represent discourses about experiences and phenomena. However, certain mediums of language possess significant power and control over constructing meaning – and thus control over perpetuating discourse and upholding, or challenging, a culture of victim-blaming where abuse can thrive.

Documentary films are sites of immense power and influence. Unlike other mediums of language, and other audio-visual forms, documentaries are intrinsically representations of the historical world: documentaries “claim a privileged relationship with the truth about the material with which they concern themselves” (Bonner, 2013, p. 60). Documentaries present a specific version of reality and are subjective representations of the world (Nichols, 2017). However, documentaries may be perceived as – or are expected to be – inherently objective, unbiased and

factual. Consequential of this relationship, documentaries wield discursive credibility. By this, I mean that documentaries can represent discourses as factual and legitimate, influencing audience perceptions and attitudes about social issues and phenomena – like that of child abuse and healing. This is problematic if documentarians un/intentionally misrepresent experiences or the phenomena in question, represent discourses that perpetuate stigma, prejudice, or are rooted in oppression. By contrast, they can be weaponised as tools of activism and support for social movements, potentially influencing social change (Hot Docs, 2018; De Rosa & Burgess, 2014; The Fledgling Fund, 2009).

The extent to which social change is possible is a burgeoning area of debate, as measuring it on a ‘large scale’ remains somewhat elusive. However, there is a growing body of scholarship surrounding the social impact of documentary, which reveals the “multidimensionality of impact” that documentaries can afford (Nash & Corner, 2016, p. 4). In this context, ‘impact’ is defined as “the change that happens to individuals, groups, organisations, systems and social or physical conditions” as a result of media production (Chattoo & Das, 2014, p. 7, as cited in Nash & Corner, 2016, p. 230). Similarly, Clark & Abrash (2011) draw attention to the ability of social issue media to “inform, engage and motivate publics” (p. 8, as cited in Nash & Corner, 2016, p. 230). Documentary theorists Kate Nash and John Corner (2016) explain that these definitions reveal that impact can be multidimensional in terms of effecting “different change targets (from individuals, to organisations, to social and political structures)” and “different change goals (from awareness, to attitude, behaviour and structural/policy)” (p. 230).

In this way, documentaries can have profound effects on individual viewers, localised audiences, and the “community of practitioners” who create them (Nichols, 2010, p. 13). One way that documentary representations may contribute to such impact is by influencing discourse. Mass media communications heavily influence the construction and perpetuation of discourse – and as I have articulated, specific links have been drawn between discourse about child sexual abuse and victim-blaming culture.

The potential for documentaries to afford multidimensional impact, perpetuate discourses that are de/stigmatising, combined with their innate power and influence, highlights how documentary representations are always ethically charged: the power, control, and privilege inherently held by documentary filmmakers presents ethical implications and concerns for

documentary participants, viewers, and creative crew, including the filmmaker (Nichols, 2006). Thus, the power of documentary viewing and filmmaking should not be underestimated. Rather, both warrant further investigation.

Autobiographical documentary representations may create, complicate, or exacerbate existing ethical conundrums, since autobiographical filmmakers are “connected to pre-existing tensions in a video or filmmaker’s life” (Citron, 1999, p. 273). Where representations of child abuse and healing are concerned, this may amplify ethical issues or evoke new concerns.

Informing ethical issues and viewers’ responses are the audio-visual representational strategies and documentary codes and conventions utilised by filmmakers. They inform filmmakers’ ability to represent discourse, evoke affect within viewers, shape viewers’ perceptions of the truth value of the representations, and minimise or exacerbate ethical concerns.

The complex interplay of these aspects – or this ‘language of documentary filmmaking’ – enables documentary filmmakers to ‘represent the unrepresentable’ or our “subjective states of mind,” as documentary theorist Annabelle Honess Roe suggests upon theorising the function of animation (2013, p. 25). Regarding representing experiences of trauma, this is particularly significant. Trauma is often an embodied experience, and literary language may be limited in communicating or expressing what it feels like. Filmmaking and viewing can offer a multi-sensory experience, which can allow survivors to represent discourse and evoke affect in ways that authentically capture their experiences as survivors, including healing experiences.

1.4 Research Questions

This thesis sits at a juncture between the prevalence of child abuse and victim-blaming culture, how media communications influence stigmatising discourse about child abuse, the discursive and affective power of autobiographical documentaries, and their ability to represent experiences of trauma in ways that otherwise may be impossible.

Together, these strands spotlight the need to direct attention towards investigating and understanding the therapeutic functions of engaging with autobiographical documentary representations about abuse and healing. Specifically, for survivors who have created autobiographical documentary films (henceforth, survivor-filmmakers) and survivors who engage with these accounts as viewers (henceforth, survivor-viewers).

Consequently, I pose the following research questions for exploration:

- What are the potential wellbeing impacts for child abuse survivors who engage with the autobiographical documentary filmmaking process to represent their experiences of child abuse and healing?
- What are the affordances of the production of, and mode of expression afforded by autobiographical documentary filmmaking for child abuse survivors?
- What are the potential wellbeing impacts/outcomes for child abuse survivors who engage as viewers?

The extent to which wellbeing outcomes and affordances coincide or diverge is explored, seeking to contribute insights about how autobiographical documentary filmmaking and viewing may function as a potential resource, healing tool, trigger, or instrument for re-experiencing and re/processing abuse and traumatic memory – and how autobiographical documentary filmmaking and the representations offered inform outcomes.

The impact on survivors more broadly is considered within this exploration. This is with the understanding that documentaries possess the ability to catalyse change on institutional and organisational levels, potentially impacting how survivors are responded to and perceived, and how survivors perceive themselves. This concerns an array of contexts, including support services, criminal justice systems, and therapeutic practice.

1.4.1 Contemporary Relevance: Moving Towards a Golden Age of Accounts About Abuse, Trauma, and Healing?

The wellbeing outcomes of producing and viewing documentary representations are of contemporary significance, given the undeniable audience demand for documentaries, and a seemingly burgeoning demand for content about trauma, including personal accounts of abuse. Such interest is reflected in literary and audio-visual media consumption trends. Since 2020, *The Body Keeps the Score* has found mainstream success, spending over 33 weeks on the New York Times Bestseller list (despite being released in 2014 by renowned psychologist Bessel van der Kolk). YouTube continues to provide a platform for people to share their trauma healing journeys in casual formats. TikTok now has billions of videos marked with hashtags such as

‘Trauma,’ ‘TraumaTok,’ and ‘TraumaDumping,’ which have garnered the investigative attention of academics (O’Connor et al., 2025; Woolard et al., 2024).

Debates surround whether we have moved beyond a “documentary boom” (Anderst, 2017, p. 255), or if we ever entered “an undeniable golden age for documentary filmmaking”, in recognition that “funding for documentaries has increased substantially...and the audiences for documentaries have grown exponentially in the last 10 years” (Powers, as cited in del Barco, 2019, para. 11). Contrasting this argument, Fremantle’s global head of documentaries Mandy Chang argues that we have shifted into a “corporate age” of documentary practice (Vourlias, 2022, para. 8). This refers to how mainstream documentary production evolves and shifts focus, according to demand and commercial success. Presently, true crime genres account for most mainstream documentaries on major streaming platforms such as Netflix (Iordache et al., 2022), thereby almost guaranteeing mass viewership and revenue. This trend is another indication that non-fiction accounts and representations of trauma are culturally relevant and sought after.

Whether we are in a golden or corporate age of documentary, it remains that we are, at present, swimming in audio and visual documentary content that demands investigative attention. Documentaries are ethically charged public artefacts, widely accessible upon their release (this is age-restriction permitting and depends on geographical restrictions; however, restrictions may be bypassed with the right kind of technology). Documentaries will continue to sustain their cultural relevance, given their commercial viability. I share the perspective of documentarian Nanette Burstein (Clarke, 2024), who maintains that even amidst precarious times for the media industry:

What I don’t think is going to happen is that nonfiction is going to be sidelined. If anything, I think it should be embraced because you have so much interest and so many eyeballs, and it costs a fraction of the price of scripted (para. 6)

There is steady, growing demand for autobiographical documentaries representing personal accounts of abuse and trauma, as they continue to be produced and/or distributed, including by streaming giants. This suggests the potential for growth in the production and consumption of such accounts within mainstream industry spaces of documentary practice. Outside of mainstream practice, the calibre of documentaries selected at film festivals across the globe over the last several years demonstrates professional and public interest.

The steady presence of documentary films about abuse related trauma across both contexts is a sign of the times. Survivors, advocates, abuse and violence prevention professionals, and therapeutic support professionals continue to call for societal commitment to confronting and exposing the prevalence and acceptance of abuse, and the amplification of survivor voices. Survivors are responding to this call. Even amid the somewhat precarious state of the documentary filmmaking industry, there are documentarians who feel compelled to produce accounts, including autobiographical ones, about experiences of trauma – and who possess and expend the stamina and grit required to create independently, with small creative crews and budgets. If nothing else, we are moving towards entering a golden age of trauma (including abuse related) centred narratives and personal accounts. This further emphasises the pressing need to examine the wellbeing impacts of creating and viewing autobiographical documentaries, how they may contribute to cultural dialogue about abuse and trauma, and the facilitation or disruption of survivors’ healing.

1.4.2 Recognising Autobiographical Documentaries as ‘Works of Art’

It is important to acknowledge that my research questions and thesis foci risk perpetuating a reductionist orientated understanding of survivor-led creative practice. By reductionist orientated understanding, I am referring to how survivor-led creative works are often reduced to being interpreted through a therapeutic lens within academic contexts (Matthews, 2025). However, as Dr Lauren Matthews demonstrates through challenging the “common assumption that art created by victim-survivors can only be viewed through a therapeutic lens” (p. 116), survivor-led creative practices may also be positioned as works of art. It is this aspect of survivor-led creative practice, in which art and message are centred rather than therapeutic outcomes, that Matthews argues is “crucial for survivors to genuinely engage in their right to recovery, justice and visibility” (p. 117). Consequently, I perceive autobiographical documentaries that represent experiences of child abuse and healing as works of art, whilst acknowledging their potential to function as healing resources. This thesis is thus situated within the productive tension between both perspectives, acknowledging autobiographical documentaries as artistic works as well as potential healing resources for child abuse survivors. I have strived to honour the texts in question as artistic expressions through explicit acknowledgement here, and by dedicating

chapter five to providing an analysis of the technological, discursive, and affective aspects of each documentary.

1.4.3 Research Methods and Addressing the Literature Gaps

This thesis seeks to represent and amplify the voices of survivors, who continue to be shamed into silence, and whose voices remain scarce within academic literature. Historically, researchers in fields related to child abuse, violence, and trauma have been positioned as experts of survivors' lived experiences. Survivors have been treated as 'subjects' to be studied, clinically observed and spoken for, as opposed to being treated as active contributors in the construction of knowledge which informs how they are perceived, worked with, and supported. Interviewing survivors of abuse related trauma only gained traction and became common practice during the 1990s (Brzuzy et al., 1997). During this decade, advocates and professionals were still convincing the public about how common, pervasive and traumatic child sexual abuse experiences are, impacting wellbeing in ways that follow the child into adulthood. Child sexual abuse is "strikingly unusual for being repeatedly discovered, re-established and discredited over time" (Nelson, 2016, p. 91, as cited in Lovett et al., p. 8). In 1998, the American Psychological Association (APA) (the most powerful institution in influencing how abuse and trauma are responded to, shaping the landscapes of psychological practice) published an article in their *Psychological Bulletin* (Goode, 1999), concluding that child sexual abuse does *not* cause pervasive or significant harm to children; another example of how institutions have failed children and survivors.

Remnants of victim-blaming discourse continue to permeate academic literature, only more subtly through the language used. A study exploring the dominant discourses of child sexual abuse, for example, employs the terminology, "young people who have had sexual interactions with adults" (Mulya, 2018, p. 1). Such language perpetuates victim-blaming by positioning sexually abused children as consenting participants, as opposed to victims of 'child rape,' 'abuse,' 'assault,' or 'exploitation.' Despite how progressive and aware societies and bodies of professionals claim to be, little has changed regarding how survivors are responded to, with even the so-called 'experts' and their 'cutting edge,' 'peer-reviewed' literature failing survivors.

Consequently, the body of knowledge surrounding experiences of child abuse survivors is only beginning to flourish. Particularly where intersectionality is the lens through which the

experiences are understood, and in contexts where a trauma-informed, anti-pathologising approach is applied (outlined in chapters two and four). This thesis thus seeks to contribute to the flourishing of marginalised survivor voices in the production of knowledge. It exists to combat and resist the silencing of survivor experiences, challenge stigmatising discourses, and ultimately victim-blaming culture.

Addressing the research questions primarily involved investigating the lived experiences of survivor-filmmakers who have opted to publicly voice and express their experiences of child abuse and healing through documentary. Occupying space as both filmmaker and main participant positions survivor-filmmakers as especially vulnerable to experiencing detrimental impacts through the documentary's creation and reception.

In-depth semi-structured interviews were conducted with four survivor-filmmakers: Gwen van de Pas (*Groomed*, 2021), Tracey Arcabasso Smith (*Relative*, 2022), Jasmín Mara López (*Silent Beauty*, 2022/23), and Ginene Humphrey (*Dandelions*, TBC). At the time of the interviews, the survivor-filmmakers were at diverging stages of their filmmaking/creative processes. They were producing independently, with low production budgets (self-funded, fundraised/crowd-funded, and secured through small grants and investments).

The scope of survivor-filmmaker accounts is limited to four, enabling me to provide the care required of a trauma-and-violence-informed (TVI) interview approach when sensitive topics are explored (as outlined in chapter four). It facilitates the emergence of rich data, providing opportunities for contextual nuances to be revealed across experiences and informing the textual analyses of their autobiographical documentaries. Literature that includes autobiographical documentary filmmaker perspectives, in conjunction with textual analyses and/or audience reception studies (ARS), is scarce. Research surrounding documentary ethics has been over-reliant on conducting textual analyses to theorise impacts, without using empirical evidence (Nash, 2011). This thesis seeks to address this literature gap by providing access to accounts from four contemporary autobiographical documentary filmmakers: Gwen van de Pas (*Groomed*, 2021); Tracey Arcabasso Smith (*Relative*, 2022); Jasmín Mara López (*Silent Beauty*, 2022); and Ginene Humphrey (*Dandelions*, TBC).

Audio-visual and affect analyses of *Groomed*, *Relative*, *Silent Beauty*, and *Dandelions* explore the discursive function of the documentaries – what discourses about abuse and healing are

represented, how they are identified through representational strategies and aesthetics, and how they are informed by the affordances of autobiographical documentary.

To examine the (potential) impacts on survivor-viewers who access autobiographical documentaries about abuse and healing, interviews were conducted with six wellbeing professionals: therapists, clinicians, and other support providers. To inform and enrich their responses, wellbeing professionals were given the option to view the three released documentaries, *Groomed*, *Relative*, and *Silent Beauty*.

Wellbeing professionals, while not replacements for survivor voices, are equipped to ascertain how survivors may respond to these texts, given that they have experience working with trauma in some capacity and have worked with abuse and child abuse survivors. Additionally, interviewing wellbeing professionals has allowed me to ascertain insights about how autobiographical documentaries may function as a potential resource, or instrument for re-experiencing trauma, within professionally guided support contexts.

If it were ethically feasible, I would have instead conducted an audience reception study (ARS) with survivors, with a focus group interview about their viewing experiences and responses. This exclusion is a glaring limitation of the thesis and methodological design, which I discuss and reconcile in chapter four.

1.5 Survivor-researcher Positionality: A Fourth Research Question

I am determined to live a fulfilling life, beyond the confines of what my parents have demonstrated as a normal way to live: surrounded by violence and abuse, traumatised, silenced, and ashamed of my very existence...I am determined to heal, in ways that do not rely on receiving criminal justice – because I know I'll never get it. No survivor can trust our systems when they are the abusers and perpetrators too...I am a weed that refuses to die.

This thesis is rooted in my lived experiences of child abuse and ongoing healing during adulthood – the ‘roots’ of which you, the reader, have encountered throughout this introduction. These roots are represented by the italicised passages, extracted from critical autoethnographic engagement throughout the research (explained further below). I have let the passages speak for themselves until now, intentionally refraining from directly acknowledging or responding to

them. They exist and are *there*, but remain unaddressed, hiding in plain sight. This reflects how survivors' voices remain on the periphery of society. Not seen, heard or valued, or informing the culture surrounding abuse, as much as one might assume.

The lingering of the passages also reflects and emphasises the impossibility of untangling myself and my healing process from carrying out this project. The passages offer experiential evidence of the arguments made, demonstrating how I have conceptualised the topic and formed the research questions in ways that are deeply grounded in my experiences of childhood abuse – and experiences now, as I relentlessly strive to cultivate a fulfilling life while navigating a culture that is counterproductive to the healing of survivors. So, I have always sought out stories about other survivors, whether those stories are shared verbally in conversation with others, on blog sites and social media platforms, in novels, and of course through documentary film.

This all speaks to the impossibility of being a truly objective researcher: “Indeed there is no theory that is not a carefully prepared fragment of some autobiography” (Valéry & Guenther, 1954, p. 213). No matter how much scholarly rationales and theory we attempt to hide behind, our identities, beliefs, values, assumptions, and experiences influence everything, often subconsciously. I reject the fallacy that objectivity and abstract pursuits of knowledge are possible for researchers to achieve. This is an understanding that is grounded in positivist ideology – which I am critical of for creating an ‘us versus them’ divide between the researched and researcher; between the client and psychologist; between the traumatised and non-traumatised. It is often perceived as ‘unprofessional’ to identify with both, including within academic contexts and trauma and abuse support contexts; stigma that I fundamentally reject.

In an act of rebellion against positivist assumptions, I position my identity as a ‘survivor-researcher’. In their literature review, survivor-researcher Dee Michell (2020) highlights that most scholars who applied ‘survivor-researcher’ were referring to the work of survivors of psychiatry; those who have experienced psychiatric treatment and users of mental health services, conducting research to question its validity and ethical appropriateness in the hopes of transforming existing systems. Like Michell (2020), I use ‘survivor-researcher’ to position myself as someone who has survived traumatic events, who is still affected by trauma, actively healing, and who is undertaking academic research in the same areas. I do not attempt to

minimise my identity as a survivor-researcher. Rather, I embrace and lean into this identity in attempts to enhance the research, ultimately informing the safety of participants and myself.

In response to my positionality and identity as a survivor-researcher, in conjunction with the lack of existing literature that explores the benefits and pitfalls of conducting research as a survivor-researcher (clarified in section 1.5.1), I pose an additional research question for exploration:

- What affordances do survivor-researchers (or lived experience researchers, broadly) bring to research projects investigating autobiographical documentary representations of child abuse and the experiences of survivor-filmmakers?

It is important to clarify that the investigation of this fourth research question is secondary to the three primary research enquiries; an investigation that I foresee developing within a network of researchers and practitioners in future research. This secondary research focus is reflected in the thesis' structure. While the findings chapters are primarily dedicated to (1) addressing the core research questions surrounding the potential wellbeing outcomes for survivor-filmmakers and survivor-viewers, and (2) exploring the experiences of the research participants, the fourth research question pertains to the methodological framework. Consequently, this question is anchored and addressed most significantly within the methodology chapter, before it is traced through subtle touchpoints in the findings and synthesised within the discussion chapter.

1.5.1 Critical Autoethnography

In response to my positionality and to generate data that I can analyse to answer the fourth research question, I take an autoethnographic approach to the research. I have engaged with critical autoethnography, which communications scholars Carolyn Ellis and Arthur Bochner (2000) define as “an autobiographical genre of writing that displays multiple layers of consciousness, connecting the personal to the cultural” (p. 739). Autoethnography unabashedly and evocatively embraces the personal, seeking to put readers *in* the experience, appealing to their hearts, senses, and their intellects (Bochner & Ellis, 2016). Thus, “autoethnography is not only a research methodology but also a way of life” (Bochner, 2022, p. 15, as cited in Bochner, 2020). This challenging of traditional research approaches is where its criticism lies.

However, as a survivor who is perceptive to how abuse permeates all facets of society, it makes sense politically why autoethnography has been discounted as ‘the genre of doubt’ (Bochner &

Ellis, 2022; 2016). I argue that autoethnographic accounts can pose threats to the status quo and existing power structures, both within and beyond academic and research institutions. Bochner & Ellis (2022) argue:

In the 1990s, we formulated autoethnography strategically as a mode of resistance to conventional ethnographic writing practices, as an ethnographic alternative, as a critical response to concerns about silent authorship and researcher reflexivity, and as a humanizing, moral, aesthetic, political, and personal form of representation. We took what Rorty (1991, p. 76) called ‘an experimental attitude’ that eschewed the objectivity of laws and theories in favor of a ‘radical empiricism’ in which we make ourselves experimental subjects and treat our experiences as primary data (Jackson, 1989) (p. 15)

Thus, I argue that existing criticisms of autoethnography and the radical empiricism underpinning them function to create a smokescreen. They are another covert and ‘legitimised’ way for abusers to silence survivors, keep injustices hidden, and evade accountability. It compares to how women autobiographers have historically been criticised as ‘self-indulgent’ and their work ‘confessional’, as if their self-referential accounts are comparable to the catholic tradition of ‘confessing your sins’ – another example of victim-blaming.

My engagement with autoethnography is an act of defiance against such silencing. It is my hope that readers, especially survivors, “get what many of us seek in our lives – whether young or old – a sense of connection and something we can feel deep in our guts and our souls” (Bochner & Ellis, 2022, p. 15). Autoethnography has also been utilised to discover unconscious biases to enhance my reflexivity, and to deepen my understanding of my experience as a survivor-researcher, particularly regarding how my wellbeing and healing have been impacted (discussed in section 4. 9). Experiencing trauma can impact memory, as can examining experiences of trauma, re/processing, experiencing triggers, harm, or traumatisation. It can be difficult to identify harm, re/traumatisation, or even therapeutic impacts when you are ‘in it,’ experiencing them. So, not only has autoethnography functioned to help me ‘remember’ my own experiences where my memory fails, it has also allowed me to re/process my stream of consciousness and experiences across different emotional states and points in time.

Engaging with autoethnography has enabled me to provide an authentic, raw account of how the project has impacted my wellbeing, demonstrating the value of taking such an approach when

deeply connected to the phenomena in question, while exposing the risk involved where experiences of abuse and healing are concerned. Literature surrounding the experiences of researchers who are deeply connected to the sensitive topic in which they are exploring remains scarce. Michell (2020) highlights the sparse literature that uses the term ‘survivor-researcher’, and the lack of literature addressing how survivor-researchers have experienced and navigated retraumatisation. The report titled *A Systematic Review that Evaluates the Extent and Quality of Involving Childhood Abuse Survivors in Shaping, Conducting and Disseminating Research in the UK*, reinforces this literature gap, exposing the “considerable opportunity for improvements in the level, quality and subsequent reporting of research activities involving survivors” (Kennedy et al., 2022, p. 2). Thus, it is my hope that survivor-researchers, or those contemplating conducting research like this, can draw upon my experiences to inform their research approach, including how they safeguard themselves and other survivors, and through what safety protocols and protective factors.

1.6 Thesis Structure

At the heart of this thesis is an exploration of the experiences of survivors who engage with autobiographical documentary films that represent discourses about and experiences of abuse and healing – and discourses about how such experiences have impacted their wellbeing. This introductory chapter has justified this intention by presenting an organised account of how I have come to conceptualise and articulate the research questions, explaining how they will be addressed. I have discussed my positionality as a survivor-researcher and the value of an autoethnographic approach to strengthen reflexivity while honouring my experience as a survivor. I have also introduced a fourth research question to investigate the affordances of conducting such research as a survivor-researcher.

Chapter two offers conceptual and theoretical understandings pertaining to child abuse, trauma, and wellbeing outcomes for survivors. I outline the anti-pathologising framework for understanding human distress, suffering, and trauma that informs the thesis.

Chapter three reviews and synthesises literature that exists at the intersection between autobiographical documentary, survivor experiences, and wellbeing outcomes – particularly therapeutic impacts in the context of healing and processing child abuse related trauma. Several

types of literature gaps are identified, demonstrating how the thesis, through its design and the questions it poses, contributes to addressing them.

Chapter four outlines the methodological framework, delving into the methods of data collection and analysis, and the applied TVI interview framework. Autoethnographical reflections are provided, revealing how my positionality as a survivor-researcher has shaped my engagement with research participants and afforded me the ability to carry out the project ethically. The reflections also reveal how my wellbeing has been impacted in both detrimental and therapeutic ways.

Three chapters of findings follow, each specific to a particular domain of analysis and method(s) of data collection and analysis.

Chapter eight offers a synthesis and discussion of the findings, exploring what their potential implications are for survivors.

Finally, chapter nine summarises the thesis's contributions to knowledge, reiterating significant findings, discussion points, implications, and future research avenues.

Chapter Two: Understanding Child Abuse, Trauma, and Wellbeing Outcomes

2.1 Introduction

Chapter two establishes the framework within which I conceptualise child abuse, trauma, and wellbeing impacts upon survivors, which are foundational concepts that are relevant to the understanding and exploration of survivor experiences. While it is commonplace to offer definitions in the introductory chapter, I have reserved such discussions for chapter two. This enables me to offer a comprehensive justification for the terms utilised, in recognition of the importance of language – and a comprehensive justification of the anti-pathologising approach to trauma that frames the thesis and understandings about wellbeing impacts for survivors.

I begin by defining ‘child abuse’ and argue why I have used the term (and why it should be used in all contexts) as opposed to ‘child maltreatment’; commonly used terminology in academic literature. I define the subtypes of abuse experiences, given their conceptual ambiguity.

Following this, I explain relevant trauma theory, outlining an anti-pathologising, trauma-informed approach, in response to rejecting bio-medical understandings. Several wellbeing impacts, relevant to child abuse survivors within this thesis, are defined and briefly discussed. Attention is directed towards shame, as it is the wellbeing impact that is consistently identified and discussed throughout the findings and discussion.

2.2 The Difficulty and Necessity of Defining ‘Child Abuse’

As a concept and term, ‘child abuse’ is “a modern discovery” (Archard, 1998, p. 62). Three significant socio-political events prompted the global discovery: the late nineteenth-century emergence of welfare organisations that expressed disturbance toward the issue of child abuse; the 1962 conceptualisation of ‘battered child syndrome’; and the shift in societal awareness regarding the prevalence of child sexual abuse that began to take place in the 1970s (Archard, 1998). Attempts have been made to define ‘child abuse’, and such definitions vary across and within groups, professions, cultures, and geographical locations; the meanings one attributes to ‘child abuse’ are socially constructed (Gelles, 1975; Pfohl, 1977, as cited in Hacking, 1991). As moral philosopher David Archard (1998) states, the term’s newness and its ubiquitous but varied

use offer understanding as to why ‘child abuse’ is difficult to pin down conceptually. It partially explains why, more than two decades later, there is still not a cohesive definition that can be used globally to define what constitutes child abuse. The definition of ‘child abuse’ still varies between groups, and such is the case for Aotearoa. There are no state divisions or laws that differ between regions regarding how ‘child abuse’ and related terms (like ‘family harm/violence’) are defined. Yet, confusingly, child welfare organisations and charities do not share universal understandings about what constitutes child abuse and how it might present (Ministry of Social Development, 2023).

Adding to Archard’s (1998) points, the difficulties of defining ‘child abuse’ can be attributed to the emergence of research related to child abuse, child development and child wellbeing, and survivor experiences. Only since the late 1990s, following the adverse childhood experiences (ACE) study (Felitti et al., 1998), have the long-term impacts upon adult survivors been given serious academic attention. Even so, this attention and progress is challenged by the fact that the ACE study continues to be misinterpreted and misappropriated (Taylor, 2020), which is to the detriment of child safeguarding and child abuse prevention.

As academic fields, trauma studies and child abuse move two steps forward, but one step back. Experts have only ‘scratched the surface’ of the impacts of child abuse and their complexity. With the consistent emergence of research come new ways of understanding: human behaviour; how and to what extent such behaviours impact the wellbeing of children; what these impacts may mean for the child’s adult life; the impacts of parenting practices; and which behaviours and parenting practices are considered harmful. Such implications possess the power to inform how ‘child abuse’ is defined on individual, interpersonal, and societal levels, informing legislation, and the extent to which abuse perpetrators are held accountable through criminal justice systems.

Indeed, it is difficult to establish a universal definition of ‘child abuse’ due to the inconsistent application of the term. Thus, for clarity, it is paramount to define ‘child abuse’ and define the subtypes, alongside other relevant terms. The definitions are not intended to infer a binary set of indicators or responses from children to be used to determine if abuse is occurring and whether to act. Abuse manifests in a myriad of ways, and every child victim and adult survivor will respond to abuse uniquely. Furthermore, “indicators do not necessarily prove that a child has

been harmed. They are clues that alert us that abuse may have occurred and that a child may require help or protection” (Child Matters, 2019, p. 7).

2.2.1 Child ‘Abuse’ or ‘Maltreatment’?

As health epidemiologist and developmental psychologist Dr Rebecca Leeb et al., (2008) states, ‘child abuse’ and ‘child maltreatment’ have been used interchangeably within academic literature (see Aadnanes & Gulbrandsen, 2018; Ajilian Abbasi et al., 2014). More recently, however, there appears to be a shift towards organisations including the World Health Organisation (WHO) and researchers using the term ‘child maltreatment’ as a hypernym to encapsulate various forms of child abuse and neglect (see WHO, 2022; Huang et al., 2023; Berzenski & Yates, 2022; Dempster-Rivett, 2022; Teicher et al., 2022; Robinson et al., 2021; Greene et al., 2020; Davis et al., 2018; Moody et al., 2018). The WHO conceptualise neglect as a form of ‘maltreatment’ as opposed to being a form of ‘abuse’, in recognition of the idea that child neglect consists of acts of omission, whereas child abuse consists of acts of commission.

As opposed to ‘maltreatment,’ ‘child abuse’ is used throughout due to the negative connotations of ‘abuse’ and the emotionally evocative nature of such connotations. ‘Abuse’ connotes cruelty and violation. The negative connotations associated with ‘abuse’ place emphasis on the harm and trauma often experienced by survivors and the severity of such impacts. Comparatively, ‘maltreatment’ has neutral connotations, as if the harm inflicted is accidental, somewhat minimising the impacts of the abuse. ‘Maltreatment’ is a term that I have never personally identified with, because it feels almost clinical to say, and fails to capture the devastating nature of my experiences like ‘abuse’ does. As Archard (1998) argues:

...the term ‘child abuse’ has enormous evaluative force. It commands a moral response, one of unequivocal condemnation. What it designates is something that is plainly wrong. The term is thus what ordinary language philosophers used to characterize as a pejorative or ‘boo-word’ (p. 67)

Thus, using ‘abuse’ functions not only to illuminate the serious nature of this research, but to validate the experiences of survivors, including myself as a survivor-researcher. In this way, using ‘abuse’ challenges victim-blaming rhetoric, where survivors and child victims are often gaslit or disbelieved upon disclosing abuse.

‘Child abuse’ is used because I orientate child neglect as a subtype of child abuse, alongside psychological, emotional, physical, and sexual abuse; ‘child maltreatment’ thus does not need to be used as an umbrella term to account for child neglect. Conceptualising neglect as a form of child abuse is aligned with the understandings of various organisations largely based in Aotearoa, who include neglect in their definition of child abuse (Child Matters, 2023; 2019; Ministry of Education, 2023; New Zealand Police, 2023; NSCCP, 2023; Safeguarding Children, 2023; Te Whatu Ora, 2023; New Zealand Government, 2021b). However, neglect is categorised as abuse in this thesis because I position acts of child abuse to involve neglect inherently. To abuse a child is to dehumanise a child, meaning that their dignity, rights, sense of safety and self-worth are damaged, destroyed or denied. To abuse a child is to deny the child a healthy developmental experience that supports their ability to thrive. Denying a child a healthy developmental experience is an act of omission. Therefore, neglect is inherently embedded within all acts of child abuse.

‘Child abuse’ refers to the harming, ill-treatment and deprivation of a child (Oranga Tamariki Act 1989/Children’s and Young People’s Well-being Act 1989). This includes “any form of maltreatment by an adult, which is violent or threatening for the child. This includes neglect” (Government of the Netherlands, 2024). Abuse can pertain to a single act or a series of acts of omission and commission. Defined in what follows, there are four primary subtypes of child abuse: emotional and psychological, neglect, physical, and sexual (Child Matters, 2019). Rarely do abuse types occur in isolation from one another. Abused children and adult survivors may be detrimentally impacted across dimensions of wellbeing, including emotional and psychological, physical, social, and spiritual.

2.2.2 Emotional and Psychological Abuse

Where other forms of abuse occur, emotional and psychological abuse are almost always present (Child Matters, 2019). Family harm expert Janet Fanslow et al., (2016) defines emotional and psychological abuse as:

Any act or omission that results in impaired psychological, social, intellectual and/or emotional functioning and development of a child or young person. It may include, but is not restricted to: rejection, isolation or oppression; deprivation of affection or cognitive stimulation; inappropriate or continued criticism; threats; humiliation; accusations;

inappropriate expectations of, or towards, the child or young person; exposure to family violence; corruption of the young person through exposure to, or involvement in, illegal or anti-social activities; the negative impact of the mental or emotional condition of the parent or caregiver; the negative impact of substance abuse by anyone living at the same residence as the child or young person (p. 77)

According to the National Society for the Prevention of Cruelty to Children (2025), examples of emotional and psychological abuse include threatening, shouting at or calling the child names; making the child the subject of jokes; using sarcasm to hurt, confuse or undermine; blaming and scapegoating the child, including favouring other children; disrespecting and ridiculing the child's individuality; giving ultimatums; failing to recognise the child's limitations, or being hypercritical of them; and not allowing the child to have friends and/or develop community or cultural ties.

2.2.3 Neglect

Child neglect refers to the failure of caregivers, parents, or other adults to meet a child's basic survival needs (with or without intent). Physical neglect, the most well-known subtype, may refer to an adult denying a child access to nutritious food, running water, clothing, and shelter (Kippert, 2023). Leaving a child without assistance for extended periods and leaving an underage child unsupervised are acts of physical neglect (Kippert, 2023). Other kinds of physical neglect, which are counterproductive to a child's development, identity formation, and sense of belonging in the world, include withholding physical touch and affection. Medical neglect refers to the failure to ensure that a child receives appropriate medical or therapeutic treatment, whether physical and/or psychological (Nobilo, 2016). More subtle, and often less identifiable to outsiders, is emotional and spiritual neglect. This refers to the failure to nurture, love, care for, and support a child throughout their development and identity formation (Kippert, 2023). Educational neglect overlaps here, described as the caregiver's failure to ensure their child regularly attends school and/or to meet their child's learning needs by providing them with alternative schooling (Nobilo, 2016).

2.2.4 Physical Abuse

Child physical abuse refers to any act/s by an adult “that may result in pain, injury, impairment or diseases” (Te Whatu Ora, 2023, para. 9). Aotearoa’s Ministry of Health (2002) specifies that child physical abuse “may include, but is not restricted to bruises and welts; cuts and abrasions; fractures or sprains; abdominal injuries; head injuries; injuries to internal organs; strangulation or suffocation; poisoning; burns or scalds” (p. 84). Child physical abuse may include fabricating symptoms of an illness or causing a child to become unwell. I consider physical punishment directed towards a child as ‘discipline’ as abuse.

2.2.5 Sexual Abuse

The WHO (1999) defines child sexual abuse as follows:

Child sexual abuse is the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society. Child sexual abuse is evidenced by this activity between a child and an adult or another child who by age or development is in a relationship of responsibility, trust or power, the activity being intended to gratify or satisfy the needs of the other person. This may include but is not limited to: the inducement or coercion of a child to engage in any unlawful sexual activity; the exploitative use of a child in prostitution or other unlawful sexual practices; the exploitative use of children in pornographic performance and materials (p. 15-16)

Expanding upon the boundaries of the WHO’s (1999) definition, Oranga Tamariki (2020) make a distinction between contact and non-contact child sexual abuse, offering specific details about what acts constitute child sexual abuse in the context of Aotearoa. In their Child Protection Policy, Oranga Tamariki (2020) add that:

Sexual abuse can be any act that involves forcing or enticing a tamaiti⁶ to take part in sexual activities, whether or not a tamaiti is aware of what is happening. Sexual abuse can be, but is not limited to:

- Contact abuse: touching breasts, genital/anal fondling, masturbation, oral sex, penetrative or nonpenetrative contact with the anus or genitals, encouraging a tamaiti to perform such acts on the perpetrator or another, involvement of a tamaiti in activities for the purposes of pornography or prostitution
- Non-contact abuse: exhibitionism, voyeurism, exposure to pornographic or sexual imagery, inappropriate photography or depictions of sexual or suggestive behaviours or comments (p. 8)

The definition of child sexual abuse I subscribe to is underpinned by the notion that underage children do *not* have the cognitive capacity to consent to any sexual acts with adults – whether they are non-contact or contact abuse acts. Any sexual behaviour from an adult, directed towards a child, I consider to be an act of violence, and will be discussed as such in this thesis. As the executive director of Help Auckland, Kathryn McPhillips, powerfully asserts (Akoorie, 2022, para. 6): “children do not *have* sex with adults. Adults *do* sex to children.”

2.3 Trauma Theory: Rejecting Pathologisation

A bio-medical model (and variations, such as the psycho-social-bio-medical model, proposed by psychiatrist George L. Engel in 1977) underpins the practices and understandings of most psychiatrists and clinical psychologists. This in turn informs understandings about trauma, diagnoses, and treatments of ‘mental illnesses’ or ‘disorders,’ and ultimately the therapeutic care and healing of child abuse survivors who are likely to be pathologised as ‘mentally ill.’ An Australian based study reveals that child abuse survivors are significantly more likely to be diagnosed with or meet the diagnostic criteria for mental disorders, when compared with people who have not experienced child abuse (Scott et al., 2023). Survivors had three times the odds of being diagnosed with any mental disorder and five times the odds of being diagnosed with post-

⁶ ‘Tamaiti’ means ‘child’

traumatic stress disorder (PTSD), with odds increasing where abuse was sexual, emotional, or multi-type (Scott et al., 2023).

This thesis does not adopt a bio-medical approach to understanding trauma and human distress. The bio-medical model is critiqued and rejected in the following sections. The theoretical orientation of this thesis demands a conceptualisation of trauma and responses to trauma that is anti-pathology, where survivors are not pathologised as ‘mentally ill’ or ‘disordered.’

2.3.1 Lack of Scientific Evidence

The bio-medical model is rejected because it is underpinned by the fallacy (derived from psychiatry) that there are definitive biological markers or links to psychiatric diagnoses of mental disorders. There is not yet definitive scientific evidence to prove this theory. If there were, appropriate tests would be used to diagnose and treat mental disorders in the same way physical illnesses are tested and treated. Put simply, psychiatry would have advanced scientifically over the last 100 years, but as child psychiatrist Dr Sami Timimi (2014; 2021) criticises, no progress has been made in comparison to other branches of medicine. While many medical conditions are genetic, “there is currently no proof that psychiatric diagnoses or issues result from the mutation of any single gene” (Davies, 2013, as cited in Taylor, 2022, p. 18). Moreover, there is still no scientific proof of a ‘chemical imbalance’ in the brain as a cause for mental illnesses, which the APA (2003) formally confirmed:

Still, brain science has not advanced to the point where scientists or clinicians can point to readily discernible pathologic lesions or genetic abnormalities that in and of themselves serve as reliable or predictive biomarkers of a given mental disorder or mental disorders as a group (para. 4)

Most recently, the chemical imbalance myth was debunked by critical psychiatrist Joanna Moncrieff et al. (2023), who conducted a meta-analysis of studies about the efficacy of antidepressants, finding no basis for their use beyond having a placebo effect. The chemical imbalance myth remains a dominant discourse within society. Classrooms, the internet, media, and healthcare providers are common sources for exposure to the chemical imbalance myth, with healthcare providers playing a significant role in perpetuating it (Schroder et al., 2025). The myth remains the ‘scientific evidence base’ used to justify prescribing antidepressants or

selective serotonin re-uptake inhibitors (SSRIs) as treatment for ‘illnesses’ that can not be proven to exist against medical standards of measurement. Ultimately, there are no objective measurable tests for psychiatric disorders, yet psychiatry continues to masquerade as a hard science, and it is to the detriment of abuse survivors, particularly women and girls (Taylor & Shrive, 2023).

2.3.2 Perpetuating Deficit-based Understandings of the Self

Consequential to the above, a bio-medical model perpetuates deficit-based understandings of the self in response to experiencing trauma (Taylor & Shrive, 2023). A biological cause of an ‘illness’ implies an innate, unfixable condition, while ‘disorder’ implies that there is something ‘wrong’ with the person at their core (Taylor & Shrive, 2023). Consequently, people may feel trapped, disempowered, lose hope, and blame themselves. However, as Benjamin Lahey et al., (2022) argues, longitudinal studies have demonstrated that psychiatric diagnoses are not fixed and can fluctuate over time:

Categorical diagnoses foster a static understanding of psychological problems. Diagnoses incorrectly imply that the individual has a relatively condition that is unlikely to change. Instead, longitudinal studies reveal that people of all ages frequently change from one categorical diagnosis to another over time (Lahey et al., 2014; Shevlin et al., 2017) (p. 5)

Lahey et al., (2022) instead advocates for a dimensionalised view of individual differences in human emotions, cognitions, and behaviour that cause distress and impair functioning (as opposed to a static view of these things as illnesses or abnormalities); an understanding that this thesis seeks to uphold.

Furthermore, while diagnoses can be helpful by offering explanations for behaviour and symptoms, diagnostic labels reinforce the stigmatising narrative of mentally ill people being unreliable, untrustworthy, or unstable. This occurs within interpersonal relationships and systemically, through the institutions and systems that claim to be ‘anti-abuse’ (Taylor & Shrive, 2023).

For example, psychiatric diagnoses are weaponised within criminal and family courts to discredit survivors and to justify the behaviour of abuse perpetrators. Family courts barrister Charlotte Proudman (2025) argues that such victim-blaming often occurs in family court cases, where male perpetrators of violence against women and girls are excused, while defence attorneys position

women and girls as unstable and untrustworthy because of their diagnosis. This prevailing bias can be thought of as a modern-day evolution of the ‘false memory syndrome’ argument, popularised in the 1990s. This discourse of deflection positions mentally ill people as likely to experience false memories, thus impacting the perceived credibility of child abuse victims and adult survivors, particularly in contexts of sexual abuse (Raitt & Zeedyk, 2003).

2.3.3 Reinforcing the Oppression of Vulnerable Communities

The history of psychiatric diagnoses reveals how they have been created and enforced with the primary intention of maintaining social control and order, sustaining patriarchy, white supremacy, and classism. Minorities have been pathologised to obtain control over them. Exemplifying this is the ongoing pathologisation of Black people and women for having normal, natural responses to distress and trauma.

In the 1850’s, a white man created ‘drapetomania,’ a supposed ‘mental disorder’ that explained why enslaved Black people would escape from plantations and enslavers, “pathologising the Black identity and the Black will for freedom” (Shadravan & Bath, 2019, p. 3). In the 1970s, ‘schizophrenia’ was introduced to explain supposed anti-social behaviours, becoming known as ‘the Black man’s illness’ due to the over-diagnosis of Black men, while ‘protest psychosis’ was added to the diagnostic criteria for schizophrenia during the 1980s to control Black people protesting for civil rights (Metzl, 2010). At present, schizophrenia-spectrum disorders are still considered to be ‘the Black man’s illness.’ In comparison to white communities, Black communities are diagnosed with schizophrenia-spectrum disorders three to four times more often (Schwartz & Blankenship, 2014).

The pathologisation of minorities can also be traced to the mass genocide of women and girls during the witch trials of the 1400s. Women and girls have gone from being labelled as ‘witches,’ to being labelled as ‘hysterical’ upon the introduction of ‘hysteria of the womb’ as a disorder in the Diagnostic Statistical Manual of Mental Illnesses (DSM). Much like ‘drapetomania,’ ‘hysteria of the womb’ is not a ‘real’ disorder anymore. Instead, women and girls are now labelled as ‘borderline,’ in relation to the ‘borderline personality disorder’ diagnosis – a modern-day iteration of hysteria (Ussher, 2013, as cited in Taylor, 2020). According to Taylor (2022), in comparison to men and boys, women and girls are up to seven times more likely to be diagnosed with ‘borderline personality disorder’ in response to their

normal, natural responses to abuse and trauma. These claims are substantiated by decades of feminist research and practice. As summarised by Associate Professor and gender-based violence researcher Nancy Ross et al., (2023):

Feminist research and practice led the way in recognising the serious impacts of sexual assault, domestic violence, and childhood physical and sexual abuse that are associated with a loss of confidence, depression, anxiety, and substance use which are then often pathologised (Brown & Stewart, 2008; Burstow, 2003; Butler, 1978; Herman 1992, 2015; Herman et al., 1989; McKenzie-Mohr & Lafrance, 2011; Ross & Morrison, 2020). Nowhere has this process been established as clearly as in the growth of individuals diagnosed with “borderline personality disorder”, a diagnosis overwhelmingly applied to women with a history of trauma and abuse (Becker & Lamb, 1994; Brown, 1992, 2020; Cermele et al., 2001; Herman, 1992; Marecek & Gavey, 2013; Tseris, 2013). Feminists examining the context of women’s lives and the impact on their mental health struggles have argued that women’s misery has often been medicalised (Lafrance & McKenzie-Mohr, 2013; Ussher, 2010) (p. 570)

Such medicalisation of women’s misery is often seen within family courts, where borderline personality disorder diagnoses are weaponised to discredit women survivors of interpersonal abuse and family harm as untrustworthy (Watts, 2024).

The over-diagnosis of schizophrenia upon Black communities, and the over-diagnosis of borderline personality disorder within women-survivor communities, exemplifies how minorities have been, and continue to be, pathologised, victim-blamed and punished for having normal responses to the violent, abusive, and traumatic world around them. Both examples reveal how psychiatric diagnoses are still functioning to oppress, harm, and control. What separates the past from the present is the evolution of the language and terminology applied, where diagnostic labels and criteria are seemingly more ‘scientific,’ and consequently uncritically accepted and perpetuated by professionals and wider society⁷.

⁷ According to Lucy Johnstone (2006), diagnostic labels are also uncritically accepted as they have been used as a “valid basis for conducting treatment trials”, and because policy makers, the media, popular advice columns and many campaigning organisations are still using biomedical terms and concepts” (p. 82). In other words, the uncritical acceptance of diagnostic labels has been informed and perpetuated by various forces of influence.

2.4 Towards an Anti-pathologising Approach to Trauma

In rejecting the bio-medical model for its capacity to further oppress and harm vulnerable people and uphold victim-blaming culture, this thesis instead moves towards an understanding of human distress and trauma through an anti-pathologisation lens. An ‘anti-pathology, trauma-informed’ model to understanding human distress and trauma, put forward by Taylor & Shrive (2023), is adopted and applied. Taylor & Shrive (2023) created an alternative to the DSM and International Classification of Diseases, the Indicative Trauma Impact Manual (ITIM), where their model is conceptualised as:

An approach to understanding mental distress and mental health which considers that a change in behaviour, thought or emotion arises from past or current trauma...the trauma-informed approach to mental health, illness and distress argues that there are undeniable and consistently strong correlations between so called ‘mental health issues’ and human trauma, distress and oppression. Therefore, it is argued that ‘disorders’, ‘illnesses’ and ‘diseases’ are likely to be natural physical and psychological manifestations of human trauma and distress, in response to events and experiences in our lives – not brain abnormalities or mental illnesses (p. 26-27)

Thus, the theoretical orientation of the thesis challenges essentialist understandings, discourses, and ideologies about trauma, abuse, and healing, reflecting a postmodernist emphasis on the plurality of truths and human experiences. Drawing on the work of consultant clinical psychologist and critic of psychiatry, Dr. Lucy Johnstone (2006), this thesis challenges the “whole paradigm” on which the biomedical model is based – “positivist, reductionist, and deterministic”; “characteristics that make biomedical psychiatry not only inappropriate for the study of human beings, but even in its own terms, bad science” (p. 82).

2.4.1 Trauma

Within this framework, trauma is variable and dynamic, contrasting narrow conceptualisations of trauma as a ‘one off’ catastrophic event, such as rape or a natural disaster; how the APA initially defined trauma, as “an emotional response to a terrible event like an accident, rape, or natural disaster” (2024, para. 1). Trauma can be an accumulative experience, often occurring over time and informed by multiple sources or experiences of distress and harm: trauma is any experience

or set of experiences which causes “deep distress, disturbance, oppression, fear, harm, or injury” (Taylor & Shrive, 2023, p. 20). According to Taylor & Shrive (2023), trauma encompasses forms of oppression and social control like racism, misogyny, and capitalism; all of which can be traumatic and distressing to experience. Trauma is universally experienced, but it is still a subjective experience, meaning that what is experienced as ‘traumatic’ for one may differ from another (Taylor & Shrive, 2023). An anti-pathologising, trauma-informed approach, thus recognises that “millions of people will be subjected to daily, chronic, ongoing distress and trauma due to being exposed to oppressive systems, institutions, beliefs, narratives and social norms” including victim-blaming culture (Taylor & Shrive, 2023, p. 33).

2.4.2 Trauma Triggers

Trauma triggers are also variable, dynamic, and unique. They may be any event, occurrence, person, visual, auditory or physical stimuli, or sensation which reminds the person of the trauma or evokes a ‘re-experiencing’ of the emotions or sensations connected to the trauma (Taylor & Shrive, 2023). Through an anti-pathology lens, trauma triggers are survival responses, attempting to protect the person from experiencing further trauma; triggers are normal, natural responses to harm and injustice, as are the trauma responses and coping mechanisms that may be experienced and engaged in (Taylor & Shrive, 2023).

2.4.3 Trauma Responses and Coping Mechanisms

Taylor & Shrive (2023) position behaviour, feelings, and experiences associated with the symptomatology of ‘mental illnesses’ as natural, valid, and expected responses to distress and trauma; responses which may be emotional, psychological, physical, social, or spiritual. For example, instead of positioning a survivor as having ‘PTSD’ due to experiencing ‘symptoms’ associated with the diagnosis, emotional flashbacks, hypervigilance, dissociation, and distrust of others may be identified as trauma responses experienced by the survivor.

Coping mechanisms overlap with trauma responses, both serving to protect the individual. Distrust of others, for example, serves to protect the individual from experiencing further betrayal. Some coping mechanisms are more harmful and socially acceptable than others, which is important to highlight given the potential to justify or validate other abusive or violent

behaviour towards others and the self. As Taylor & Shrive (2023) argue, experiencing abuse and “trauma does not excuse harm committed towards others” (p. 11).

2.4.4 Traumatic Memory

Memories, traumatic or otherwise, are fluid and dynamic, complex and ever-changing, and shaped through the experiences across one’s lifetime. There is a prevailing discourse that traumatic memories are often ‘fragmented.’ Survivors may experience their traumatic memories as being disjointed, incomplete, or even non-existent. The fragmentation of traumatic memory continues to be clinically observed and remains an area of focus within trauma theory, as the existing body of academic literature indicates. However, there is also research that demonstrates that trauma survivors can remember, recall and ‘story’ their experiences of trauma with the same or similar level of ‘accuracy’ and ‘cohesion’ as other memories that are not experienced as traumatic (Taylor et al., 2021; Rubin, 2011). This includes traumatic memories of sexual abuse, which psychology scholar Kirstine Peace et al., (2008) found to be associated with high levels of recall, vividness and sensory detail when compared to other memories. Memory is often experienced as a coherent process, both in retrieval and in reconstruction, with reconstruction arguably occurring every time the memory is recalled or triggered.

2.4.5 Re/processing

Processing memory, traumatic memory, and experiences of trauma are not experiences that occur once or twice. Survivors consciously and subconsciously process their experiences of abuse, resistance, or healing countless times throughout their lives. Processing can be thought of as the development of new understandings, attitudes, or beliefs. Processing is an ongoing experience, as it occurs in response to the thousands of social interactions, memories, and experiences we have each day – including discourses represented across culture. In this thesis, ‘re/processing’ is used to acknowledge the fluid and ongoing nature of processing, and the difficulty of determining the extent to which an experience has been processed.

2.5 Abuse Survivors and Wellbeing Impacts

The wellbeing impacts of retraumatisation, vicarious trauma, traumatic growth, and shame are defined in what follows, due to their relevance to the experiences of survivors who are

represented and discussed within this thesis. This includes the survivor-filmmakers, myself as the survivor-researcher, and the survivors whom the wellbeing professionals refer to. Two of the professionals also disclosed that they are survivors.

2.5.1 Retraumatism, Vicarious Trauma, and Traumatic Growth

Retraumatism refers to the recurrence or exacerbation of trauma, trauma responses, and coping mechanisms. Retraumatism may occur in response to encountering triggers (which are unique to the survivor), and particularly when experiencing systemic oppression and victim-blaming when seeking out supports to re/process the initial abuse.

Vicarious trauma refers to the ‘emotional residue’ of exposure to traumatic stories and experiences of others. Across psychological literature, ‘vicarious trauma’ has been referred to as ‘secondary traumatisation,’ ‘secondary stress disorder,’ or ‘insidious trauma’ (American Counseling Association, 2013). Upon its conceptualisation, the term specifically reflected the experiences of therapists and other helping professionals (McCann & Pearlman, 1990; Saakvitne & Pearlman, 1995). However, vicarious trauma may be experienced by anyone who is exposed to, or who engages empathically with, accounts of trauma and material relating to traumatic experiences. This includes autobiographical documentary representations of abuse.

Emotional, psychological and spiritual impacts of retraumatism and vicarious trauma may involve: experiencing feelings of overwhelm, distress, sadness, shame and hopelessness; a resurgence of emotions, memories, flashbacks, and nightmares; or a shift in identity, world view, values and beliefs. Social impacts may include loneliness and isolation, as well as withdrawal from interpersonal relationships and community ties. Loneliness is a typical trauma response for survivors, particularly where shame and hopelessness are experienced (Thoresen et al., 2018). Trauma theorist Babette Rothschild (2006) theorises vicarious trauma as an aggregation on the nervous system, where the person exposed to traumatic accounts can experience physiological responses, as if their body is unconsciously ‘mirroring’ the nervous systems of the person being supported. Somatic impacts include hypervigilance, dissociation, and burnout.

Traumatic growth refers to positive change experienced by trauma survivors, in response to traumatic experiences and struggles to cope and move forward (Tedeschi & Calhoun, 1995). Change may pertain to detrimental impacts experienced, and trauma responses and coping

mechanisms engaged with. Thus, traumatic growth may be experienced in relation to any or a combination of wellbeing dimensions. Traumatic growth is closely aligned with the spiritual dimension, however, as survivors tend to experience a greater appreciation for life, find new meaning, purpose, and life opportunities, as well as develop a stronger sense of self (Tedeschi & Triplett, 2012).

2.5.2 Shame

Shame is another wellbeing impact that must be considered and defined here, given its prevalence for abuse survivors, its presence across the research findings and my experiences as a survivor-researcher, and its significance within the discussion chapter.

I align my understanding of shame with theorists who propose that shame is an egocentric, social emotion that manifests relationally (Brown, 2021; DeYoung, 2021; Gilbert, 2019; Herman, 2012; Gilbert & McGuire, 1998), and functions as a signal of interpersonal or social danger to keep the self safe (Cunha et al., 2012; Herman, 2011a; 2011b). As sociologist and shame researcher Brené Brown (2021) explains, shame is “the way I see myself through someone else’s eyes” and is a “social emotion” that “happens between people, and heals between people” (p. 138). Accordingly, shame as a ‘psycho-social-cultural construct’ refers to “an intensely painful feeling or experience of believing we are flawed and therefore unworthy of acceptance and belonging” (Brown, 2006, p. 45), and unworthy of love and connection (Brown, 2021, p. 137). Shame is the “fear of disconnection” from others due to inadequacy or feeling as if you have behaved in a socially unacceptable way (Brown, 2021, p. 137). Shame shares a close relationship with vulnerability, “the emotion that we experience during times of uncertainty, risk, and emotional exposure...it’s our greatest measure of courage” (Brown, 2021, p. 13-14). Brown (2021) argues that vulnerability is where shame derives from, but also where shame may be challenged through connection and empathy (discussed further in chapter eight).

Consistent across trauma literature is the prevalence of shame for child abuse survivors (McElvaney et al., 2022; Reid, 2018; Budden, 2009; Amstadter & Vernon, 2008; Negrao et al., 2005; Andrews, 1998). According to trauma theorist Judith Herman (2011a), shame is almost guaranteed to be experienced by abuse survivors:

[When] a relationship of dominance and subordination has been established, feelings of humiliation, degradation and shame are central to the victim's experience. Shame, like anxiety, functions as a signal of danger, in this case interpersonal or social danger (p. 88)

For the child victim, shame is instilled within their being, consciously or subconsciously. Shame is thus like a 'memory' of the trauma (Matos & Pinto-Gouveia, 2010), and it manifests physiologically (van der Kolk, 2014; 1994), the body a vessel for traumatic memories and shame (Fisher, 2017; Herman, 2011b).

Regarding abuse related trauma, shame has been theorised as a 'survival strategy': "Shame has evolved to keep the self safe from possible attacks and rejection from others" (Cunha et al., 2012, p. 204-205). Children and adults who are abused may feel shame because it is safer to believe that there is something innately wrong with themselves that makes them deserve the abuse, than to acknowledge the painful reality that someone has betrayed their trust and safety. Thus, as Taylor & Shrive (2023) argue, shame is a normal, rational, and expected trauma response.

Shame is a normal, expected response given the prevalence of victim-blaming culture, where child victims and adult survivors are shamed into silence, or blamed post-disclosure. Rosaleen McElvaney et al., (2022) found that shame delays or stops survivors of child sexual abuse from disclosing, while Rusan Lateef et al., (2023) found that survivors of child sexual abuse commonly experience shaming responses post-disclosure. Survivors are therefore likely to experience shame in response to the societal stigma and victim-blaming culture that surrounds disclosing and discussing experiences of child abuse, trauma, sexual abuse, and violence.

Shame can impact various facets of wellbeing: emotional and psychological, physical, social, and spiritual. Isolation, for example, is a common response to or manifestation of shame; a social wellbeing impact. How shame manifests and is experienced is nuanced, influenced by other factors, identity characteristics and socio-economic conditions, poverty, and the type of abuse experienced, as some are more stigmatised than others. Experiences of sexual assault, for example, have been associated with higher levels of shame when compared with other traumatic experiences (Amstadter & Vernon, 2008).

2.5.2.1 Responding to Criticisms

Brown's theories of shame and vulnerability have been criticised for failing to acknowledge how practising vulnerability, and the implications of doing so, diverge across identities and groups – criticisms which must be discussed to acknowledge differing identities and the nuance between experiences.

Black behavioural scientist and researcher Carey Yazeed (2023; 2021) highlights how Brown fails to address the nuances and potential implications for people with diverging social identities – particularly ethnicity and race - given the theory's conceptualisation in the United States of America. Yazeed (2021) highlights and agrees with criticisms of Black political scientist and abolitionist Jenn M. Jackson, who argues that Brown's theory encourages white supremacy. This is because Brown advocates for authenticity and choosing to be vulnerable, without emphasising the nuances and diverging levels of risk associated for Black people, particularly Black women: "Having courage to finish that swim meet or ask for that big raise isn't like having the courage to be Black in a country that wants us dead" (Jackson, as cited in Yazeed, 2021, December 12, para. 1). Speaking to such risk, Yazeed (2023; 2021) also highlights how black people often do not have the option to make a 'choice' about practising vulnerability, because when they do speak up, "we are quickly labelled as aggressive, we are problematic, we are hard or difficult to work with". They are often forced to keep their silence to avoid oppression and violence. Since silence is often necessary for their mere survival, it is not as simple as making a choice – as Brown suggests.

As both Yazeed and Jackson acknowledge, their critiques can be extended to other social factors such as class and sexuality. They call for an intersectional approach to considering the potential impacts of practising vulnerability to avoid perpetuating dissonance between the lived experiences of minorities and Brown's theory of vulnerability. Such dissonance is dangerous as it places anyone on the margins at risk of internalising, leading them to wonder what is 'wrong' with them as opposed to what is 'wrong' with the theory. In agreement, I add that such experiences of internal inadequacy can evoke or exacerbate existing shame. Also relevant is how Brown's courage culture advocacy has become a mainstream social movement, widely adopted and encouraged by other experts and wellbeing professionals. The global popularity of Brown's work may evoke additional pressure or shame for those whose identities transcend the

boundaries of the group to whom Brown's theory is most applicable: White, middle-class, corporate professionals, as Yazeed and Jackson criticise.

I carry Yazeed and Jackson's criticisms forward in the thesis, with the intention of maintaining an intersectional lens of understanding that is sensitive to complexity, nuance, and the socio-cultural implications of how trauma, vulnerability, and shame are understood and experienced.

2.6 Conclusion

Chapter two established necessary theoretical groundwork for the following chapters, offering understandings that will inform the exploration of survivors' experiences and the conclusions drawn. The complexity and necessity of defining child abuse is exposed, and definitions of trauma and wellbeing impacts are provided. I explained why I reject bio-medical based theories of trauma and 'mental health,' arguing that they function to disempower survivors and contribute to victim-blaming. Alternatively, I have adopted an anti-pathologising, trauma-informed approach that recognises traumatic responses and coping mechanisms as natural and valid manifestations of human distress and trauma (Taylor & Shrive, 2023). I have discussed wellbeing impacts that are relevant to the survivor experiences represented and discussed within this thesis, including retraumatisation, vicarious trauma, and traumatic growth. I have also explored the relationship between shame and the experience of child abuse survivors, emphasising the importance of recognising the pervasive impact of shame.

Chapter three continues to build a theoretical framework, exploring autobiographical documentary theory and existing understandings regarding wellbeing outcomes for survivors who engage with these texts.

Chapter Three: Autobiographical Documentary Theory

3.1 Introduction

Critically evaluating existing literature, chapter three builds toward presenting a synthesis of existing knowledge about the wellbeing outcomes of autobiographical documentary filmmaking and viewing for child abuse survivors. This includes therapeutic impacts and how such impacts may intersect with documentary affordances. As areas of academic enquiry are examined, literature gaps are exposed. I articulate how this thesis aims to contribute to addressing such gaps in ways that centre the voice of survivors and challenge victim-blaming discourse.

‘Autobiographical documentary’ is defined, extending on the work of prominent documentary theorist Bill Nichols (2017). Theoretical contributions regarding autobiographical documentaries are put forward, positioning them as counter-cultural and their creation as acts of defiance for survivors. Knowledge about autobiographical documentary ethics is reviewed, followed by an examination of knowledge surrounding autobiographical documentary affordances and wellbeing outcomes for child abuse survivors. Concluding the chapter, victim-blaming discourse within existing scholarship is identified and challenged, highlighting the need for trauma-informed approaches to research that exists at the intersection between autobiographical documentary and abuse related trauma.

3.2 Towards Defining ‘Autobiographical Documentary’

The definition of what a ‘documentary’ is has been contested for decades (see Grierson, 1933; Barnouw, 1993; Nichols, 1991; 2006; 2017; Bruzzi, 2006). The definitional conundrum continues to be a central point of discussion across literature in the realm of documentary practices. Bill Nichols (2017), however, diverges from the rigidity of other theorists, as his conceptualisation of ‘documentary’ is comprehensive and offers flexibility in its application. Nichols’ definition can thus extend to the *autobiographical* documentary genre, while capturing the nuances of what it means to self-represent through documentary representation.

Due to its flexibility, I utilise Nichols’ four-part definition, while identifying and explaining common characteristics across documentaries. Nichols (2001) acknowledges the conceptual obscurity of ‘documentary’, describing it as a “fuzzy concept” (p. 21), and emphasises the

complex, ever-changing nature of the genre due to the influence of institutions, practitioners, and audiences. This theory is applied in conjunction with the simplistic but apt definition put forward by film critics John Stuart Katz and Judith Milstein Katz (1988): Autobiographical documentaries are “about oneself or one’s family” whereby “the subject of the film and filmmaker often begins with a level of trust and intimacy never achieved or strived for in other films” (as cited in Lane, 2002, p. 3).

The following outlines Nichols’ documentary theory, highlighting how each tenet applies to the autobiographical documentary genre, before I offer definitional contributions. In conjunction with my contributions, Nichols’ theory, particularly the typology of documentary modes of representation, functions as an analytical framework. This frames my analyses of the selected autobiographical documentary films, in conjunction with discourse analysis and affect analysis.

3.2.1 Institutional: Avant Garde History of Autobiographical Documentary

Documentaries are ‘institutional’, meaning that they reflect the discursive and political needs of organisations, institutions, and “impose an institutional way of seeing and speaking” (Nichols, 2017, p. 12). How a documentary is institutional, and the political ideologies it serves, may affect whether viewers accept its representations as truthful. For example, if a globally powerful organisation like the APA produces a documentary, viewers may accept it at face-value because there is trust that the organisation will act ethically and honestly. That is not to argue that viewers are not critical of what they consume. Rather, it is to acknowledge how institutional forces can mediate the reception of documentaries, and how individuals or communities may trust certain entities and agendas more than others. Furthermore, the creative and aesthetic visions of documentarians may be mediated or obscured by the institutional needs and agenda. Ultimately, “documentaries are what the organizations and institutions that produce them make” (2017, p. 12).

Autobiographical documentaries are uniquely positioned as they possess an institutional element, but potentially less so than the average documentary on mainstream media platforms. This is because historically, autobiographical documentaries have been created through a ‘do it yourself’ filmmaking approach, mirroring approaches of avant-garde filmmakers (Lane, 2002).

As media scholar Tony Dowmunt (2013) argues, throughout history, avant-garde filmmakers have produced documentaries without large budgets, production crews, or stakeholder investments. Extending on this, it has never been easier to operate independently. Technological advancements and online platforms have democratised documentary filmmaking and viewing. Autobiographical filmmakers are well positioned to be self-reliant, embodying multiple roles to avoid having to comply with or negotiate the creative visions and political agendas of others. Film festivals have continued to provide an avenue for more independent distribution. COVID-19 influenced the rise of ‘hybridised’ documentary film festivals where documentaries are screened in-person and online, expanding the accessibility of documentaries to new audiences (Morfoot, 2021). According to Associate Professor of Media Studies Aida Vallejo and Taillibert (2023), the hybridised format will remain commonplace in the documentary realm, concluding “many festival directors have declared that they will keep hybrid practices for their festivals” (p. 124). Institutions have their own objectives and standards that determine which films are selected, promoted, and deemed worthy of awards. However, there is undoubtedly more creative freedom afforded to filmmakers who distribute their documentaries through film festivals. According to documentary film scholar Dr Anna Huth and Huth (2025), documentary festival programming policies prioritise thematic diversity and innovation, thereby encouraging experimentation and subversion of documentary traditions in both content and form.

3.2.2 Community of Practitioners: Encountering the Autobiographical Impulse and Paradox

According to Nichols (2017), documentaries involve a “community of practitioners” (p. 13) who “speak a common language” (Nichols, 2010, p. 20). Documentary filmmakers may share a general set of standards and codes of conduct that mediate how they create, what they represent, and how ethical issues or concerns are identified and addressed, if at all. While recognising the situational nature of ethical issues, and the ad-hoc basis on which they are navigated, media and social impact scholar Patricia Aufderheide et al., (2009) identifies several ethical philosophies that documentarians tend to share: ““Do no harm,” and “Protect the vulnerable,” and, in relation to viewers, “Honor the viewer’s trust”” (p. 1). This is where tension may arise between institutions and documentary practitioners, particularly when there are divergences in their filmmaking practices, aesthetic or ethical expectations, and motivations for creating and

disseminating the documentary. This includes considering the documentary's ideological and discursive function, and the expected outcomes for anyone directly or inadvertently involved.

For the community of practitioners who are the autobiographical documentarians, there are key experiential distinctions. It can be inferred from the existence of autobiographical documentaries that autobiographical filmmakers see immense value in personal accounts and conceptualise subjective experiences as valid forms of truth. This can not be assumed for many other documentary filmmakers, at least those who strive to adopt a more 'objective' approach to truth. Secondly, according to autobiographical documentarian and scholar Michelle Citron (1999), autobiographical documentary filmmakers experience the 'autobiographical impulse', describing the autobiographical impulse as "a driving need to use my life as a case study" (p. 276).

Furthermore, documentarian and autobiographical documentary theorist Jim Lane (2002), who deploys Katz and Katz's (1988) definition of autobiography and explores it in relation to notions of subjectivity, uncovers "a tension that hinges on the documentary impulse to objectively record an historical world "out there" and on the autobiographical impulse to subjectively record a private world "in here"" (p. 4). As Citron's experience infers, this tension is what the autobiographical filmmaker may straddle, informing how they tell their story, the representational strategies utilised, and how ethical issues are perceived and managed.

Finally, when explored through the practice of documentary filmmaking, I argue that the autobiographical impulse may lead filmmakers to experience the 'autobiographical paradox.' The autobiographical paradox may be conceptualised as experiencing a tension between the autobiographical impulse to honour one's own story and to protect oneself from harm, and the ethical responsibility the filmmaker may feel to avoid harming others (directly or inadvertently involved or impacted by the documentary's creation and dissemination). Shared understandings held by documentary practitioners, such as 'do no harm', become more abstract, ambiguous, and complicated to navigate. Not honouring their impulse, or compromising on account of others, risks silencing the self. Opposingly, prioritising their self-expression and autobiographical representation risks inadvertently harming others.

Experiencing the autobiographical paradox is of particular concern to survivor-filmmakers who are investigating and documenting their experiences of trauma, child abuse, and healing. This is due to the stigma of disclosing and discussing abuse, where survivors are vulnerable to

experiencing victim-blaming, self-blame and shame. Consequently, survivor-filmmakers may doubt their autobiographical impulse, and their ‘right’ to personal testimony through documentary filmmaking. In circumstances where the abuse is familial, or where intergenerational abuse and trauma are represented, survivor-filmmakers may experience compounding pressure to manage family dynamics sensitively. This involves balancing their autobiographical impulse with the potential repercussions upon family members, who could be perpetrators of abuse, survivors, or both. For survivor-filmmakers and other documentarians representing personal experiences of abuse or trauma, additional layers of ethical conundrums bring about new challenges, raising questions about how or if they can be negotiated, and what rights a survivor possesses to tell their story. Existing knowledge about ethical concerns is discussed further in section 3.5.

3.2.3 Modes of Representation: Inherent Participation and Reflexivity – Postmodernist Aesthetics

According to Nichols (2017), documentaries can be conceptualised as a “corpus of texts,” referring to the “diversity of the films that make up the documentary tradition” (p. 14). Nichols (2017) argues that for a film to be considered a ‘documentary’ and not another genre, it must reflect codes and conventions that have been applied in films which have been classified as documentaries. Such codes and conventions map onto six different documentary ‘modes of representation,’ loosely linked to different historical periods of the documentary tradition, evolving or becoming mainstream in response to technological advancements and socio-political movements. The documentary mode theory provides an analytical framework through which documentaries can be analysed to uncover their formal properties, understand the documentarian’s intention behind utilising them, and assess the potential impacts upon audiences – including how they may evoke or alleviate ethical issues. Yet, the theory posits that documentaries do not adhere to a single mode and its associated conventions but instead move fluidly between modes. With flexibility, the modes map out how documentaries may be characterised as sharing a “braid of family resemblances” (Plantinga, 1997, p. 17). The six modes are described below before their relationship with autobiographical representations is considered.

The expository mode is the ‘classic’ documentary form. Documentaries that predominantly adhere to expository conventions seek to advance an argument about the historical world. Nichols (2017) posits that expository documentaries almost reverse the traditions of film, as images can become secondary to the narration, which can function as a “voice of God” or authority: they “illustrate, illuminate, evoke, or act in counterpoint to what is said” (p. 122). Evidentiary editing is a commonly utilised expository convention that “may sacrifice spatial and temporal continuity to rope in images from far-flung places” in the name of supporting the narration and argument (Nichols, 2017, p. 123). For example, it is commonplace for documentarians to cut to archival evidence to bolster the validity of claims. In *The Invisible War* (2012), director Kirby Dick utilises military documents, news footage, and court transcripts to expose the prevalence of rape within the U.S. military, and support the argument being made for urgent institutional reform.

The reflexive mode involves the filmmaker engaging directly with the audience, addressing the process of representation and production issues. Observational and participatory interview footage of the filmmaker or footage showing the filmmaking process may be utilised. Sarah Polley’s *Stories We Tell* (2012) utilises such footage, directing viewers’ attention towards the construction of the film, and revealing the impossibility of objectively documenting her family’s history of trauma. Reflexivity forces the audience to maintain awareness of the filmmaker’s presence and influence, asking them to “*see documentary* for what it is: a construct or representation” rather than “*seeing through* documentaries” (Nichols, 2017, p. 125), which may be more likely in documentaries where expository conventions are heavily present.

Consequently, viewers’ assumptions regarding authenticity and accuracy in documentaries are challenged. Such assumptions tend to be rooted in a pursuit of ‘objectivity’ – an understanding that had been reinforced by documentary practices, right up until the 1960s, when the observational style was finally being moved beyond, and autobiographical representation was beginning to become more prevalent in response; in alignment with the rise of the participatory mode.

Observational documentaries aim to present truth through non-interference, capturing the reality of the observed phenomena. The filmmaker remains removed and refrains from interfering with the participants. Nichols (2017) terms this as “fly-on-the-wall” filmmaking (p. 137), utilising conventions of direct cinema, including handheld shots, long takes, tracking shots, and diegetic

sound – in other words, filming “life as it is” (Vertov, 1984, p. 71). Simplistic editing is commonplace, where footage is presented and stitched together in its raw form, without superfluous changes. Simon Wilmont’s *The Distant Barking of Dogs* (2017) offers an unobtrusive documentation of a Ukrainian boy’s daily life as he grows up in a war zone. Raw footage and diegetic sound immerse viewers in the warfare, without requiring explanatory narration. As Nichols (2017) argues, observational conventions can function to enhance realism and the perceived truth value of the documentary. Contrastingly, observational codes and conventions risk being voyeuristic, as participants’ lives are observed through a “keyhole” (Nichols, 2017, p. 133). Prioritising observation over engagement raises ethical concerns, as participants are at risk of being exploited.

Contrasting the observational mode, the participatory mode involves the documentarian becoming a ‘participant’ of their own production, directly interacting with the participants (Nichols, 2017). The filmmaker may include representations of themselves asking interview questions and eliciting responses from participants, as Polley does when interviewing her family members in *Stories We Tell* (2012). The filmmaker thus becomes a “social actor (almost) like any other” but retains control through the camera (Nichols, 2017, p. 139-140). Cinema verité filmmaking methods (such as staging scenes to look and sound observational) overlap between the observational and participatory modes. Cinema verité emulates the aesthetics of direct cinema to construct a sense of authenticity but involves the intervention or representation of the documentarian.

The poetic documentary mode is characterised by modernist traits like fragmentation, emotionalism, and ambiguity (Nichols, 2010). Deriving from avant-garde experimentation, the filmmaker prioritises form and aesthetics over realism, with little concern for “demonstrating the camera’s ability to record what it saw faithfully and accurately” (Nichols, 2010, p. 129). Poetic conventions may disrupt continuity of time and space through temporal and spatial juxtapositions, weakening the indexical bond between the depiction on screen and the historical world (Nichols, 2017). Montage is a common poetic strategy, in which disparate visuals and audio may be juxtaposed, transcending space and time, often employed in the hopes of evoking an emotional and affective response from audiences

Nichols (2017) posits that the “performative documentary underscores the complexity of our knowledge of the world by emphasising its subjective and affective dimensions” (p. 149).

Attention is drawn to subjectivity, filmmaker reflexivity, and thus the constructed nature of the documentary through the application of representational strategies such as acting and singing, or through the inclusion of observational footage of someone ‘performing’ for the camera. Nichols (2017) emphasises the ability to foster empathy or evoke affect within viewers through performative representations. Jonathan Caouette, for example, utilises performative conventions in *Tarnation* (2004), including footage of his psychologically impaired mother who sings and performs for the camera, her disconnect from reality functioning to establish an eerie tone.

Documentary theorist Stella Bruzzi (2006) offers valid criticism of Nichols’ performative mode, asserting that all documentaries are “performative acts, inherently fluid and unstable and informed by issues of performance and performativity” (p. 2). Bruzzi (2006) supports this by drawing on feminist theorist Judith Butler’s theory of gender performativity, arguing that “the ethos behind the modern performative documentary is to present subjects in such a way as to accentuate the fact that the camera and crew are inevitable intrusions that alter any situation they enter” (p. 190).

Both Nichols (2017) and Bruzzi (2006) make valid points that I agree with, and both arguments can inform our understandings of the performative mode. I contend that both arguments can and should co-exist. I agree with Bruzzi’s (2006) theorisation more so, given the feminist lens through which she argues, emphasising gender performativity and spotlighting how everyone performs during every social interaction, subconsciously or consciously. Thus, I view all documentaries as performative. By contrast, Nichols (2017) invites us to consider the more ‘conscious’ and heavily premeditated, constructed ways in which one might ‘perform’, and the potential affect upon audiences. From my perspective, Nichols’ attention to the affective impact of performative representations is valuable, because it underscores how performativity can evoke affects such as uneasiness or playfulness, subverting viewer expectations about reality and truth.

Nichols’ (2017) documentary modes theory provides an analytical framework for critically analysing documentaries. Yet, it operates under the assumption that documentaries usually do not adhere to a single mode and its associated conventions. Autobiographical documentaries emphasise the flexibility and fluidity of adhering to these modes. Autobiographical documentary

representations are inherently participatory and reflexive, blending codes and conventions. By nature, autobiographical filmmakers can not untangle themselves from the process. Therefore, autobiographical documentaries possess a layer of aesthetic, formal, and discursive hybridisation that other documentary forms may lack, subverting traditional understandings about what documentaries are and can be.

This understanding is reflected in criticisms made by documentary theorist Paul Arthur (1993), who used the term ‘aesthetics of failure’ to describe the relationship between documentary practice and postmodernist theory. Arthur (1993) fears this ‘new’ way of representing reality, arguing:

The prospect for completion of a straightforward documentary project of any strip may be under interrogation. [This has resulted in] failure to adequately represent the person, event, or social situation stated as the film’s explicit task function as an inverted guarantee of authenticity. The new works are textual parasites, fragments or residues of earlier works which for one reason or another became impossible to realise. One ramification of postmodern aesthetics, precipitated in part by the antimetaphysical bent of poststructuralist theory, is that certain types of artistic mastery are culturally suspect. The epistemic ambition to speak from a totalising framework of knowledge about some fully intelligible reality is anathema (p. 128)

Arthur’s (1993) criticisms highlight the ongoing tension between more traditional documentary practices and the distinct hybridisation of autobiographical documentaries, which naturally blends codes and conventions from participatory and reflexive modes and thus challenge conventional notions of objectivity and authenticity. I argue that such hybridisation broadens the scope of what documentaries can achieve, and provokes viewers to reconsider their assumptions about truth and encourages engagement with perspectives that may otherwise remain hidden.

3.2.4 Viewers: Intersecting Identities

Nichols (2017) fourth tenet of documentary pertains to the impact of audiences, arguing that “the sense that a film is a documentary lies in the mind of the beholder as much as it lies in the film’s context or structure” (p. 23). Defining an audio-visual text as a documentary depends on viewers’

assumptions and expectations about what a documentary can and should be. For example, that documentaries are about reality and real people, and represent truthful stories (Nichols, 2017).

Regarding autobiographical representations, I extend upon this tenet to include the influence of *participants* in defining what a documentary is. This is in recognition of the overlapping, intersecting identities of those involved in creating and viewing a documentary, particularly where autobiographical representations are concerned. Participants become viewers, as do the filmmakers, and participants who are indirectly represented by proxy of the filmmaker.

3.3 Autobiographical Documentaries as ‘Counter-cultural’ Modes of Activism

I argue that autobiographical documentaries are ‘counter-cultural modes of activism.’ They are countercultural because they naturally subvert and obscure what a documentary can or should be, in content and form. As argued, autobiographical documentaries are inherently reflexive. Some autobiographical filmmakers are driven by an autobiographical impulse, where the autobiographical paradox may be encountered. Experiencing both the autobiographical impulse and paradox informs the aesthetics and represented discourses. In this way, autobiographical documentarians draw on the ‘aesthetics of failure’, a phrase coined by Arthur (1993) in response to the autobiographical shift in documentary; Arthur’s critique suggests resistance to the aesthetics of autobiographical documentaries, and thus to the positioning of truth as subjective.

Autobiographical documentaries subvert and obscure assumptions about how *autobiography* should be produced. English scholar Elizibeth Bruss (1980) suggests that autobiography must be produced by the individual alone to remain truly ‘autobiographical.’ Bruss argues “there is no real cinematic equivalent for autobiography” (p. 296) because the collaborative filmmaking process disrupts the authenticity of the autobiography. I disagree with Bruss’ resistance to audio-visual autobiography. Whether literary or cinematic, autobiography will require collaboration with other creatives, producers, or stakeholders. Bruss’ critique demonstrates how autobiographical documentary filmmaking, in its overtly collaborative nature, has challenged assumptions about how autobiography can be produced, positioning it as a collective endeavour rather than an independent one.

Autobiographical documentaries are counter-cultural modes of activism because, historically, they have been created in response to failures of humanity, to disrupt the status quo and challenge what truths matter, and whose truths should be accepted, believed, or engaged with. As Lane (2002) reminds us, the autobiographical shift occurred alongside countercultural social movements in the United States of America, challenging objective assumptions about truths. Autobiographical documentaries naturally acknowledge that the ‘personal is political’ (Hanisch, 1970; 2006, para. 1).

Literary and cinematic forms of autobiography have been met with resistance where minorities are represented and challenge power structures; criticisms that have their roots in racism and sexism, perpetuating white supremacy and patriarchal ideology. Women who have engaged in autobiography have encountered significant criticism in comparison to men: “the hyper-awareness of a woman writer’s biography has always, always garnered more attention than a male writer’s” (Shubert, 2015, para. 3). Citron argues that women are often labelled ‘confessional’, undermining the politics of autobiography: “the biographical act is a political act, something we risk losing sight of when women’s autobiography is labelled confessional” (p. 271). Extending upon Citron’s argument, such resistance towards autobiographers serves to victim-blame, shame and silence minorities (including women, indigenous people, and survivors) so that atrocities like colonial violence, historical trauma, and abuse remain unacknowledged, and existing power structures remain undisturbed. Academic Latoya Peterson highlights the compounding impact and scrutiny experienced by Black and other non-white women:

...men write these kinds of pieces all the time. They just aren’t seen in the same, marginalising light...for some reason, the lives of men are inherently [considered] more serious affairs than the lives of women...This overshare, gross-out phenomenon of “first-person writing” is generally a door that leads to more fame and work *for white women*. It is selling pieces of yourself to get bylines. This route to publication and a book/movie deal simply is not open for non-white women. Society sees women of color’s shameless writing as proof of deviance, not a relatable and fun story to share on social media (as cited in Spencer, 2015, para. 7)

In a world that victim-blames, shames, and silences victims and survivors of abuse, and in a documentary tradition where white men have dominated and continue to dominate, the creation and existence of an autobiographical documentary is an act of defiance. Autobiographical storytelling threatens not only the supposed established ‘credibility’ of the documentary form, subverting formal, technical properties of documentary and supposed ‘objective’ ways of representing – but it also threatens traditional power structures, and cultural, historical, and gendered norms, including victim-blaming culture.

Theorising autobiographical documentaries as counter-cultural modes of activism ultimately reinforces the need to investigate the potential therapeutic impacts and wellbeing outcomes for survivor-filmmakers who create autobiographical documentaries about child abuse and healing, and for survivor-viewers who watch them.

3.4 Memory and Trauma

Memory theorists like Marianne Hirsch (1996; 2008) and Aleida Assmann (2006) have expanded upon the idea of memory as both individual and collective, foregrounding the mechanisms in which societies remember, forget, and reconstruct their pasts. For example, Marianne Hirsch’s (1996; 2008) concept of ‘post-memory’ (memory passed down through generations who did not directly experience an event) highlights the multiplicity of ways that individuals and communities relate to trauma, suggesting that traumatic events are not only remembered by those who directly experienced them, but also by subsequent generations.

Trauma scholars Cathy Caruth (1996) and Shoshana Felman, alongside Dori Laub (1992), theorise traumatic memory as ‘unprocessed’ and ‘fragmented’ for survivors, who struggle to articulate or represent their experiences of trauma. These scholars argue that trauma is something that cannot easily be translated into language or coherent narratives, and that the very process of recounting trauma involves a form of reconstruction or reexperiencing. Caruth (1996) positions traumatic memories as ‘delayed’ and difficult to integrate into coherent narratives:

...trauma is not locatable in the simple violent or original event in an individual’s past, but rather in the way that its very unassimilated nature – the way it was precisely not known in the first instance – returns to haunt the survivor later on (p. 5)

These theories of memory and trauma have transcended into documentary scholarship, where documentaries have been theorised as modes of transmitting personal, social, and post-memory (memory, traumatic or otherwise, may function at the individual level and can be experienced interpersonally or collectively). These theories have propelled discourse surrounding how documentary representations can ‘tap into’ and represent traumatic memory – individual and collective – in ways that other mediums can not. For example, using animation has been theorised as possessing the ability to ‘represent the unrepresentable’, including that of traumatic memory and trauma (Honess Roe, 2013; 2015). Most notably, and in the context of representing traumatic memory in autobiographical documentary, Janet Walker (1997; 2003) introduces the ‘traumatic paradox.’ The traumatic paradox refers to the notion that trauma produces amnesias, errors, and inconsistencies in memory that, paradoxically, discredits testimony under conventional historiographical standards. According to Walker (1997; 2003), it is the fragmented nature of trauma that autobiographical documentaries can represent.

Given the anti-pathology, trauma-informed theoretical orientation of this thesis, I must emphasise that traumatic memories are not always experienced as fragmented and non-linear. Across psychology and trauma studies, there is a prevailing assumption that traumatic memories are inherently fragmented and incoherent in comparison to other memories, because they are ‘encoded’ or ‘processed’ in a specific way in the brain. Understanding of the brain remains limited and largely uncharted territory for neuroscientists. As neuroscientist David Eagleman (2011) states, the brain is “the most complex material we’ve discovered in the universe” (p. 6). Consequently, it can not be argued with certainty that traumatic memories are ‘stored’ and recalled differently in comparison to non-traumatic memories, and that all traumatic memories are inherently fragmented. While traumatic memories can be experienced this way, research demonstrates that traumatic memories are often experienced as cohesive and non-fragmented (Taylor et al., 2021; Rubin, 2011; Peace et al., 2008).

Consequently, I adopt a fluid, malleable conceptualisation of memory, traumatic or otherwise, to enable the recognition of nuance between survivor experiences. Conceptualising traumatic memories in this way minimises the risk of oversimplifying and distorting the complex nature of experiencing trauma, and the perpetuation of victim-blaming, deficit-based understandings of survivors. This is important to highlight here because existing literature that intersects trauma

theory and documentary representations often fails to recognise or clarify the fluidity of memory – another gap in the literature that this thesis seeks to address.

3.5 Ethics and Autobiographical Documentary Representations of Child Abuse

Documentary practitioners identify as “creative artists for whom ethical behaviour is at the core of their projects” (Aufderheide, 2009, p. 1). An autobiographical approach to documentary filmmaking may complicate existing ethical concerns associated with documentary filmmaking and evoke new ones. This is particularly the case in contexts where survivor-filmmakers represent discourses about child abuse, trauma, and healing, within and outside of familial relationships. Acting on the autobiographical impulse positions the filmmaker in a reflexive position, simultaneously the creator and main participant. As observed by Citron (1999), “The autobiographical film or video is intimately bound to the filmmaker’s psyche, a site where guilt and projection lurk...autobiographical work is connected to pre-existing tensions in a video or filmmaker’s life” (p. 273). Consequently, Citron (1999) argues:

Autobiography can be dangerous to others, particularly those on whom the video or filmmaker turns her camera. Lovers, spouses, children, parents, and friends can find themselves suddenly appropriated as subjects into the autobiographical artist’s celluloid or tape presentation of “self.” An autobiographical artist uses her own life and the lives of others in the service of her art (p. 6)

Where experiences of child abuse and healing are represented, such tensions may pertain to the wants and needs of family members, and survivors at risk of being implicated through participation or indirect involvement (Visage, 2021). Perpetrators of abuse may bring about tension if the autobiographical filmmaker is concerned about how the perpetrator may respond or retaliate upon the documentary’s release.

Survivor-filmmakers must navigate tensions between their autobiographical impulse to have their experiences be known and their likely desire to safeguard the wellbeing of those who may be implicated, particularly other survivors or family members. Traumatization and vicarious trauma are potential impacts that survivor-filmmakers may seek to reduce the risk of. Responding to ethical concerns such as retraumatization may require survivor-filmmakers to

compromise their self-expression, the represented discourse, aesthetics, and representational strategies utilised. Maintaining survivor-filmmaker authenticity while minimising power struggles becomes an intricate balancing act.

Documentary filmmakers' ethical responsibility to safeguard others extends to viewers (Aufderheide et al., 2009). Filmmakers have a responsibility to consider the impacts on audiences, including the conversations generated and discourses perpetuated. Where abuse is represented, the perpetuation and challenging of victim-blaming rhetoric may be an ethical focus, which requires survivor-filmmakers to consider how the discourses represented (and unrepresented) uphold or challenge victim-blaming rhetoric.

Within existing literature about documentary ethics, there is a lack of exploration of contemporary autobiographical documentaries about child abuse and healing. However, there are key texts that have been studied which offer insights into the ethical issues encountered, how they were managed, and to what potential affects. Research surrounding *Tarnation* and *Daughter Rite* (Citron, 1980) is prevalent within the academic landscape of autobiographical documentary ethics, including textual analyses and commentary from the autobiographers. In my analysis of *Tarnation*, I highlight an ethical concern regarding the ability for Caouette's mother to give informed consent to participate, and whether her involvement constitutes exploitation due to her vulnerable psychological state. Complicating this, however, is Caouette's 'right' to speak about and represent his truths regarding his tumultuous childhood (Visage, 2021). This finding demonstrates how a filmmaker's aesthetic and creative expression can be at odds with their responsibility to safeguard those represented – and how representing experiences of abuse and trauma can complicate how tensions are responded to.

Citron (1999) discusses how the composite characters and scripted scenes in *Daughter Rite* raise concerns about her responsibility to the audience to represent her experiences authentically. Contrastingly, using these representational strategies provided Citron with an ethical "escape hatch" (p. 276). Using composite characters allowed Citron to represent her complicated relationship with her mother while keeping the autobiographical aspect of *Daughter Rite* concealed from viewers to safeguard that relationship. This finding demonstrates how mitigating one ethical concern may exacerbate or evoke another, exemplifying the competing tensions

between an autobiographical documentary filmmaker's ethical duty to the self, participants, and viewers.

Stories We Tell is another autobiographical documentary that has garnered significant scholarly attention and viewership. Attention centres on how *Stories We Tell* explores the remembering of abuse and trauma experiences in which accounts are contested within Polley's family unit, and on the ethical implications of the representations, including the implications of applying certain audio-visual techniques, such as reenactments (Garcia Topete, 2019). Over a decade later, *Stories We Tell* continues to be studied (López, 2023; Bazil, 2022; Angeli, 2021), demonstrating not only the documentary's cultural impact, but also the cultural significance of autobiographical documentary accounts about abuse and trauma: as tools to break the silence surrounding child abuse, and tools of identity reconstruction for the filmmaker.

3.5.1 Responding to Literature Gaps: Empirical Evidence, and Contemporary Filmmaker Accounts

The aforementioned literature highlights the ethically charged nature of autobiographical documentaries that represent discourses about child abuse. This reinforces the need to investigate autobiographical documentaries and their wellbeing impacts upon survivors who engage with them, as filmmakers and viewers. Given the relative scarcity of research surrounding autobiographical documentaries about abuse that were produced within the last decade, there is much scope to investigate contemporary filmmakers and texts to inform understandings about ethical tensions and wellbeing impacts for survivor-filmmakers and survivor-viewers.

Furthermore, as Nash et al., (2014) reminds us, documentary practices are constantly evolving in response to technological advancements:

...as new media technologies and new forms of communication emerge, contemporary documentary makers are engaging in a continual process of reworking the documentary project. They (and inevitably we, as audiences) are reimagining what documentary might become: nonlinear, multimedia, interactive, hybrid, cross-platform, convergent, virtual, immersive, 360-degree, collaborative, 3-D, participatory, transmedia or something else yet to clearly emerge (p. 148)

The continuous development of technology and the reimagining of documentary calls for ongoing research about autobiographical documentary ethics, wellbeing impacts (for filmmakers, viewers, and participants), and how new ways of ‘reimagining’ documentary may inform ethical issues and wellbeing outcomes.

Literature suggests the need to conduct such research in ways that integrate several aspects of enquiry, ensuring a comprehensive understanding of the ethical landscape in documentary practice, where autobiographical representations of child abuse and healing are concerned. As such, Nash (2011) critiques existing literature exploring documentary ethics. Specifically, Nash (2011) is critical of the overreliance on textual analysis as a primary research method of investigation to understand ethical issues and responses to them. The filmmaker’s experiences and the audience’s reception are rarely considered alongside textual analysis. This is problematic, as ethical issues can only be identified and theorised by the researcher insofar as the documentary representations allude to them, thereby impacting the rigour and quality of the conclusions drawn. I agree with Nash’s (2011) argument, and their call to apply empirical research to inform discourse and theory surrounding the identification and negotiation of ethical concerns within documentary films. This call remains relevant, and extends to the autobiographical documentary genre, where literature tends to present one ‘piece’ of the puzzle; textual analysis, the filmmaker’s account or exegesis, or an ARC. Puzzle pieces are not often brought together cohesively to avoid obscuring nuance across experiences, and the situational, context-bound nature of documentaries – where ethical conflicts are responded to and “resolved on an ‘ad-hoc’ basis” (Aufderheide et al., 2009, p. 1).

This thesis responds to the ongoing need to conduct empirical research to inform discourse and theory surrounding autobiographical documentary ethics and to shape the evolution of autobiographical documentary practices. A tripartite methodological approach (Thompson, 1990) frames the research, where empirical methods are utilised in conjunction with textual analyses of contemporary autobiographical documentaries representing discourses about child abuse and healing (discussed in chapter four). This affords a comprehensive understanding of ethical concerns and wellbeing impacts, as connections can be made across areas of inquiry.

3.6 Autobiographical Documentary Affordances and Wellbeing Outcomes

This thesis explores the possible wellbeing impacts for survivors who engage with autobiographical documentaries about child abuse – as filmmakers and viewers. This involves considering the extent to which wellbeing impacts align with or diverge from affordances – so that the relationship between outcomes and engagement with such autobiographical documentaries may be better understood. The following sections orientate the thesis in relation to the theory of affordances while defining the concept. Existing literature about autobiographical documentaries and their potential therapeutic benefits is then examined, with attention directed towards identifying relevant affordances.

3.6.1 Affordance Theory

The concept of ‘affordance’ emerges from a rich area of scholarship with roots in ecological psychology, transcending across various avenues of communication and media studies. Media scholar Peter Nagy et al., (2015) identifies that, while ‘affordance’ lacks a succinct definition, the term is often used within communication scholarship to “describe how a medium or a tool affords uses to individuals” (p. 2). That is, how the medium serves or aids an individual, and to what impact. There is agreement that affordances are “possibilities for action provided to an animal by the environment — by the substances, surfaces, objects, and other living creatures that surround the animal” (Rietveld & Kiverstein, 2014, p. 327). Nagy et al., (2015) critiques this usage, stating that it “too often serves to separate questions of the materiality of technology from discussions of social construction and human agency” (p. 2). Emphasis is usually placed upon the technological aspects of the medium, without considering the role of the user’s perception of how the medium may aid them, and how the medium interacts with the environment.

In agreement with Nagy et al. (2015), I utilise ‘affordance’ in the sense philosopher Erik Rietveld & Kiverstein (2014) conceptualise it:

...affordances are not simply properties of an animal’s environment conceived of as a material or physical environment. It is the ecological niche of a particular form of life that is made up of affordances, and each affordance must be understood in relation to the abilities available in a form of life (p. 340)

What Rietveld & Kiverstein (2014) contribute, which other definitions lack, is that affordances are relational properties, as their identification depends on aspects of an environment and on the user's abilities and perception. That is, an affordance is only an affordance if the user perceives it as such, influenced by their abilities and the context in which they function. 'Affordances,' as it is conceptualised in this thesis, encapsulates the fluidity of affordances, as they are not fixed properties. Rather, affordances are contingent upon the user's perception and abilities within the context of their 'ecological niche.'

This theoretical framework prompts consideration about the relationship between survivors (as filmmakers, viewers, and participants) and their engagement with autobiographical documentaries where representations of child abuse and healing are concerned, and their affordances.

3.6.2 Autobiographical Documentary and Therapeutic Affordances

Existing literature surrounding documentary affordances is sparse, and more so in the context of autobiographical documentaries where representations of child abuse or other experiences of trauma are concerned. This gap underscores the need for empirical research to investigate the impacts on wellbeing and their relationship with affordances.

From the limited available literature, a basis for knowledge about autobiographical documentary affordances can be gleaned. For example, filmmaker Mark Poole (2019) draws on his experience producing the documentary *Jan Sardi: A Screenwriter's Creative Process*, which explores the creative process of the Australian screenwriter Jan Sardi. Poole (2019) provides insights into the affordances and potential pitfalls of documentary production as a research method, arguing that "the ability to hear directly from the screenwriter about the creative process" (para. 42) is the most significant affordance, enhancing the research process. Educational technology scholar Giuliana Cucinelli et al., (2018) interviews various documentarians and identifies affordances of interactive documentary films, including increased audience participation and blurring the boundaries between acting as a filmmaker, participant, and viewer. Both studies highlight how documentaries, in their creation and dissemination, may function as catalysts for engagement and interaction, providing opportunities for direct communication and insight into personal and collective experiences.

Existing literature on affordances lacks consideration of the technological affordances of autobiographical documentary, particularly in the context of wellbeing outcomes. Therefore, there is scope for research to be undertaken on this topic. This is particularly given documentary's multimodal nature, where filmic language and the auditory and visual affordances of film work in tandem to create meaning or afford a particular representational outcome. Voiceover, music, diegetic sound, and home videos, for example, may inform or 'afford' the representation of discourses about abuse, and the evocation of memory and affect upon viewers, and their emotional engagement.

Interestingly, literature at the intersection between psychology and media suggests a burgeoning area of interest regarding the 'therapeutic' function of media forms and the exploration of 'therapeutic affordances.' This reflects cultural interest in understanding the relationships among therapeutic outcomes, environments, technology, theorisations of trauma and wellbeing, and engagement with (potential) healing modalities – including media in its various forms. Much of this literature explores the use of social media across different contexts (Merolli et al., 2014; Merolli et al., 2015; Shoebbotham & Coulson, 2016; Coulson et al., 2017; Dodemaide et al., 2019; Dodemaide et al., 2021; Dodemaide et al., 2025). For example, Neil Coulson et al., (2017) investigates social media users who engage with online support groups about self-harm and identifies the ability to connect with others as a therapeutic affordance. The term 'therapeutic affordance' is applied to describe the "*actionable possibilities* of the object [online support community] as determined by the individual," the authors proposing that the term allows for the consideration of the impact upon wellbeing, in conjunction with their 'use' (p. 2). From a psychology-media-based perspective, 'therapeutic affordance' thus refers to a type of wellbeing outcome that is linked to media engagement. Such academic and cultural interest, in conjunction with these promising findings, reinforces the need to investigate the therapeutic affordances and impact potential of autobiographical documentaries, functioning as expressive artifacts and potentially as healing tools for survivors.

3.6.3 Cinematherapy and Documentary Filmmaking as Therapeutic Tools: Professional Contexts and Clinical Practice

Film has been used in various ways and for different purposes within psychological practice. Psychotherapist Gary Solomon coined the term 'cinematherapy' to describe instances where he

would “prescribe” films to his clients, so that they could “extrapolate therapeutic messages and scenes” from them (2013, para. 4). Psychologist Linda Berg-Cross et al., (1990) uses the term similarly, arguing that films may be utilised to “have a direct therapeutic effect or it could be used as a stimulus for future interventions” (p. 2). Alternatively, ‘film/video-based therapy’ has been used to refer to multiple practices, including cinematherapy, producing films and recording oneself to view and reflect on behaviour (Cohen, 2012; 2023; Cohen et al., 2015). In their scoping review of cinema and video therapy, psychology doctoral candidate Elena Sacilotto et al., (2022) found that 36 of 38 studies that used cinematherapy reported positive wellbeing benefits.

Psychologist Rivka Tuval-Mashiach et al., (2018) identifies recent use of video in therapy to treat various psychological issues (including Wedding & Niemiec, 2003; Gantt & Tinnin, 2007; 2009; Johnson & Alderson, 2008; Nanda et al., 2010), while highlighting that “the field is still in the nascent stages of development; therefore, no consensus has yet been reached regarding what precisely constitutes video-based or filmmaking therapy or how it works to alleviate patients’ suffering” (p. 2). In response to this lack of consensus, Tuval-Mashiach et al., (2018) created a filmmaking workshop titled ‘I Was There,’ as an intervention for veterans struggling with traumatic stress. Tuval-Mashiach et al., (2018) interviewed 50 participants following the intervention, and most reported positive and empowering experiences. Three overarching themes emerged as significant in describing the benefits of participation: gaining a new sense of agency, regaining a sense of affiliation, and processing trauma.

Such wellbeing outcomes are echoed across chapters in two edited collections (in which Tuval-Mashiach makes contributions) that are part of Routledge’s ‘Advances in Mental Health Research Series.’ The first collection, titled *Video and Filmmaking as Psychotherapy: Research and Practice* (Cohen & Johnson, 2015), and the second, titled *Film/Video-based Therapy and Trauma* (Cohen, 2023). Clinical psychologist and primary editor of both collections, Joshua Cohen, coined the term ‘film/video-based therapy,’ a modality he utilises in his practice, in which people can create their own film alongside Cohen, who guides the technical and therapeutic processes. According to Cohen and Orr (2015), film/video-based therapy “fascinates therapists and clients because it is a modality for capturing and visually representing personal dreams and myths that reflect the collective unconscious” (p. 29).

Much of the research, particularly in *Video and filmmaking as psychotherapy* (Cohen & Johnson, 2015), is contextualised within the ‘therapeutic relationship’ and bound to the scope of professionally guided therapeutic practice, drawing on depth psychology and psychoanalytical theories. Filmmaker and counselling psychologist J. Lauren Johnson (2015), for example, argues that the five stages of filmmaking, and the way it offers a ‘non-colonial’ way to process, can be particularly healing for Aboriginal and First Nations communities. Johnson (2015) draws on findings from a pilot study conducted as part of her master’s research, in which three people who sought counselling consented to experiment with ‘therapeutic filmmaking’ rather than traditional talk therapies.

Also drawing on empirical evidence, two chapters (Tuval-Mashiach & Patton, 2015; Mosinski, 2015) explore how film/video-based therapy can be an effective intervention for PTSD, particularly when utilised in group therapy settings. Basia Mosinski (2015) focused on survivors of family harm (and perpetrators) where one survivor was able to process aspects of their experience, coming to new understandings of the self:

Sonya transformed their rage into art...the process proved to be cathartic for her. She was able to identify points of denial in her life, such as when she ignored her inner knowledge that the abuse was wrong and it was escalating (p. 142)

Both documentary (as I have defined it) and fiction filmmaking are advocated for by contributors of the two collections, and various production stages are discussed regarding how they can support healing. Both collections begin to provide insights into how such therapeutic impacts (such as gaining a new sense of agency, regaining a sense of affiliation, and processing trauma) may align with or diverge from the affordances of film and documentary. The editing process, for example, re-emerges across chapters as both a mirror and a window. In the chapter titled *Film/Video-based therapy and editing as a process from a depth psychological perspective* (Cohen & Orr, 2015), the editing process is positioned as affording clients the ability to reflect upon their experiences or view their trauma from a new perspective as a narrative is constructed on the editing timeline. The collaborative nature of filmmaking is frequently highlighted as a source of therapeutic benefit.

Although centred around the therapeutic relationship, such findings within existing literature reinforce the need to investigate how these outcomes or affordances may align with, diverge

from, or generally impact the experiences of survivor-filmmakers and survivor-viewers who engage with autobiographical documentaries beyond professional therapeutic contexts.

3.6.4 Wellbeing Outcomes of Autobiographical Documentary Filmmaking for Abuse Survivors: Pitfalls of Existing Knowledge and Responding to Literature Gaps

Most relevant to the thesis focus of understanding the therapeutic and broader wellbeing outcomes of autobiographical documentary filmmaking for survivors is psychotherapist and filmmaker Yarden Kerem's (2023) chapter, *Producing a documentary as a therapeutic process for victims of childhood sexual abuse*. Extending on Nichols' (2001) theory, and that of film scholar Michael Renov (1993), Kerem (2023) proposes another function or role of documentary cinema:

...as a therapeutic tool for its creator. That is, documentary has an additional role beyond the four roles that Renov proposed, [to document and preserve; promote ideas; analyse and investigate; and to function as a tool of expression] and Nichols' assertion that cinema is for exploring social issues (p. 162)

Kerem (2023) offers valuable, albeit somewhat reasonable, theories, and there is potential for future research to substantiate their claims. However, there are several limitations with this chapter and across the entirety of both edited collections that must be acknowledged; limitations that this thesis contributes to addressing.

I remain critical of how the research across both edited collections is orientated within clinical frameworks of understanding responses to distress and trauma, pathologising survivors and using deficit-based language to describe identities and experiences. This criticality is influenced by the anti-pathology lens I have applied in response to the global culture of victim-blaming, which psychiatry and dominant psychological supports actively perpetuate (discussed in section 2.4).

Kerem (2023) supports the use of autobiographical documentary filmmaking to achieve therapeutic outcomes for survivors of child sexual abuse and is the most relevant to the research questions. However, it is the chapter that I am most critical of, and I take issue with the arguments. Kerem fails to provide relevant empirical evidence, basing the arguments on *assumptions* about survivor-filmmaker experiences:

In this chapter, I *assume* that producing a personal documentary is a therapeutic process. I *assume* the therapeutic process that accompanied the filmmaking was the goal, or one of the goals, of producing the film, whether that motivation was a clear and conscious choice of the director...During the film production, it is *assumed* that the director bonds with the production crew (p. 164-174. Emphasis added)

A sense of authority rings through Kerem's words, almost indicative of how professionals and associations, have been positioned as the most important voices to consider, when theorising and making arguments about the experiences of trauma survivors. This somewhat encourages the silencing or exclusion of survivor perspectives, which is what this thesis strives to avoid by including the voices and experiences of survivors.

Secondly, Kerem theorises memory with a sense of absolutism, drawing on the work of Deshe (2008), while quoting Tuval-Mashiach and Patton (2019), who take the same narrow approach to conceptualising memory and traumatic memory:

Tuval-Mashiach and Patton (2019) state, 'The traumatic memories remain isolated and uncorrelated with the rest of the autobiographical memories, which often leads to non-adaptive self-perceptions of the event' (p. 239). Yael Deshe writes that the recovery process can take place "only in a relationship where a transformation from traumatic memory to narrative memory occurs" (Deshe, 2017, p. 82-83) (Kerem, 2023, p. 165)

However, aren't traumatic memories already autobiographical? What does it mean, or encompass, to 'transform' traumatic memory to narrative memory? Memories are not one or the other, and it is inaccurate to assume so, or to assume memory processes are separate from one another. This is an example of how narrow theorisations of memory have influenced documentary scholarship, subtly victim-blaming survivors, irrespective of the author's awareness or intention of doing so.

Thirdly, Kerem (2023) perpetuates victim-blaming discourse when describing what healing encompasses for child sexual abuse survivors, or what they term 'recovery'; another example of deficit-based language, as critiqued in section 2.4. Kerem (2023) theorises:

...cinema as a medium offers a very powerful solution to problems found only or mainly in sexual trauma, including the paradox of recovery, the need for revenge, and the attack

on hope...One of the most difficult internal conflicts of sexual abuse victims is the willingness to heal and move on. This involves at least a partial compromise of the victim's identity, letting go of their grip on their anger, and the desire to become a legacy of the harm done (p. 175)

I am most critical of the discourse that child sexual abuse survivors seek “revenge” (p. 175) against perpetrators of abuse. Kerem's use of ‘revenge’ implies that revenge is a significant driving force for survivor-filmmakers. It orients the autobiographical impulse of any trauma survivor to tell their truth, as an act of personal vendetta. Indeed, seeking ‘revenge’ may be how survivors understand their own experiences, potentially finding comfort in the term, or feeling that it accurately describes how they feel about their circumstances. However, Kerem provides no evidence to substantiate their assumption that ‘revenge’ is how survivor-filmmakers experience the filmmaking process. Additionally, ‘revenge’ (as opposed to ‘justice’) implies that survivors seek to ‘get even’ by retaliating with the same level of abuse inflicted upon them. Consequently, the actions and responses of the survivor becomes the central focus of concern, deflecting from the behaviour of the perpetrator and any form of institutional accountability. ‘Revenge’ functions to invalidate, gaslight, victim-blame and silence survivors, and thus normalises and perpetuates abuse.

Supporting this interpretation, ‘revenge’ as a discourse of deflection has been identified by feminist critics upon examining news headlines and discourse surrounding a high-profile case of sex trafficking. The survivor, Gisele Pelicot, bravely chose to give up her rights to anonymity, so that the world would become aware of the abuse she experienced – and aware of the abuse that many women and girls have and will be subjected to. Instead of highlighting her bravery or using the term ‘justice’, The Telegraph published an article titled: ‘Wife takes public revenge on men who ‘raped her every night on husband’s orders’. Responding to this specific headline and in alignment with my criticism of Kerem's use of ‘revenge’, feminist blogger Anita Whyte Moran (2024) posits that ‘revenge’ “perpetuates the stereotype of the “vengeful woman,” a trope that has long been used to discredit women’s legitimate grievances and struggles for justice” (para. 3).

‘Justice’ is more conducive to validating and empathising with survivors, as opposed to shaming them for ‘getting even’ through revenge. Therefore, Kerem's use of ‘revenge’ over ‘justice’ is

problematic. Particularly, because they fail to acknowledge the prevalence of such competing discourses, consider and respond to criticism surrounding such language, or explain why they have chosen ‘revenge’. Furthermore, I am particularly critical because of their profession as a psychotherapist, which implies that they use such language in their practice. This exemplifies how wellbeing professionals do not always take a trauma-informed approach and may work in ways that are counter-intuitive to healing. This is necessary to reinforce, echoing criticisms made in chapter one about the role that professionals play in victim-blaming and retraumatising survivors.

In summary, I am critical of the absolutism of Kerem’s arguments, which are not supported with empirical evidence. I am critical of the omission of survivor voices and the centring of the professionals’ voices, which uphold existing power imbalances between professionals and clients or survivors. I am critical of the victim-blaming rhetoric that is perpetuated by Kerem using ‘revenge’ – and ultimately, the victim-blaming rhetoric perpetuated across both edited collections given the clinical orientation of the research.

This thesis strives to respond to such criticisms, limitations, and the identified literature gaps in distinctive and novel ways. Firstly, through the application of an anti-pathology framework to conceptualise and understand experiences of trauma, specifically child abuse-related trauma. This responds to a theoretical gap, given that a clinical approach to understanding trauma and memory currently dominates across trauma studies and documentary studies, which can be problematic by perpetuating victim-blaming. Secondly, through the inclusion of child abuse survivors as participants in the research, specifically the filmmakers. This responds to an empirical evidence gap, given the general lack of research in documentary studies that includes filmmaker perspectives, and particularly in contexts of autobiographically representing child abuse and healing. The broader implications and necessity of involving survivors are explored further in chapter four. Finally, the tripartite methodological framework is utilised, in which three domains of analysis are considered, and findings are synthesised across domains. This responds to methodological and empirical evidence gaps, as there are seemingly no existing studies that specifically examine the wellbeing impacts on survivors and take a comprehensive, rigorous approach to doing so; particularly one that applies Nichols’ modes as an analytical framework in conjunction with affordance theory.

3.7 Conclusion

In chapter three, I critically examined existing scholarship surrounding autobiographical documentary viewing and filmmaking, its relationship with ‘therapeutic’ and other wellbeing outcomes, and how existing understandings and theory have intersected, or may intersect, with the experiences of child abuse survivors. Simultaneously, I outlined how ‘affordances’ and ‘autobiographical documentary’ are theorised and applied in this thesis.

I contributed to defining the autobiographical documentary, addressing a theoretical knowledge gap that is underexplored, particularly in relation to Nichols's (2017) documentary theory. I expanded upon Nichols’ theory, considering the context of autobiographical representations, in which the filmmaker reflexively occupies the roles of both filmmaker and main participant, inevitably encountering the ‘autobiographical impulse’ (Citron, 1999) and potentially a ‘paradox.’ Moreover, I argued that autobiographical documentaries may be conceptualised as ‘countercultural,’ and their creation may be considered an act of defiance that can subvert existing power structures, including victim-blaming culture.

I critically evaluated how traumatic memory has been conceptualised in literature within the intersection of documentary and representations of trauma, exposing another theoretical literature gap. Drawing on arguments made in chapter two, I underscored the necessity of developing a more nuanced and fluid understanding of traumatic memory to avoid perpetuating victim-blaming discourses; beyond the binary notion that traumatic memories are inherently fragmented. The anti-pathology framework I orientate experiences of trauma through responds to this literature gap, challenging deficit-based language and attitudes which are prevalent in psychological practice, and existing literature surrounding documentary representations of abuse.

Considering the limited research surrounding the wellbeing impacts for survivor-filmmakers and survivor-viewers, chapter three has argued for the imperative to incorporate empirical evidence from survivor-filmmakers and survivor-viewers within research, to enrich understandings about the affordances of autobiographical documentaries. This may help ensure that the academic landscape, where documentary, the representation of trauma, and autobiography intersect, evolves in ways that reflect and are responsive to lived experiences of survivors. In this specific context, there is a lack of literature that draws on various domains of analysis to inform the

research findings and conclusions. The tripartite methodological framework (Thompson, 1990) utilised in this study, however, integrates three distinct areas, providing a comprehensive approach to examining wellbeing impacts for survivors.

Chapter four continues to explore how this methodological literature gap is addressed (and the limitations of doing so), discussing the scope of participants and documentary texts, and the resistance surrounding the involvement of survivors in research – including my own involvement as a survivor-researcher.

Chapter Four: Methodology

4.1 Introduction

Chapter four serves two main purposes: to present a methodological roadmap for the research undertaken and to present insights from my experiences for future survivor-researchers to draw on. Chapter four outlines and justifies the use of a tripartite methodological approach, and the methods applied to investigate each domain of analysis: analyses of the documentaries in question and TVI semi-structured interviews with survivor-filmmakers and wellbeing professionals. Reflexive thematic analysis is outlined as a method of data analysis. I discuss my positionality as a survivor-researcher and how I have taken an autoethnographic approach to the thesis, where I have embraced the bias I possess, enhancing certain aspects of the process and complicating others. Answering the fourth research question, I explore the affordances of being a survivor-researcher when investigating autobiographical documentary representations of child abuse and the experiences of survivor-filmmakers. I conclude with autoethnographic reflections about how I, as a survivor-researcher, have been impacted by the research process, in ways that are conducive and detrimental to my healing.

To remind readers, this thesis seeks to address the following questions:

- What are the potential wellbeing impacts for child abuse survivors who engage with the autobiographical documentary filmmaking process to represent their experiences of child abuse and healing?
- What are the affordances of the production of, and mode of expression afforded by autobiographical documentary filmmaking for child abuse survivors?
- What are the potential wellbeing impacts/outcomes for child abuse survivors who engage as viewers?
- What affordances do survivor-researchers (or lived experience researchers, broadly) bring to research projects investigating autobiographical documentary representations of child abuse and the experiences of survivor-filmmakers?

4.2 Statement of Ethics Approval

This research project has been approved by the Human Research Ethics Committee (Health) at the University of Waikato as HREC(Health)2022#09.

4.3 Qualitative and Iterative Design

This research design is qualitative, exploring the characteristics of behaviour, thought and emotions. Qualitative methods collect rich data about the complexities of the human experience, whilst acknowledging that experiences are not universal. An objective of this thesis is to contribute to depth of understanding by exposing nuances and similarities between experiences and circumstances. As there is little existing research about whether autobiographical documentary filmmaking may produce therapeutic or other wellbeing outcomes for child abuse survivors (as filmmakers, viewers, or participants), I have strived to collect data that has depth as opposed to striving for breadth.

I utilised an iterative research design, moving between data collection and interpretation responsively. Such flexibility meant that the focus of the study could be redirected according to the information and knowledge acquired as the research progressed – both when reviewing the literature and engaging with the research methods.

This approach was also pragmatically useful. If I was unable to interview survivor-filmmakers (which was a concern), the research focus could have been reorientated to predominantly explore the (potential) impact of viewing autobiographical documentaries for survivor-viewers, and the extent to which wellbeing professionals engage with them and what impacts this has.

4.3.1 Limitations

The major limitations of qualitative research surround the personal bias of the researcher potentially impacting the study, the subjectivity of the findings, and the lack of external validity that qualitative analysis offers (Denzin et al., 2000; Malterud, 2011). While I understand the implications of subjectivity for research outcomes, I agree with communications scholar Arthur Bochner, who argues that it is “an illusion to think we can minimise bias” (2016, personal communication). This is because a researcher is not an invisible force, but a “presence” (Bochner, 2016) that exists throughout the research project. Researchers have their own socio-

cultural, political, and ideological beliefs, influencing the research design and the conclusions drawn (Denzin et al., 2013; Finlay, 2016). In contrast to quantitative research, qualitative research does not seek external validity and objectivity. Instead, it emphasises the need for researchers to recognise their biases and be transparent about them so that readers can understand how these biases may influence research outcomes (Denzin & Lincoln, 2000).

4.4 Reflexivity and Autoethnography

Due to the interpretive ontological and epistemological positionings of qualitative research, and the impossibility of eradicating bias (Thorne et al., 2015; Mehra, 2002), I strived to take a reflexive approach to the research. According to Roni Berger (2013), “Reflexivity is commonly viewed as the process of a continual internal dialogue and critical self-evaluation of researcher’s positionality as well as active acknowledgement and explicit recognition that this position may affect the research process and outcome” (p. 2). Adopting a reflexive approach forces the researcher to question and examine the choices they make regarding the research design and in relation to their own life experiences, identity characteristics, biases and motivations (Alcoff & Potter, 1993; Lincoln et al., 2013; Reinhartz, 1997, as cited in Koopman et al., 2020). Reflexivity strengthens the credibility of the research and the researcher’s understanding of their work (Berger, 2013).

While applying reflexivity sounds reasonable, Wilma Koopman et al., (2020) recognises a lack of literature about the pragmatics of engaging with reflexivity meaningfully. Engaging with traditional approaches, such as writing reflexive sections in the research report and discussing your positioning with your research team, may result in a “superficial impression that misses hidden elements of one’s perspective” (Berry & Clair, 2011, as cited in Koopman et al., 2020, p. 1). Furthermore, challenges associated with engaging in reflexivity may be exacerbated for researchers who identify as ‘insiders’ of the research context (Greene, 2014, as cited in Koopman et al., 2020) as they “possess a priori intimate knowledge of the community and its members” (Hellawell, 2006, p. 184, as cited in Koopman et al., 2020, p. 1).

Although I am not positioned as a direct ‘insider’ of the experiences I am exploring, my identity as a survivor-researcher has inevitably impacted the research design and outcomes. I identified some impacts from the outset. For example, like Koopman et al. (2020), I relied on my skills as a

survivor to manage signs of distress, vicarious trauma, and retraumatisation if they were evoked during the project; skills that I would not have developed, had I not experienced child abuse and felt compelled to explore therapeutic coping mechanisms. However, because I am a survivor-researcher, it is a challenge to “achieve the depth of introspection required for reflexivity” (Koopman et al., 2020, p. 2), and consequently a challenge to ensure that the research is robust and rigorous.

To facilitate deeper engagement with reflexivity and to critically examine my identity as a survivor-researcher in relation to the research design and outcomes, I have employed autoethnography. Both a methodology and a method, autoethnography is described by Carolyn Ellis et al., (2000) as “an autobiographical genre of writing that displays multiple layers of consciousness, connecting the personal to the cultural” (p. 739). At the core, autoethnography “entails the scientist or practitioner performing narrative analysis pertaining to himself or herself as intimately related to a particular phenomenon” (McIlveen, 2008, p. 3). Critical autoethnography allows readers to gain insights into otherwise inaccessible accounts of experiences (Wyatt, 2005, as cited in Koopman et al., 2020, p. 2), and highlights the researcher’s voice within their cultural context. These affordances position autoethnography as a useful tool for facilitating reflexivity in my research (Koopman et al., 2020).

I engaged with different forms of autoethnography, each with a distinctive focus. In the early stages of the research, I used narrative autobiographical writing to capture any experiences and facets of my life that I thought could impact the research. Following the interviews, I used reflexive ethnography, recording reflections about my experiences conducting each interview. This was done in conjunction with listening to the interview recordings to reflect upon and refine my approaches as an interviewer. According to Koopman et al., (2020) the voices of qualitative researchers are “essential instruments for data collection, yet analytical techniques are largely based on transcribed interviews...where the nuances of pauses, laughing or crying may be noted and not heard by the researcher” (p. 6). More generally and frequently, I used journaling to record my stream of consciousness, thoughts, feelings, and ideas that were evoked throughout the project.

Writing outputs from engaging with the autoethnographic methods were analysed iteratively to uncover discourses and cultural themes, identify the inclusion and/or omission of experiences,

connect the present to the past, and understand relationships between myself and others, including the research participants. The findings are referenced in this chapter and in the introduction to achieve the depth of introspection and rigour required of a reflexive approach.

Chapter one provided insights regarding how my socio-cultural experiences have impacted the study, demonstrating how I am deeply intertwined with the topic and the theory underpinning it – which have shown up as ‘themes’ across my writing, all of which were identifiable upon analysing journal entries. These were not discoveries but insights I was already aware of. In retrospect, that is likely because I engage with journaling as a coping mechanism and have experience (although minimal) conducting research related to child abuse, and in the context of examining documentaries that represent discourses about child abuse. Consequently, I conducted the research with introspection and self-awareness. Still, the insights are welcomed confirmations and useful because they have given me ‘evidence’ to utilise in the thesis.

The autoethnographic process enabled me to uncover and “articulate buried perspectives that require visibility” within my research (Koopman et al., 2020, p. 8), so that readers may make informed judgements about the study’s rigour and the impacts of my connection to the research. Most buried perspectives surround my experience as a survivor-researcher and reveal how and why the project has impacted my wellbeing. I discuss these separately in section 4.9 so that focus remains distinctly on wellbeing implications. This closes the chapter as it emulates my timeline and process, arriving at the understandings after engaging with the data and methods of analysis.

Experiences and buried perspectives revealed through the autoethnographical writing were as expected. I have experienced victim-blaming and resistance, and I have encountered and been impacted by many of the stigmatising discourses that are identified in the findings. Anger was revealed to be a motivator for conducting the research. I often feel enraged about the prevalence of violence against women and children, femicide, the failures of justice and protective systems, and I am particularly angry at men for perpetrating and benefiting from violence. This gender-bias has prompted me to approach abuse related literature written by men with extra caution. This is in pursuit of advocating for the rights and voices of abuse survivors, particularly women and children, and displacing the power possessed by perpetrators of abuse, family harm, and sexual violence – most of whom are men (Flood et al., 2022).

Another motivator emerged upon considering what information, thoughts, and feelings I *excluded* from my writing: the desire to find evidence of therapeutic impact for survivors. This motivator stems from my interest in documentary production as a creative practitioner, and from the pressing need for alternative modes of healing, beyond clinical or professionally guided supports. This is given the state of disrepair that Aotearoa's wellbeing services are in, crumbling away before our eyes, and the relentless prevalence of child abuse (as explained in the introduction). There *must* be alternatives and hope for survivors' healing justice. I attempted to mitigate this driving force and subsequent bias towards identifying therapeutic outcomes. When analysing interview transcripts, I substantiated suspected findings of therapeutic impact by applying theories and definitions grounded in lived experience (as it will become clear in the succeeding chapters).

4.5 Tripartite Methodological Approach

The wellbeing impacts of engaging with autobiographical documentary films about child abuse and healing (as survivor-filmmakers and survivor-viewers) and the affordances contributing to such outcomes, remain at the centre of this thesis. I have applied John B. Thompson's (1990) tripartite methodological approach to explore multiple arenas in which meaning is constructed for survivors who engage with the documentary films in question, and to:

explicate the connections between particular media messages, which are produced in certain circumstances and constructed in certain ways, and the social relations within which these messages are received and understood by individuals in the course of their everyday lives (p. 306)

As chapter three explained, there is a lack of literature about documentaries which draws on various domains of analysis, with Nash (2011) reminding us of the overreliance on textual analyses to understand documentary ethics. Thus, Thompson's (1990) framework is particularly useful for this thesis, as it proposes three object domains of analysis to consider when investigating media texts: the production of the text, the construction of the text, and the reception and appropriation of the text.

The production domain is concerned with the process of creating the text and the process of distributing the text (Thompson, 1990). To address this domain, I have explored the experiences of survivor-filmmakers by conducting in-depth, semi-structured interviews that are TVI.

The construction domain is concerned with how a media text is formally and discursively constructed, including what discourses are represented and how (Thompson, 1990). To address this domain, I have analysed the autobiographical documentaries using a combination of critical discourse analysis (CDA) (Fairclough, 1992a; 1992b; 1998; 2001; Fairclough & Wodak, 1997), affect analysis (Tait, 2016; Plantinga & Tan, 2007) and audio-visual analysis methods, in conjunction with applying Nichols' (2017) documentary modes of representation as an analytical framework due to its flexible application (as discussed in section 3.2.3).

The reception and appropriation domain is concerned with audiences' responses to a text and the socio-historical conditions in which meaning is constructed (Thompson, 1990). To explore the possible impacts for survivor-viewers who engage with autobiographical documentaries that represent experiences of child abuse and healing, I have conducted in-depth interviews with wellbeing professionals.

While these domains may be examined individually, they are interdependent sites within the construction of meaning: each domain is "constituted by abstracting from the other aspects of mass communication" (Thompson, 1990, p. 304). This is because "symbolic forms do not subsist in a vacuum: they are produced, transmitted and received in specific social and historical conditions" (Thompson, 1990, p. 281).

Findings across the three domains are synthesised and integrated into the discussion, highlighting connections between specific media messages and discourses, whilst acknowledging the socio-historical context in which they are disseminated and understood (Thompson, 1990). This synthesis of findings is where the application of CDA as a method of textual analysis becomes fully realised. That is, the documentary discourses about child abuse (identified in chapter five) can be connected to specific wellbeing outcomes for the survivor-filmmakers (identified in chapter six) and certain potential outcomes for survivor-viewers (identified in chapter seven).

4.5.1 Alignment with Social Impact Theory

According to social impact theorist David Whiteman (2004), the social impact of documentaries can be assessed and evaluated using the ‘coalition model’ (in instances where a film aims to create social change and has planned activities). Ultimately, Whiteman's (2004) coalition model avoids only assessing a film as a final product. Instead, the micro, macro, and collective impacts are investigated, which occur throughout and beyond the filmmaking process and concern audiences, producers, participants, activists, organisations, and decision makers (Saputra, 2022). The assessment methodologies involve conducting interviews, participant observations, and content analysis (Whiteman, 2004).

While I did not conduct observations, I did conduct interviews that focused on the production and distribution processes of the survivor-filmmakers (who were at diverging stages of their filmmaking journeys), alongside textual analyses, and interviews with wellbeing professionals as viewers. In other words, I have avoided only assessing the documentaries as final products. As such, the applied tripartite methodological approach to investigating wellbeing outcomes and impacts aligns with Whiteman’s coalition model to holistically assess and evaluate social impact. This is important to note, given the recent rise of social impact theory in documentary studies.

4.5.2 Application Challenges

The most challenging aspect of applying the tripartite methodological approach was navigating the large amount of data generated – which I experienced as both an advantage and limitation to the progression of the research.

Generating a large amount of data was an ideal ‘problem’ to encounter. It presented opportunities to contribute meaningfully to discourse surrounding child abuse and survivor experiences. I went into the project concerned that, if anything, I would not have enough data to extract meaningful insights from. As aforementioned, I took a risk by setting out to interview survivor-filmmakers, for which Thompson’s (1990) model was valuable, as it is compatible with a range of data collection methods. So, having contributions from four survivor-filmmakers and access to their films was more than I expected and hoped for.

Contrastingly, Thompson’s (1990) model was limiting because the volume of data was difficult to pragmatically manage. It extended the process of determining what insights were the most

valuable to include, which I found extremely overwhelming at times. It felt like it took a significant amount of time to ‘process’ the data, likely because I was not only processing them in an ‘academic’ sense, but also in a ‘personal’ sense – I was processing as a survivor-researcher. There was no quick fix for dealing with this challenge. Simply put, I kept at it, and at a pace that felt safe, not all-consuming. I also decided not to conduct follow-up interviews with the survivor-filmmakers or wellbeing professionals to help manage the overwhelm.

4.6 Method 1: Textual Analysis

To analyse the construction of the autobiographical documentaries (as chapter five will demonstrate), I have applied CDA and affect analysis, in conjunction with theoretical frameworks to guide the analysis: documentary modes of representation (Nichols, 2017) and the circuit of culture (du Gay et al., 2013).

4.6.1 Critical Discourse Analysis and Affect Analysis

‘Discourse’ is a way to view, understand, and negotiate society (Jørgensen & Phillips, 2002). Discourses are shaped by culture, and discourses shape culture – the relationship between them is somewhat symbiotic, informing one another in response to existing and evolving power dynamics and social structures. Discourses can mould perceptions, attitudes, and beliefs, and are often taken for granted or accepted as ‘truths.’ They inform the creation of policy, education, mediate how survivors are responded to, how society understands and responds to accounts and disclosures of abuse, and how survivors understand themselves and the world.

I align with linguist Norman Fairclough’s (1992b; 1998; 2001) social approach towards discourse, which positions discourse as a form of language that moves and evolves through semiotic human activities. I am not referring to language in a linguistic sense, but in a social sense, to account for forms of semiosis, including bodily gestures, poses, verbal signs, non-verbal signifiers, and audio-visual images, all of which are key modes of communication in documentary films. This alignment has led me to Fairclough’s (1992a; 1992b; 1998; 2001) approach to CDA, which encompasses three interrelated levels of analysis, where findings across levels are synthesised.

The first level is ‘text analysis’; an analysis of the documentaries in question – which corresponds most significantly with Thompson’s (1990) ‘production’ domain of analysis. As an

analytical framework, I applied Nichol's (2017) documentary modes of representation to identify the codes and conventions utilised by the survivor-filmmakers, as well as other audio-visual representational strategies used to represent discourses and 'unrepresentable' experiences. In conjunction, affect analysis was applied to identify the potential emotional and physical affects evoked or afforded by the representational strategies and discourses represented. Affect analysis "illuminates the embodied processes and reactions of experiences" (Tait, 2016, p. 4), recognising the individualised ways affect is experienced (Plantinga & Tan, 2007).

Despite the centrality of affect when considering the reception and experiences of viewers, affect analysis remains an underdeveloped area of scholarship, and consequently it is difficult to pinpoint how it should be undertaken (Tait, 2016). However, I have utilised the following criteria to guide the analysis and theorisation of affects. Affect is recognised as a "potentiality of the text rather than a guaranteed outcome in a spectator," while documentaries are positioned as an "intentional orchestration of multiple affects rather than as a text that generates a single, overarching affective or emotional state" (Plantinga & Tan, 2007, p. 16). Philosopher Gillian Rose (2016) suggests that how affect is experienced will depend on the environment in which the representation is consumed, each location possessing "their own economies, their own disciplines, their own rules for how their particular sort of spectator should behave, including whether and how they should look" (p. 21). Together, these understandings emphasise the consideration of film elements, including mood, tone, formal properties and representational strategies – and the relationship with affects evoked for viewers. Adopting this criterion prioritises nuanced experiences and allows their relationship with affordances to become realised.

The second level requires interpreting the text analysis in relation to the production, consumption and reception of the text, while the third level of analysis considers the analyses in relation to wider social and historical contexts. I applied the 'circuit of culture' (du Gay et al., 2013) as a theoretical framework to examine the different facets of culture in which meaning is continuously generated and regenerated. Doing so extended the bounds of the analysis, enabling me to consider identity, representation, and regulation of the autobiographical documentaries (alongside the production and consumption), which responds to their omission from the tripartite framework.

Before proceeding, it is important to clarify that CDA and affect analysis are not the only nor the primary methods of analysis utilised for this research study. As aforementioned, a tripartite methodological approach calls for multiple levels of analysis, where analysis methods can diverge across levels; a flexibility that makes the tripartite methodological approach compatible with my targeted application of CDA and affect analysis. Both methods were applied with the specific intention of identifying discourses about child abuse that are represented in the autobiographical documentaries, and the affect that may potentially be evoked for survivor-viewers. As chapter five demonstrates, the application of CDA was particularly successful. Discourses about child abuse and healing are identified across the four texts, some of which are connected to the experiences of the survivor-filmmakers and the potential impacts for survivor-viewers in the two succeeding chapters.

As it will become clear in what follows, CDA and affect analysis were not primarily used to analyse the interview transcripts, and the CDA and affect analysis findings do not necessarily ‘ground’ the discussion in chapter eight. Rather, they inform the discussion, alongside the findings from the interviews where I have applied reflexive thematic analysis to examine the interview transcripts (see section 4.8).

4.7 Method 2: In-depth Semi-structured Interviews

In-depth semi-structured interviews were the most appropriate method of data collection to engage in, enabling me to:

1. Explore the experiences of survivor-filmmakers: autobiographical documentary filmmakers who have produced or are producing a film about their experiences of child abuse and healing (documentary filmmakers who have autobiographically represented discourses about child abuse and healing)

Interviews with survivor-filmmakers aimed to:

- Determine the survivor-filmmakers’ motivations for sharing their story and experiences, and what influenced their engagement with documentary film
- Determine the role(s) that representing child abuse and healing in documentary have played, regarding the survivor-filmmakers’ healing

- Determine the survivor-filmmakers' desired impact and potential impact of the documentary, particularly for survivor-viewers
 - Determine the ethical issues associated with their filmmaking process and representations of discourses about child abuse, and how they were managed
2. Explore the expertise and experiences of wellbeing professionals in the areas of child abuse, trauma, therapeutic practices, creative art therapies, and explore their potential engagement with autobiographical documentaries that represent discourses about child abuse. Wellbeing professionals include clinical psychologists in a range of sub-fields, counsellors, occupational therapists, social workers, mental health nurses, and trauma specialists.

Interviews with wellbeing professionals aimed to:

- Evaluate the potential benefits and potential harm for child abuse survivors who engage with these materials as an audience
- Determine the extent to which wellbeing professionals might engage with filmic accounts within and beyond their training and practice, and in the contexts of child abuse
- Determine the kinds of information, resources, and supports available to survivors to understand abuse and healing
- Develop an understanding about where filmmaking and engagement with documentaries may sit in relation to creative art therapies
- Develop a deeper understanding of theoretical concepts, such as 'therapeutic' and 'healing process', in relation to survivors

The flexibility of open-ended interviews and the sense of direction that semi-structured interviews provide makes this method ideal for this exploratory study. This approach enabled me to cover certain ground to generate focused data while empowering participants to redirect the interview to discuss what was significant to them (which may not have been covered or prompted by the questions). As psychologist Svend Brinkmann and Kvale argue, "knowledge is constructed in the interaction between the interviewer and the interviewee" (2015, p. 4). The

open-ended semi-structured approach facilitated the co-construction of knowledge, the emergence of rich responses from participants, and ultimately deepened the exploration of the topics covered.

4.7.1 Justification for Interviewing Survivor-filmmakers and Excluding Survivor-viewers

As this research is concerned with exploring the experiences of child abuse survivors who have engaged with representations of child abuse (as filmmakers and viewers), I can not adequately understand their experiences without accessing first-hand accounts. There is a lack of such accounts in existing literature to draw on. Interviewing survivors to inform the research was therefore necessary, helping to address the lack of survivor representation in academia (as discussed in chapter one).

Child abuse involves the exploitation of power and can be considered as a form of power abuse. As argued by theologist Machteld Reynaert (2015), “when an adult abuses a child, there is always power through the adult’s position and possibilities” (p. 91). Survivors have suffered from the exploitation of power, and their voices were likely silenced during and after abuse. I remain aware that child abuse survivors (and abuse survivors) are likely to have had their trust broken by the abuser(s). Such a form of betrayal, tangled in a web of the complex power dynamics that exist between a child and an adult, often leaves the individual feeling powerless and ashamed. Thus, it is important to cultivate opportunities for survivors to reclaim power by exercising their right to speak as experts of their experiences.

Excluding survivors from this study may have reinforced their absence from research, perpetuating the discourse that their insights are not valuable enough, that they are too ‘vulnerable’ to participate, and that ‘expert’ opinion trumps lived experience. Exclusion contributes to the marginalisation of survivors. Therefore, it was imperative not to exploit my power as a researcher by excluding their voices in research that is *about* and *for* them.

I involved survivors as participants because I was aware, based on existing studies, that participation would likely empower survivors with choice, agency, and therapeutically impact survivors, as opposed to re/traumatising or harming them by evoking emotional distress; which scholars have identified as a risk for trauma survivors who participate in research (Draucker, 1999; DuMont & Stermac, 1996; Templeton, 1993). However, violence against women and

children researcher Robert Nonomura et al. (2020), and feminist criminology expert Amanda Burgess-Proctor (2015) conclude that there is minimal risk of participants experiencing discomfort or retraumatisation from participating in research, when care is taken to follow ethical guidelines. Research indicates that participants in trauma related research studies often experience positive feelings about their participation (Dragiewicz et al., 2023; Alexander et al., 2018; Campbell et al., 2010; Griffin et al., 2003; Johnson & Benight, 2003; Shorey et al., 2011). Thus, most participants of trauma related research studies experience positive feelings about their participation, which ethics committees often overlook: their focus remains “on harm and risk is not necessarily matched by a commitment to care” (Douglas, 2023, p. 114).

Reflecting the work of feminist ethics researcher Jennifer Douglas (2023), this study aimed to apply a ‘caring research design’ to empower participants and extend compassion. Benefits for participants may include feeling recognised, listened to and a sense of validation at being able to share their stories in a way that might benefit others, and contributing to a broader perspective on the subject of abuse (Burgess-Proctor, 2015; Griffin et al., 2003; Legerski & Bunnell, 2010; Newman et al., 2006; Seedat et al., 2004; as cited in Nonomura et al., 2020, p. 201). Such potential benefits are in addition to the public exposure that research participation may offer survivor-filmmakers, who are seeking to draw attention to their documentary and promote viewership.

Participation of survivors can therefore be interpreted as “justified by the higher likelihood of positive participant experiences and the contribution to crucially important knowledge in various areas of trauma studies” (Newman et al., 2006, as cited in Nonomura et al., 2020, p. 205). Also reducing the risk of harm and retraumatisation, the survivor-filmmakers had already opted to publicly reflect on their abuse experiences by creating their documentaries with the intention of publicly disseminating and discussing them. This suggests that the survivor-filmmakers have re/processed their abuse experiences to the extent where they are comfortable discussing their filmmaking processes. Their filmmaking processes remained the focus, and I did not probe survivor-filmmakers about their abuse experiences, beyond what their documentaries revealed.

I remain aware that I do not possess the skills and resources required to appropriately respond to triggering, harming, or re/traumatising multiple survivors simultaneously – and that human research ethics committees can be restrictive when determining the capabilities of novel

researchers, especially where sensitive subjects and experiences are being explored, like child abuse. Consequently, I decided not to conduct ARS or interviews with survivor-viewers. Although it would have provided valuable insights by addressing the reception and appropriation of the documentaries, it was not ethically or financially feasible. If I had access to additional research funds, I would have endeavoured to hire wellbeing professionals to provide therapeutic support to survivor-viewers during and after their participation. Thus, ethical and financial constraints led me to interview wellbeing professionals.

4.7.2 Trauma-and-Violence-Informed (TVI) Interviews

In a study conducted by psychologist Corina Benjet et al. (2015), over 70% of participants reported that they had been exposed to a traumatic event during their lifetime, while 30.5% of participants reported that they had been exposed to four or more traumatic events. This study demonstrates how common experiences of trauma are, suggesting that communication with survivors in our day-to-day lives is highly likely. Supporting this interpretation, and as explained in section 2.4.1, trauma and human suffering are universal experiences (Taylor & Shrive, 2023). Consequently, I would still endeavour to use a TVI approach to interviewing if this study did not pertain to child abuse. A TVI approach should be standard practice, because in any case researchers can not predict the responses of participants.

The sensitive nature of child abuse discourses and the potential that the survivor-filmmakers are vulnerable to distress and retraumatisation further demonstrates the need to utilise a TVI approach. Survivor-filmmakers who have experienced child abuse may be considered vulnerable and at risk of experiencing retraumatisation, but such vulnerability should be seen as a “cautionary signal,” “calling for proper safeguards” (Kipnis, 2001, cited in Alexander et al., 2018).

TVI approaches have “emerged in relation to service provision in the fields of anti-violence, mental health, and substance use” (Lalonde et al., 2020, p. 1) and may be applied in a range of contexts, including research. When applied:

TVI approaches promote that all research, but especially research with populations that have experienced trauma, be conducted in a way that is responsive to trauma and

violence. TVI research seeks to reduce the chances of re-traumatization and harm for research participants and the research team (p. 1)

The Learning Network for the Centre for Research and Education on Violence Against Women and Children puts forward a framework for working with research participants who have experienced trauma and violence (Lalonde et al., 2020; Nonomura et al., 2020). Four primary principles “can be used to create a safe and respectful environment for interviews with survivors” (Lalonde et al., 2020, p. 1). The principles overlap and are interdependent. I outline each one below, highlighting how I have attempted to adhere to them to minimise risk for survivor-filmmakers and enhance the experience of participants, ultimately supporting their safety.

4.7.2.1 Understand the Complex Nature of Trauma and Violence: Impacting Lives, Behaviour and Understandings of the Self

To help protect the safety of participants, I had to develop knowledge about the nature of trauma, regarding childhood experiences of abuse and family harm.

Trauma survivors are at risk of being retraumatized in many contexts, such as when accessing social services, health care, and going about their everyday lives, given the prevalence of victim-blaming. In their resource, *The Trauma Toolkit*, the Clinic Community Health Centre (2013) explains that when service providers lack knowledge about trauma and how it affects people, it limits the types of interventions offered, consequently restricting who receives support:

When retraumatization happens, the system has failed the individual who has experienced trauma, and this can leave them feeling misunderstood, unsupported and even blamed. It can also perpetuate a damaging cycle that prevents healing and growth. This can be prevented with basic knowledge and by considering trauma-informed language and practices (p. 6)

In research interviews, vulnerable participants are at risk of experiencing similar harm if the researcher demonstrates ignorance surrounding the topics in question (Nonomura et al., 2020). For example, a researcher who lacks knowledge about the systemic influences of child abuse and the exploitation of power by an adult who abuses a child, may ask inappropriate questions such as “why did you not fight back?”, which victim-blames the participant; it perpetuates the stigmatising discourse that the participant had the means to ‘fight back’ and should have done so

to prevent being abused. To avoid retraumatising participants, interview questions must be developed with sensitivity and awareness of existing discourses surrounding child abuse, healing, and especially stigmatising discourses.

I possess an informed but ever-expanding understanding about the nature and complexities of child abuse, discourses about child abuse, and the prevailing societal discourses about child abuse and healing. As a survivor of long-term child abuse, I possess unique insights about experiencing child abuse and navigating life after developmental trauma. By ‘ever-expanding,’ I mean that I endeavour to develop my knowledge continually. I have spent years conducting personal research to understand my own, my siblings’, and other survivors’ experiences in ways that recognise the complexity, nuance, and similarities between them; part of my quest to ‘break the cycle.’ Throughout the project, I sought out research and accounts about the experiences of survivors, and discourses about child abuse and healing. This included taking on research assistant roles to support trauma and abuse related projects, and attending various conferences, seminars, workshops and trainings about trauma-informed practices, child abuse safeguarding, and anti-pathologising approaches to working with women and girls.

My ever-expanding knowledge base regarding child abuse and survivor experiences is an affordance that I brought to the research project, which informed how I communicated with the survivor-filmmakers and the implementation of a TVI approach to the research. Insights garnered from my experiences of abuse and healing, and my ongoing personal and professional development of understanding of child abuse, trauma, and discourse, informed the construction of the interview schedules and my interview approach. I interacted with the survivor-filmmakers as I would any other survivor, with empathy and gratitude. I could effortlessly empathise with their experiences, which potentially helped the survivor-filmmakers feel that their experiences were being understood, valued, and received with care.

4.7.2.2 Create Safe Environments for Survivors

To the best of the researcher’s ability, it is important to cater to participants’ environmental needs to help foster a sense of safety and comfort. For example, participants may have sensory needs or triggers related to specific words, discourse, images, sounds, body language, and scents.

As the interviews were conducted online via Zoom, there were environmental factors that I could not control within the participants' spaces, including smell and lighting. As suggested by Lalonde et al. (2020), I asked participants if there were topics or aspects of their experience that they wanted to avoid discussing, and if I could do anything else to avoid presenting triggering stimuli and evoking discomfort or stress. For example, the participant might prefer that I conduct the Zoom interview in a dimly lit room due to a visual impairment or neurological sensitivity, or in a neutralised, less politically charged environment than, say, a university campus. Additionally, I assured participants that they were welcome to have support persons or animals present so they could participate in whatever way they felt most comfortable (Lalonde et al., 2020).

Conducting the online interviews may have limited my ability to express warmth through body language, because participants only saw so much of me. I only saw so much of their body language, which limited my ability to gauge the participants' feelings.

4.7.2.3 Foster Opportunities for Choice and Collaboration

This principle goes hand in hand with creating safe environments. As demonstrated above, creating a safe and comfortable environment has required collaboration between the participants and myself, as their requirements and preferences have helped shape the interview process, structure, and overall atmosphere.

4.7.2.3.1 Informed Consent: An Ongoing Process

As suggested by Lalonde et al. (2020), I have treated consent as an ongoing process in which participants had multiple opportunities to provide and withdraw written and verbal consent, and to determine the extent of their participation. My rigorous consent process, as visually represented in Figure 4.1 and Figure 4.2, aimed to reinforce the participant's rights to withdraw and foster a sense of autonomy and control for them – as I remain aware of how survivors of trauma may have experienced being or are “accustomed to accommodating themselves to non-choice situations in order to survive” (Paradis, 2009, as cited in Lalonde et al., 2020, p. 3).

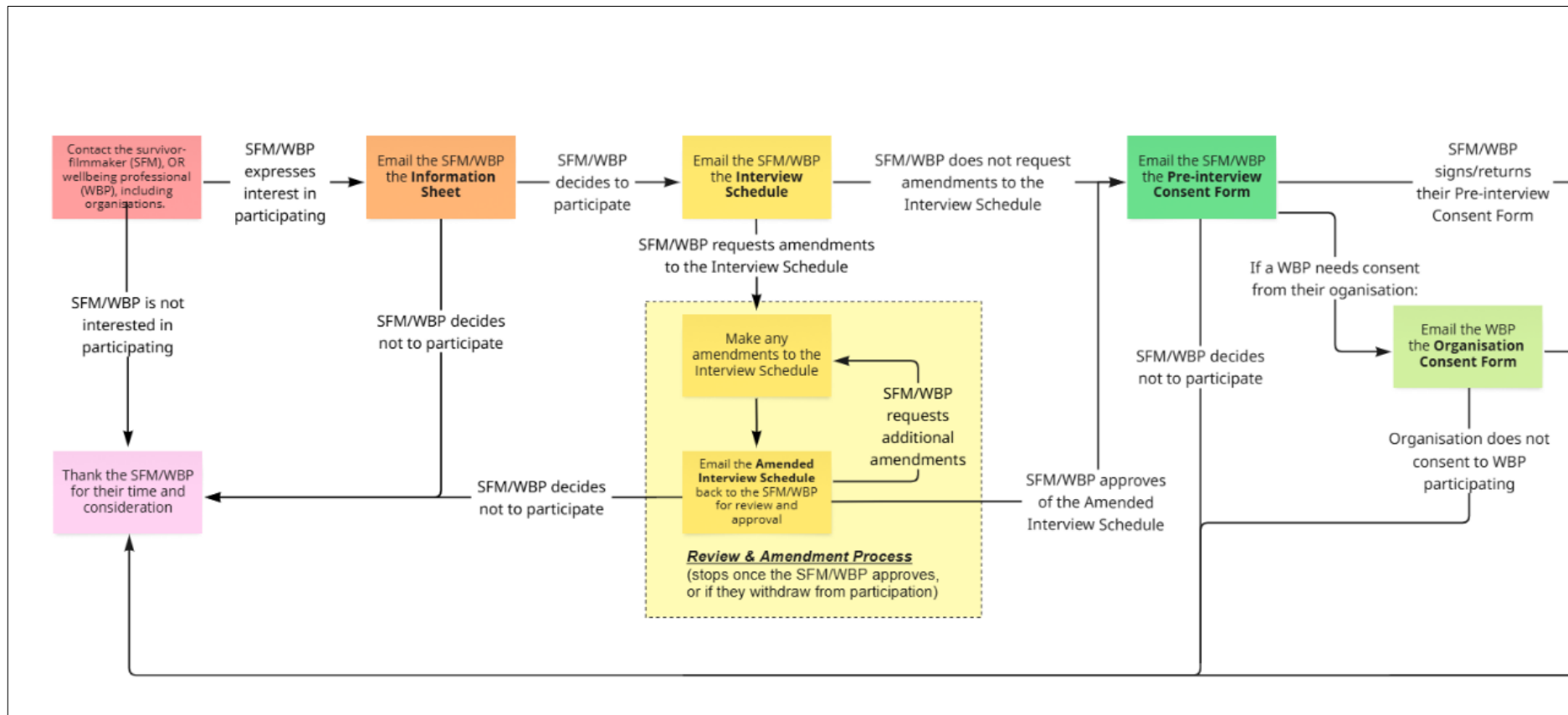


Figure 4.1
Informed Consent Process: Part 1

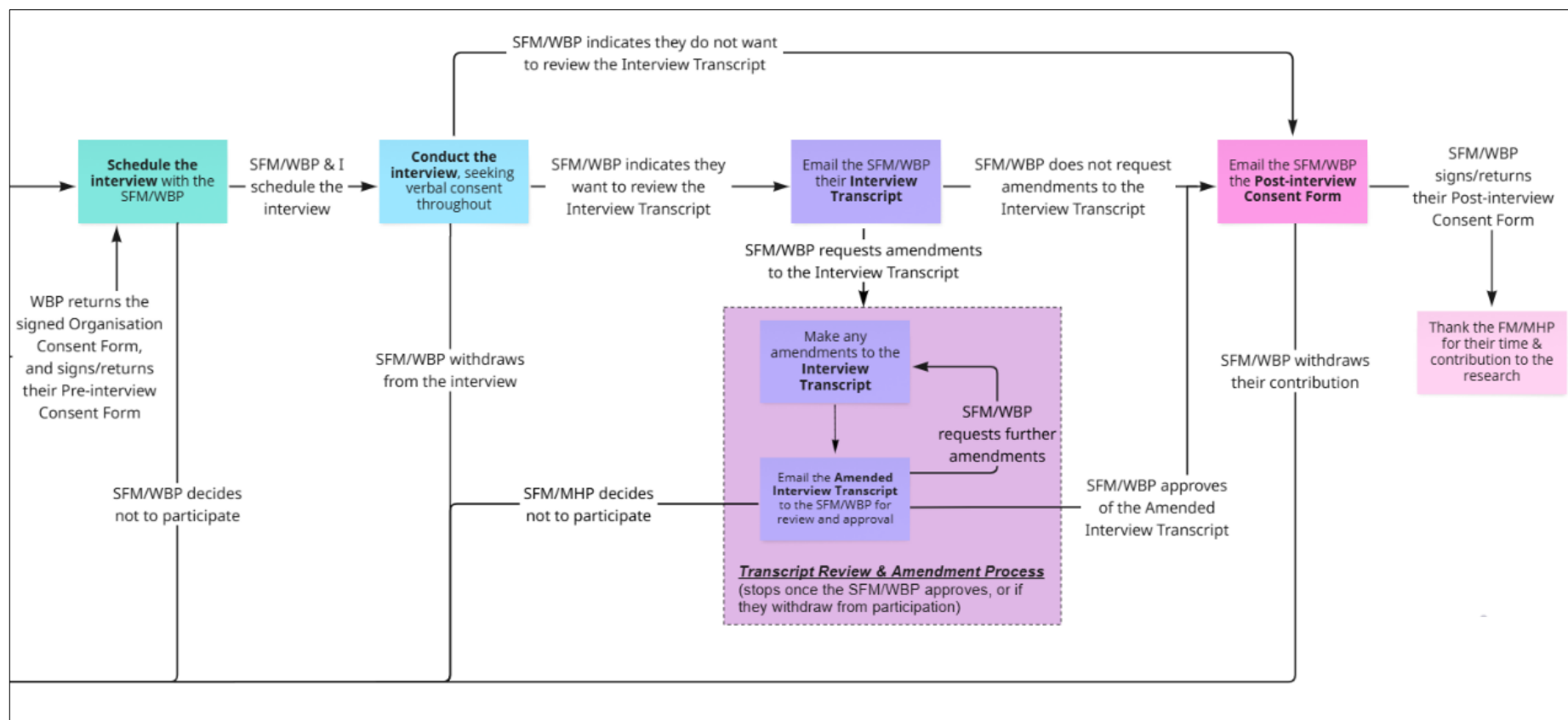


Figure 4.2
Informed Consent Process: Part 2

The first opportunity for participants to consent was upon receiving the information sheets after making initial contact and interest in participating was expressed. In line with suggestions from Lalonde et al. (2020), the information sheets emphasise that participation in the research is voluntary and that there are no repercussions if they choose to end the interview or withdraw from the study entirely. It was made clear that they were welcome to withdraw from their participation leading up to the interview taking place, and at any point during the interview (also reiterated at the beginning of the interview). Different formats of participation (such as email correspondence) were offered to enhance the accessibility and feasibility of participating. For survivor-filmmakers, participation was conditional on their identity being known or on using a pseudonym and having their film title omitted (which would have provided limited protection).

Participants received the proposed interview schedules to review and approve. This gave participants the opportunity to prepare their responses, assess the implications of answering questions, and evaluate whether questions or sections of the interview schedule should be removed to avoid discomfort and triggers. This is a protective factor for participants, reducing the likelihood of harm, retraumatisation, and withdrawal from participation. Another protective factor that minimised risk of harm and withdrawal was the semi-structured interview format. This format encourages participants to exercise agency through the collaborative formation of the discussion topics and interview trajectory.

Pre-interview consent forms provided a checklist for participants to indicate whether they consent to having their interview audio-recorded, whether they would like to review their interview transcript, and whether they would like to be informed about where and how to access the thesis once available. I asked three additional questions to provide further opportunities for ongoing choice (Lalonde et al., 2020):

- How will I let the researcher know if I would like to end the interview while it is in process?
- Is there anything else you would not like to discuss during your interview?
- Is there any information that you may be happy to discuss during the interview, but that you do not want shared in a publication?

Participants also had the option to receive the full interview transcript to read over and approve, allowing them to remove any content, reword, or add to their responses.

Post-interview consent forms provided a checklist for participants to indicate if consent to participate was given; if they reviewed and approved of the interview transcript (where applicable); if they were asked for verbal consent during the interview; if they permit their contributions to be used in other academic publications beyond the thesis; and if any preferences indicated in the pre-interview consent form have changed.

In response to the sensitive nature of this research, I allowed survivor-filmmakers to withdraw from participation up to twelve weeks after their interview. This sought to help promote survivor-filmmakers' sense of agency and control regarding their representation and of others implicated (participants and relatives). Discourses about child abuse are ethically charged, and autobiographical representations can inadvertently involve representing others. Survivor-filmmakers were at diverging stages of production, and the impacts on themselves and their participants were still being realised. Consequently, survivor-filmmakers were allocated a lengthy withdrawal period to provide them ample opportunity to critically reflect upon their interview and the potential ethical ramifications of participating.

This approach posed a risk to the completeness of the data, as the survivor-filmmakers could have withdrawn at the late stages of the timeframe. However, wellbeing professionals were only allocated up to four weeks after their interview to withdraw. This meant that if I lost all data from the survivor-filmmakers, I would still have data to utilise.

4.7.2.4 “Provide a Strengths-based and Capacity-building Approach to Support Coping and Resilience” (Lalonde et al., 2020, p. 1).

This principle recognises that, while discussing trauma may put participants at risk, the research interview can provide ample opportunity for the researcher to highlight participants' resilience and coping strategies.

Bioethics Officer Michelle Meyer (2018, as cited in Lalonde et al., 2020) suggests asking questions about the participant's strengths and future goals. This could include asking the participant to describe themselves, their hobbies and interests and probing participants for further information about topics or things that they have mentioned that have elevated the mood or bodily responses. Lalonde et al., (2020) provides the following example: “You had a huge smile when you spoke about your son. Can you tell me more about him?” (p. 5).

Reflecting on this suggestion, I employed a ‘meet survivors where they are at’ approach to the interviews. This meant that, if a survivor asked me about my personal experiences of abuse, or discussed specific instances of abuse and wanted to take the conversation in that direction, I would follow their lead and engage in the discussion – not shut it down. This occurred a few times, leading to intimate and personal discussions. This conversational and candid interaction subverts traditional ideas of a detached researcher, and some may argue that this approach is ‘unethical’ or that it increases the risk of participant harm. However, I perceive it as crucial for resilience and strength building for participants, whereas shutting the conversation down would likely evoke a sense of unsafety, feelings of embarrassment, or shame. My decision to meet the survivor-filmmakers where they were at during the interviews is another example of how my positionality has impacted the research process. My knowledge base afforded me the ability to make informed communication decisions on the spot during the interviews that were conducive to fostering a sense of safety for the survivor-filmmakers and, potentially, survivorship.

In alignment with the suggestions of Lalonde et al. (2020), I provided survivor-filmmakers resources, if they wanted/needed to access support. Supports included virtually accessible therapy sessions, and two self-help resources – which I gained permission from the relevant organisations to disseminate:

1. *Coping Strategies for Complex Trauma Survivors Contending with the Coronavirus (COVID-19) Pandemic* (Pressley & Spinazzola, 2020).
2. *Post Traumatic Stress Coping: What can I do?* (Skylight Trust, 2022).

Both resources offered practical, self-guided coping strategies for trauma survivors irrespective of context (one which is orientated around coping with trauma amid COVID-19; globally relevant at the time).

Given the precarious state of the mental health sector in Aotearoa (as discussed in chapter one), I decided not to attempt to secure free or voluntary support services from professionals. Instead, I set aside my allocated research funds (\$3000) to secure such services.

4.7.2.5 Professional Advisory Support for Conducting TVI Interviews

I received support and advice from practising psychologists at The Psychology Centre, based in Kirikiriroa/Hamilton, Aotearoa. The Clinic Director, Joshua Myers, and several staff members

participated in a consultation, during which I presented my proposed approach and outlined concerns. I drew upon their collective expertise to help reduce risk and manage participants' safety. Advisors viewed, suggested changes to, and approved of the survivor-filmmaker interview schedules; offered advice for interviewing trauma survivors; offered advice about appropriate ways to respond and offer participants support if they became distressed; and helped me create an appropriate list of resources for survivor-filmmakers to engage with post-interview.

4.7.3 Recruiting Participants

I began the recruitment process by collating a list of older and contemporary autobiographical documentary films that I had pre-existing knowledge of or discovered through research. I included documentaries that were in development or premiering at film festivals, as well as documentaries produced locally and internationally. I pursued various avenues of contact with the respective survivor-filmmakers, including their documentary and personal business websites and LinkedIn profiles, where I had the most success in generating interest in participation. I managed to contact agents of several filmmakers, but I did not successfully recruit through this avenue. Upon initial contact, I introduced myself as a survivor-researcher, explained the project, and asked whether they would like to receive the information sheet or ask any questions, following the communication process represented in Figures 4.1 and 4.2.

Four survivor-filmmakers, with varying levels of experience in documentary filmmaking and creative practice, participated in an interview. The survivor-filmmakers happened to be women with experiences of child sexual abuse. Such commonalities between the survivor-filmmakers are happenstance. Participants (including the wellbeing professionals) were not selected principally based on their ethnicity, culture, gender, sexuality, religion, ethical belief, or disability, but on their status as either an autobiographical documentary filmmaker who has represented their experiences of child abuse and healing, or a wellbeing professional who has experience working with survivors or expertise surrounding trauma. The four survivor-filmmakers, Gwen van de Pas, Tracey Arcabasso Smith, Jasmín Mara López, and Ginene Humphrey, their documentaries, and relevant background information, are introduced below, in Table 4.1.

Wellbeing professionals were recruited by advertising through the Australian New Zealand and Asian Creative Arts Therapies Association, and the New Zealand College of Clinical

Psychologists, and by participants referring others who expressed interest. Six wellbeing professionals participated in semi-structured interviews to provide insights about the potential wellbeing impacts for survivor-viewers, with varying levels of experience working with survivors, training, and scope of their practice or profession, as summarised in Table 4.2. Most professionals requested anonymity and have instead been assigned pseudonyms. Two wellbeing professionals self-identified as having lived experiences of child abuse and thus spoke from their perspective as survivor-viewers. With permission from the survivor-filmmakers, five out of the six participants viewed some or all three of the released documentaries (*Groomed*, *Relative*, and *Silent Beauty*), so that the perspectives offered were specific to the representational strategies utilised, the discourses represented, and affects evoked – which contributes to and strengthens the cohesive synthesis of findings across domains.

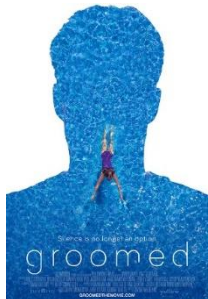
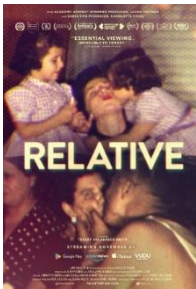
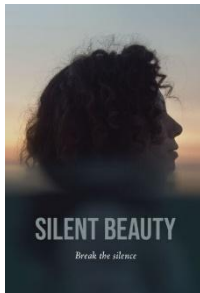
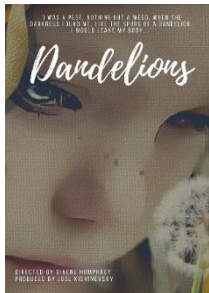
	Gwen van de Pas (<i>Groomed</i>, 2021) 	Tracy Arcabasso Smith (<i>Relative</i>, 2022) 	Jasmín Mara López (<i>Silent Beauty</i>, 2022) 	Ginene Humphrey (<i>Dandelions</i>, TBC) 
Cultural background	From the Netherlands, based in Amsterdam. Lived in the USA while studying, and during periods when creating <i>Groomed</i>.	From the USA, Based in New York City. Fourth-generation Italian American.	From the USA, with familial roots in México. Based in New Orleans. Works in Los Angeles, Oakland, & México City.	From Aotearoa, currently based in Wellington. Lived in Australia while studying, teaching, and animating/editing <i>Dandelions</i>.
Work and education	Graduated from Stanford University in 2012, with a Master of Business Administration. Career as a business consultant, now the CEO of her company, Bloom & Wolf. In 2016, van de Pas founded her production company, Yellow Dot Films, alongside the executive producer Bill Guttentag, an esteemed Oscar-winning documentary producer/director and Stanford Professor.	Graduated from Molloy University in 2000, with a Bachelor of Arts, specialising in design. Attended Adhouse Advertising School. Over twenty years of creative production and design experience. Head of design, Deloitte Digital, US. Their creative achievements have earned recognition at the Emmy Awards and Cannes Lions. Recipient of Warner Media's 2021 Future-is-Female Award.	Has extensive experience working in the realm of journalism and radio. For over thirteen years, López has worked as a freelance journalist and media producer. Founded 'Project Luz' in 2007, an organisation that teaches youth how to use photojournalism and audio techniques.	Graduated from Griffith University in 2012, with a Master of Visual Arts, specialising in screenwriting. Has taught documentary scriptwriting at Griffith. Currently attending Griffith Film School (by distance) as a PhD student. <i>Dandelions</i> is the main component, accompanied by a thesis exploring her experiences.

Table 4.1 Introducing the survivor-filmmakers

WBP1	Creative Arts Therapist and Counsellor, with 15+ years of experience. Specialises in assessing and supporting survivors of sexual abuse, an ACC Sensitive Claims Service provider. Trauma, family harm and violence, grief, and shame are also areas of expertise. Cultural competency working with Pākehā, Māori, Pacifica, European, Chinese, Japanese, Taiwanese, Filipino, and Indian cultures. Experience providing professional development training and clinical supervision.	<i>Groomed, Relative, & Silent Beauty</i>
WBP2	Creative Arts Therapist and post-graduate teacher/trainer. Specialises in movement-based therapies, with over 30 years of experience. Specialises in the relationship between body feelings, emotions and wellbeing.	<i>Groomed, & Silent Beauty</i>
WBP3	Psychotherapist, with 23+ years of experience working across community agencies, and with dedicated psychotherapy for Māori & Pacifica. Specialises in addictions, trauma, and supporting children/adult survivors of sexual abuse. Applies ‘body-mind approaches’ with expertise in Hakomi, a mindful, somatic-based psychotherapy. Experience providing clinical supervision.	<i>Groomed, & Relative</i>
WBP4	Social Worker, in training. Utilises a Māori lens of understanding and identifies as Māori. Child abuse survivor (self-identified).	<i>Groomed, Relative, & Silent Beauty</i>
WBP5	Clinical Psychologist, in training. Experience working in victim support across several contexts, including family violence/harm. Child abuse survivor (self-identified).	<i>Groomed, Relative, & Silent Beauty</i>
WBP6	Clinical Psychologist, with experience across health & forensic settings, and an ACC Sensitive Claims Service provider. Specialises in assessing and treating an array of mental health disorders. Cultural competency working with Chinese, Māori, and Pākehā. Experience providing clinical supervision.	N/A

Table 4.2 Introducing the wellbeing professionals

4.7.4 Survivor-filmmakers' Experiences of Safety and Recommendations for TVI Interviewers

The ability to cultivate a sense of trust with the survivor-filmmakers was an affordance of my positionality. The survivor-filmmakers' interview responses suggest that the TVI approaches and transparency I provided regarding my survivor-researcher positionality influenced their decision to participate, trusting me, as a fellow survivor, to represent their experiences with integrity, caution, and understanding. During the interview, van de Pas expressed that she felt I had demonstrated a lot of "care" in my approach, and was happy to be "an ongoing resource" whom I could contact for further information and collaboration opportunities. López expressed appreciation for how I checked in throughout the interview stages to ask whether she was feeling okay and wanted to continue.

The survivor-filmmakers' interview responses indicate that they may have experienced empowerment and validation, demonstrative of the therapeutic impact that contributing to research can offer participants in contexts where lived experiences of abuse are being explored (Nonomura et al., 2020). Throughout our communications and during the interviews, the survivor-filmmakers recognised the value of the project and expressed gratitude for the opportunity to contribute. Humphrey suggested the possibility of future collaborations and expressed the desire to develop a friendship. Humphrey also indicated that participating prompted her to reflect on and develop understandings about her creative processes, which may have informed her creative practice going forward.

None of the survivor-filmmakers accessed the online therapy sessions provided; another indication that harm was unlikely. This is not to say that the approach taken, or the resources offered, were unnecessary. They were necessary demonstrations of care and sensitivity, which the survivor-filmmakers were responsive to and appreciated.

Since conducting the research, I have continued to develop my knowledge of TVI research practices and, consequently, have gained awareness of how opportunities for choice and collaboration may be extended beyond what I have offered in this study. In future research studies, I would strive to provide additional opportunities for choice and collaboration. This could involve: providing the option to have follow-up de-brief calls post-interview; extending the informed consent process so that the participants have the option to read the unpublished

transcript to confirm how their contributions have been interpreted and utilised; offering karakia (Māori prayer) or a whakataukī (Māori proverbs) to open and close the interview; and generally creating space during the interview for the participant to engage in spiritual, religious, and cultural practices that may resonate and be of importance to them.

4.8 Methods: Reflexive Thematic Analysis

Reflexive thematic analysis was applied to critically interpret experiential consistencies and patterns emerging from the two data sets: survivor-filmmaker interview transcripts and wellbeing professional interview transcripts (Braun & Clarke, 2022a; 2022b; 2019; 2013). The process involved six stages of analysis, engaged with iteratively: familiarisation of the data; generation of initial codes; search for themes; review of themes, defining the themes; and producing the final report. This is all while acknowledging the “presence” of the researcher (Bochner, 2016, personal communication) in the construction of the themes.

I transcribed the interviews to help familiarise myself with the participants’ experiences. Although transcribing was an incredibly time-consuming process, it afforded me the ability to become immersed in the data. It allowed me to identify initial codes and themes and draw connections across experiences, which served as a starting point for analysis.

Accordingly, and in response to my visual and kinaesthetic learning style, I created mind maps on my office walls. Transcripts were printed, highlighted, colour-coded, and relevant extracts were cut out, pinned up, and categorised in relation to the identified codes and themes. This physical mapping process enhanced my familiarity of the data, my ability to identify patterns and contrasts, and my ability to identify relationships between experiences, and within and across codes and themes. The physical, somewhat embodied process of reorganising the data as new insights emerged seemed to enhance rigour. As opposed to using digital coding software, I felt better positioned to get to the crux of participants’ experiences and insights. The data remained physically in front of me, acting as a reflective prompt or trigger for reorganisation, refinement, and general pondering of the data – including how it related to myself.

I strived to adhere to a ‘data-driven, inductive approach’ so that themes could naturally emerge rather than be deductively imposed based on my assumptions (Braun & Clarke, 2013).

Throughout, I remained conscious of my influence on the construction of themes – including the

potential for my hopes of therapeutic outcomes to influence them. This is where having clear definitions of the themes, particularly when grounded in empirical research, is helpful. A set of criteria or characteristics is provided to identify experiences and wellbeing outcomes, rather than abstractly presenting a theme without defining, explaining, or substantiating its identification.

The themes identified from the thematic analysis of the interview transcripts are presented in chapters six and seven. This follows chapter five, which presents findings from the textual analyses.

4.9 Autoethnographic Reflections: Survivor-researcher Wellbeing

When taking a TVI approach to research, scholars emphasise the need to safeguard the researcher (Van der Merwe & Hunt, 2019; Lalonde et al., 2020; Nonomura et al., 2020; Williamson et al., 2020; Alessi et al., 2022; Woods et al., 2022; Edelman et al., 2023).

Conducting research about child abuse meant I was vulnerable to experiencing vicarious trauma, compassion fatigue, and traumatisation. These experiences could have been triggered when interviewing the survivor-filmmakers, viewing and analysing their documentaries, and from the ongoing exposure to sensitive and emotionally evocative material. My positionality as a survivor-researcher also meant I was vulnerable to experiencing triggers, distress, harm and retraumatisation, potentially detrimentally impacting my healing trajectory.

Contrastingly, however, my positionality has functioned as a protective factor, minimising risks of harm and retraumatisation – another affordance of my positionality as a survivor-researcher. I had experience conducting research that involved exploring discourses about, and documentary representations of, child abuse, where I had strategies to manage my wellbeing if the process became triggering. This previous exposure gave me confidence to adequately assess the risk of experiencing vicarious trauma and retraumatisation as unlikely, or manageable if experienced. I was able to approach the research with a pre-established toolbox of therapeutic supports, strategies, and coping mechanisms that I was confident would help me manage my wellbeing; both professionally guided supports and self-directed.

The professionally guided supports I had access to were limited, including counselling and short-term eye movement desensitisation reprocessing (EMDR) therapy. EMDR therapy helped to reduce stress responses I experienced when flashbacks occurred or when needing to re/process

nightmares and separate them from reality. I frequently experience night-terrors and flashbacks of traumatic memories about the abuse I endured. Nevertheless, during periods of intense stress throughout the PhD, they occurred more frequently, suggesting they were triggered by the ongoing exposure required for the thesis. While not necessarily more intense or disturbing than pre-PhD flashbacks and night-terrors, they have been disturbing in ways that I have not experienced before. Consequently, I needed to invest time and emotional labour into re/processing. For me, they feel as if they are occurring in the present, leaving me feeling hypervigilant and agitated for hours or days afterwards.

Throughout the process, particularly towards the end during a period where the frequency and content of the night-terrors intensified, I realised that having support from an EMDR therapist throughout the project would have helped me manage. Regular sessions would have been comforting, given the inevitability and unpredictability of experiencing triggers and distress, and because EMDR was an affective modality, reducing the severity of my stress responses. However, I tried EMDR for the first time whilst undertaking the research, so I did not have the same insights I now possess regarding what is/not affective for me and why.

Nevertheless, I found such triggers manageable, but time-consuming, exhausting and uncomfortable to navigate – not unusual experiences when navigating traumatic stress. This was where my self-directed strategies and engagement with counselling services helped me re/process, which I have relied on for years to support the general management of triggers and trauma responses, dipping into as and when needed. Journaling, which became enmeshed in the autoethnographic process, I found to be the most conducive self-directed strategy to re/process emotions and feelings. The process of constructing and reconstructing my thoughts, and the ability to re/process them after the fact during different emotional states, helped bring me relief in the moment and led me to new understandings when analysing the writing months later. Such understandings become clearer in what follows.

4.9.1 Experiencing Retraumatization: Institutional Abuse

While writing and analysing my autoethnographic reflections throughout the research process, it became clear that I was experiencing retraumatization. The writing and analysis processes prompted deep introspection that helped me to come to this understanding – which I recognised throughout the iterative process of moving between writing, reflecting and analysing.

However, retraumatisation was not experienced in response to the risks outlined above; what human research ethics committees and existing literature spotlight as being cause for concern for researchers exploring child abuse. Retraumatisation occurred in response to experiencing institutional resistance upon identifying and raising concerns about abuse and exploitation, perpetrated by those in positions of power. Resistance also occurred in response to raising concerns about what I perceive to be the essential need for a TVI paradigm shift within higher education. Excerpts from my autoethnographic journaling reveal how resistance was experienced and expose the impact on my wellbeing, suggesting that I have experienced retraumatisation:

...I was naive, thinking I'd be listened to and respected...Instead, they responded with "trauma-informed practice has no place in universities" and that "I think your calling is elsewhere" [which] translates to: "fuck off, Anthea."

...they said "if you want your ideas to be listened to and implemented, you have to make the people in power believe that your ideas are theirs, not yours" to appease and protect the ego of men...In response to tears, [they] said "look at you. You're a mess", shaming me for having a natural response to a triggering situation!

The most triggering aspect of my experience as a doctoral researcher is that the institution is not trauma-informed, and that those in positions of power have refused to acknowledge and validate the need for such a paradigm shift.

The silencing of my voice to maintain and comply with existing power structures, the dismissal of the concerns I raised regarding abusive behaviour and processes, and the shaming of my emotional responses triggered feelings of powerlessness, shame and 'belonging uncertainty' – the questioning of one's social belongingness (Walton & Cohen, 2007; Brown, 2021).

Experiencing belonging uncertainty differs from feeling 'left out' or like you do not 'fit in.' If I wanted to, I could have performed in ways that allow me to 'fit in' (we are all performers and social actors). Frankly, I did not want to be a quiet, non-confrontational girl, and thus complicit in the abuses of power that I experienced and was privy to: to be silent about abuse is to be complicit. I refuse to betray survivors and myself through silence, even if using my voice did come at a cost to my wellbeing.

Belonging uncertainty triggered feelings of inadequacy surrounding my identity, about being a survivor, and regarding other intersecting factors: coming from poverty, being labelled ‘mentally ill’ and forever defective, being queer, a woman – all identity characteristics that academics and wellbeing professionals are shamed for being transparent about. Academics who are women and have a working-class origin may struggle with their identity, sense of belonging, and ability to be authentically themselves in academic spaces (Lucey et al., 2003). Professionals, academics, and students in areas of psychology – or trauma broadly – may face stigma from others in these spaces upon disclosing their own experiences of trauma and abuse. They may be discredited, positioned as ‘too traumatised’ to be experts and work with survivors, advised to stay silent, or be silenced by those in power.

I doubted my being, which triggered and compounded existing shame and imposter syndrome; and stunted the progression of the research. The following excerpts speak to these intersecting experiences of shame, loneliness, powerlessness and belonging uncertainty:

...realising that I don't belong within the academic institution has been really devastating...I don't want to be stuck in silence for the rest of my life, constantly reminded that I am powerless.

...I just feel really lonely, like no one understands what's going on inside my head. Like I am 'too much' but 'not enough' at the same time...feel I have to cut off parts of myself to fit into their cramped box...my tenacity, and willingness to call out bullshit has to be toned down, squashed so that I fit their moulds of being just critical enough to produce research, but not so critical that it threatens someone's ego or the status quo...

My experiences reflect how university institutions function in ways that are abusive and uphold struggles for power and control, exemplifying the systemic nature of abuse, violence, and victim-blaming culture; as highlighted in chapter one. This echoes and contributes to the growing body of literature critiquing hierarchical power structures within university institutions, and how they are experienced, particularly by minorities, as abusive. Women in academia continue to be implicitly and explicitly silenced when in/formally raising concerns about instances of abuse, violence, and exploitation. Universities often fail to adequately respond to the silence surrounding gender-based violence (Sotirovic et al., 2024). Concerns often go unspoken due to fears of repercussions that impact safety, wellbeing, and career prospects (Aiston & Fo, 2021).

Victims and whistle-blowers become ostracised and positioned as ‘trouble-makers,’ while abusers evade accountability.

Even examining experiences of abuse within academic institutions and critiquing the functioning of neoliberal universities is fear-inducing for researchers. Academics and students are expected to apply criticality to the world around them, *except* towards the functioning of the institution. On this, Michaela Edwards et al., (2022) highlights the persistent fear she and her four colleagues/co-authors experienced throughout their academic careers, regarding in/formally speaking out about experiencing “years of what would be termed abuse if thought of in the context of a domestic relationship” (p. 2010); “a truth we feel unable to tell individually” (p. 1999). Edwards et al., (2022) also acknowledge that, because they wrote the paper while employed and associated with university institutions, “we expose ourselves to risk...To speak up comes with consequences that we should not have to bear” (Edwards et al., 2022, p. 2000). Other academics have described their relationships with university institutions as ‘abusive’ (Fortune et al., 2024) and have identified abuses of power within the institutions they have worked in (Bravo-Moreno, 2022).

This is all to say that researching with survivors and engaging with accounts of abuse has *not* retraumatised me. What felt retraumatising was conducting this research within a university institution that perpetuated the same abusive power dynamics and struggles for control, safety, and belonging that I experienced as a child.

I feel an ethical and moral obligation to survivors and survivor-researchers to expose this aspect of my experience. Such experiences are often individualised and privatised, and survivor-researcher accounts remain scarce within the literature. I have not yet discovered one that discusses experiencing retraumatisation in response to the perpetuation of abuse in academia. Therefore, I offer my account as an act of academic activism and resistance against the silence surrounding abuse in neoliberal university institutions; how they function in ways that are abusive while hiding behind a “smokescreen of equality” (Bourabain, 2021, as cited in Edwards et al., 2022, p. 2010). It is my hope that survivor-researchers and abuse survivors within academia factor in the understanding that institutional abuse of power and control are potential stressors and triggers that may be retraumatising. Rather than deter survivors and survivor-researchers from pursuing research, because we can and should take up space in academia, I

hope to help them make an informed decision about working in such an environment, and encourage them to put in place protective factors and have therapeutic strategies to engage with, specific to their unique needs.

4.9.2 Therapeutic Impact and Navigating Retraumatization

Despite the retraumatization I experienced, I was also therapeutically impacted through the research and have identified protective factors that helped me move through the distress – some of which are afforded by my positionality as a survivor-researcher, as they would not be experienced otherwise. Novice survivor-researchers may draw upon the outlined protective factors to inform their practice and minimise risks for researcher harm.

The experiences of interviewing and connecting with the survivor-filmmakers are where significant therapeutic impact was derived. I left each interview feeling elated, inspired, validated as a survivor-researcher, more confident and motivated than before to continue the project.

They are me and I am them...I know this [undertaking the research project] is where I need to be

Enriching the conversations and data collected, the interviews provided opportunity for connection with the survivor-participants. I found solace in their narratives of resilience and vulnerability, and in their passion for documentary filmmaking, as a survivor and creative practitioner myself. The parallels between our experiences of resistance, although in different contexts and with difference experiences of abuse, were striking. Consequently, the involvement of the survivor-filmmakers was a protective factor, helping me move through the shame that I have inevitably been left with after experiencing abuse, and which was triggered and compounded by the resistance I experienced. Without their involvement, encouragement, and the strength that I drew from connecting with them, I likely would not have possessed the ability to persevere when the project became challenging, emotionally and intellectually.

Interviewing the wellbeing professionals encouraged and inspired me, as many discussed systemic abuses and recognised the victim-blaming culture that harms survivors. Consequently, the wellbeing professionals felt like pockets of goodness, acceptance, and validation, in amongst the resistance, shame, and belonging uncertainty casting a shadow around me.

I felt a sense of belonging and safety within my supervisory relationships. I went into the project with established working relationships with my supervisors. I felt confident that they could hold space for me, as a ‘survivor’ and novice researcher. I felt confident that they could hold space for my sensitive, passionate, and inquisitive temperament. I trusted that I could be vulnerable in their presence, and that such vulnerability would be treated with compassion and empathy. I trusted that, if I crossed a boundary or if either were detrimentally impacted (they were vulnerable to experiencing vicarious trauma, compassion fatigue, traumatisation and distress), they could comfortably and transparently raise concerns. Thus, I felt that there was a baseline of safety from the get-go. Such safety was a determining factor in my decision to pursue a PhD. Without it, I do not feel I would have possessed the courage and stamina to pursue a project that put me at risk of harm, and one that likely required an extra level of care from my supervisors.

This sense of safety strengthened throughout the project, and it became a protective factor, countering shame. The more conversations we shared, which often encompassed a deeply personal element to it, and the more that they actively listened, the more comfortable it became to be my authentic self. I feel they made conscious efforts to provide sensitivity and care, offering space and time for me to debrief after interviews, and to confide and re/process my experiences in an ‘academic’ and ‘personal’ sense, which were integral factors in sustaining my passion for the project.

What made this experience more meaningful, was that their supervision occurred at a time when research surrounding the need for a TVI shift within higher education and supervisory practices (McChesney, 2022), has started permeating the fringes of academic literature. I remain aware that supervising this project and navigating my somewhat unusual positionality, likely required a sensitive approach to supervision, which has not yet been extensively articulated in the form of robust frameworks for supervisors to consult and guide their approach. Yet, they remained dedicated to supporting my flourishing as a survivor-researcher – which only strengthened the trust within our relationship, and thus my capacity to be vulnerable in ways that were necessary for academic development.

Another protective factor was my strong sense of identity, including understanding my core values and beliefs. My strong sense of self served as a grounding point of reflection when I struggled with shame and belonging uncertainty, safeguarding me from experiencing

fundamental shifts in my self-perception. I felt my sense of self strengthen throughout the process, because I gained insights about how shame was guiding my behaviour and emotions in relation to my academic pursuits. Early on, receiving feedback triggered shame, which manifested as fear and avoidance of engaging with it. The longer I avoided it, the more intense the shame became; I felt shame for feeling shame. However, this compelled me to examine my relationship with shame, to understand how it was manifesting and impacting the research and my healing. I identified perfectionism as a coping mechanism or survival strategy to manage feelings of shame – and as a mechanism that triggers shame, making it counterproductive to engage with (Brown, 2021). Despite being uncomfortable, gaining awareness about how shame impacts me has been empowering. It has redirected my healing trajectory, as I strive to make conscious efforts to identify and respond to shame and how it manifests for me.

4.10 Conclusion

Chapter four presented a comprehensive exploration and justification of the methods employed, introducing the survivor-filmmaker participants, their autobiographical documentaries, and the wellbeing professional participants. I discussed how my positionality as a survivor-researcher enhanced the research process and articulated the need to move towards TVI approaches within research. This approach not only supports the integrity and robustness of the study but also emphasises the importance of co-creating safe and supportive processes in which survivors are involved as participants or researchers. Offering insights for future survivor-researchers to draw upon, I examined my experiences as a survivor-researcher to understand the possible affordances of this role when investigating autobiographical documentary representations of child abuse and the experiences of survivor-filmmakers, thereby answering the fourth research question.

Identified affordances include: my existing knowledge base and lived experiences, which informed my TVI interview approach, ability to empathise and connect with the survivor-filmmakers, and ultimately contributed to the survivor-filmmakers' sense of safety; possessing the stamina and therapeutic tools necessary to engage with triggering material over an extended period; and possessing self-awareness about my triggers, trauma responses, and coping mechanisms that I can engage with when required. I drew on my autoethnographical writing to reveal how my experiences were both detrimental and conducive to my healing – demonstrating the value of employing autoethnographical reflective writing to enhance the research process

when positioned as a survivor-researcher, and as a technique to help identify affordances and understand the self. I revealed how I experienced retraumatisation, triggered by the resistance I encountered within the academic institution when raising concerns about abuse, and the need for a TVI paradigm shift across higher education.

I identified the protective factors that propelled me through the challenges experienced. Possessing a strong sense of self served as a grounding point when I experienced belonging uncertainty and shame. The comfortability to have vulnerable and honest conversations with my supervisors was vital to cultivating a sense of safety and fostering resilience. Finally, and perhaps most influential in managing my wellbeing and experiencing therapeutic impact and growth, was connecting with the survivor-filmmakers and wellbeing professionals – particularly those who identified as survivors.

Chapter Five: Breaking the Silence through Autobiographical Documentary Representations (Text Findings)

5.1 Introduction

Chapter five identifies and explores the discursive function of *Groomed*, *Relative*, *Silent Beauty*, and *Dandelions*: what discourses about child abuse, intergenerational abuse, and healing are represented, and through what representational strategies and documentary codes and conventions. Necessary contextual information is provided to help readers connect with the findings presented in chapters six and seven. The findings for each domain of analysis are presented in separate chapters to better realise the analytical approach. The thesis is structured this way in hopes of supporting the reader's cognitive assimilation, providing opportunity for contemplation and respite at the end of each chapter⁸.

A synopsis is presented for each documentary, where I describe the represented aspects of the survivor experience, all with distinct foci and documentary aesthetics. The documentaries present unique and nuanced explorations of the survivor-filmmakers' experiences, bringing the personal, private, and stigmatised into the public, disrupting the silence and stigma surrounding child abuse, intergenerational abuse, and healing in adulthood. This interpretation is reflected in the taglines on the promotional posters for *Groomed*, "Silence is no longer an option"; and *Silent Beauty*, "Break the silence."

The disruption of silence and stigma surrounding abuse and victim-blaming, occurs through the mere exposure to vulnerable and sensitive experiences that the documentaries provide. The disruption of silence and stigma occurs through the way that the documentaries distinctively represent or 'speak to' certain aspects of, or discourses about, a survivor's experience – in ways that are reliant on the documentary aesthetics and afforded by the application of specific representational strategies and adherence to certain documentary codes and conventions. This will become clear in each documentary overview and is further articulated through discussions of aesthetics and analyses. Three factors have informed the inclusions: how significant, intriguing,

⁸ I recommend that readers take a tea and bikkie break.

or novel the representations of the survivor experience are; the affective responses I experienced as a survivor-viewer, which is suggestive of their evocative potential and enduring resonance for other survivor-viewers; and the insights provided by the survivor-filmmakers about the impact on their wellbeing (referenced in the following chapters).

5.2 *Groomed* (Gwen van de Pas, 2021)

Viewers accompany van de Pas as she actively investigates, through her lens as an adult survivor, the child abuse and grooming she was subjected to by her swimming coach: “What begins as an exploration into grooming becomes a dramatic journey where Gwen faces unexpected revelations in her case, finally finds her anger, and boldly confronts the evil we’d rather ignore” (*Groomed: The movie*, n.d.). Through the investigation, viewers witness van de Pas visiting her hometown in the Netherlands, where she reconciles with and interviews her father about the impacts of the abuse on herself and her immediate family (after her parents found out); revisits archival material, including letters to and from the perpetrator; makes a report, only for the case to be dropped by authorities due to lack of evidence; and pursues her own private investigation to acquire the evidence the police failed to obtain. Another survivor comes forward, confirming that van de Pas’ experience was not isolated but part of a pattern.

As much as *Groomed* is about an investigation, it is also about van de Pas re/processing, shedding light on the methodical ways that perpetrators target and groom children, and the confusion, doubt, shame, and guilt that follows grooming survivors into adulthood. van de Pas finds herself struggling to come to terms with the reality of the abuse and the conflicting feelings she holds towards the perpetrator – of anger, care, rage, and worry for his wellbeing. In an article for *The Guardian*, arts writer Adrian Horton (2021) articulates this duality perfectly, as she describes *Groomed* as “a strikingly nuanced portrait that dives into the grey thicket of her ambivalent, shifting, often contradictory emotions while remaining resolutely clear on the patterns and prevalence of grooming” (para. 4).

Informing the investigation and re/processing, van de Pas interviews five survivors of child sexual abuse and grooming, experts within the fields of child sexual abuse, trauma and/or prevention, and unusually, an interview with a convicted child sex offender ‘Dennis’ – all of

whom provide soberingly informative insights about the methodical approach child sex abusers often engage in, and the life-altering impacts upon survivors of grooming.

The final act concludes *Groomed* in an uplifting, hopeful way. The survivor accounts shift focus towards moving forward with hope, showcasing aspects of their lives where joy has been cultivated in the face of trauma. It is evident that van de Pas has experienced a shift regarding how she thinks about herself, the perpetrator, and the potential impacts of reporting the abuse. van de Pas announces her pregnancy, suggesting she was able to challenge her fears about not being able to cope with motherhood as someone who has experienced child abuse; a fear she reveals to viewers. *Groomed*'s conclusion reflects the discourse that survivors have responsibility to 'break the cycle' of abuse to safeguard future generations. In an interview with Ashlie Stevens (2021), van de Pas commented on the impact of having her daughter, confirming this interpretation:

Then when my daughter was born, she's now six months old, that really gave me the last push I needed because I thought, 'Gosh, I want to be an example for her and I want to protect girls of her generation' (para. 20)

Finally, van de Pas utilises a title card to disclose that she has appealed the court's dismissal of her case on the grounds that the private investigator obtained new evidence. This is followed by highlighting how pervasive grooming is in contemporary American and Dutch society and the difficulty of convicting offenders once a report is filed.

5.2.1 Aesthetics

There is a cinematic quality to *Groomed* which contrasts the other three documentaries' aesthetics, informed by a heavy adherence to expository documentary codes and conventions (Nichols, 2017). van de Pas utilises sound somewhat dramatically throughout *Groomed*, particularly during the opening sequence, in which a reenactment of her traumatic memories is presented (discussed further in section 5.3). Low piano notes sound in a legato, establishing tension and a serious atmosphere. This atmosphere lingers, as sombre piano and orchestral scores dip in and out of *Groomed* as the investigation and re/processing unfolds, swelling in intensity or speed to signal shifts of emotional intensity for van de Pas, like the terror she felt before interviewing Dennis.

As illustrated in Figure 5.1, participants including van de Pas, the survivor-participants, and professionals, tend to be framed in a traditional ‘talking heads’ setup, typical of an expository documentary, while the film crew are visible in the shots. Viewers are thus made aware of the production process, that the interview spaces and framing of shots are curated. This is contrasted with the framing of Dennis, who is represented through close-up and extreme close-up shots, remaining unidentifiable yet so close in proximity to the audience – symbolic of the way in which child abusers hide in plain sight.

Moving between several aspects of her experience, van de Pas applies evidentiary editing, an expository convention (Nichols, 2017), as explained in section 3.2.3, to cut between title cards outlining the five main stages of grooming. The title cards appear periodically to anchor the narrative and guide its progression. van de Pas cuts between: the interview with the offender, Dennis; interviews with five survivors; interviews with professionals who provide insights about how and why grooming and child sexual abuse occurs, some of whom also speak on van de Pas’ situation; and footage of van de Pas speaking about her experiences, interviewing family, experiencing triggers, and re/processing (see Figure 5.1).



Figure 5.1

Collection of stills showcasing the cinematic and predominantly expository style of *Groomed*.

Note: From *Groomed* [Documentary Film], directed by Gwen van de Pas, 2021. © 2021 Gwen van de Pas, Yellow Dot Films.

The organised structure of *Groomed* complements the didactic expository narrative function of documentaries: to disseminate information, “inform and move an audience” (Nichols, 2017, p. 108). Going straight to the source and providing a range of perspectives from those who are most familiar with grooming (survivors, experts, and perpetrators), van de Pas provides audiences with a cross-informed, multifocally corroborated understanding of the ‘stages of grooming’, and how survivors may experience it. Patterns and consistencies between accounts are revealed – as represented below in Tables 5.1, 5.2, 5.3, 5.4 and 5.5, exposing the methodical, intentional grooming process child sex offenders engage in. Consequently, child abusers are undeniably positioned as active agents who abuse with intention and enjoyment.

Dennis’ representation functions as evidence to support the focus of *Groomed*, as the editing style constructs his responses to ensure they do not veer beyond explaining his grooming approach; van de Pas confirmed in the interview that superfluous aspects of the conversation were omitted. Dennis’ demeanour remains nonchalant, the tone of his voice indicative of emotional apathy towards the situation. Combined with the framing, the inclusion of Dennis feels ‘clinical.’ Dennis is not given a platform to gloat or to serve a self-indulgent or egotistical function, which is why his representation functions to highlight the intentional processes of child groomers and sex offenders, and thus places shame and blame rightfully with them – not with survivors.

The expository conventions of *Groomed* coexist with observational conventions (as outlined in section 3.2.3), which help cultivate a deeper sense of intimacy and vulnerability. van de Pas includes footage of herself responding to triggers, breaking down and sobbing upon the discovery of the letters as depicted in Figure 5.2, for example, or when video calling her husband after another survivor breaks their silence. van de Pas actively processes and comes to terms with the abusive nature of her ‘relationship’ with the perpetrator – the triggers serving to reframe van de Pas’ childhood lens of the experience, as grooming with the intent to abuse. Diary-entry-stylised title cards (Figure 5.3) expose van de Pas’ inner thoughts about her investigations and re/processing, including her fear of her desire to be a mother and her doubt about whether she is ready, and her fear that Dennis is manipulating her into having a compassionate response to his account. Tension is established and maintained for viewers as they remain aware of van de Pas’ vulnerability, as she is confronted with triggers and forced to navigate them while on camera for the world to witness.



Figure 5.2

Responding to triggers: Gwen sobs, reading the letters from the man who groomed her (00:32:44).

Note: From *Groomed* [Documentary Film], directed by Gwen van de Pas, 2021. © 2021 Gwen van de Pas, Yellow Dot Films.



May 19.

I always dreamed of being a mom.

But it scares me.

My nightmares are happening more often,
intimacy is a struggle,
and my panic attacks seem to intensify.

Am I really ready to take care of a baby??

Figure 5.3

Representing conflicting feelings about motherhood (00:06:20).

Note: From *Groomed* [Documentary Film], directed by Gwen van de Pas, 2021. © 2021 Gwen van de Pas, Yellow Dot Films.

	Child Sex Offender Insights	Survivor-participant Insights	van de Pas' Insights	Expert Insights
Stage 1: Target the Victim (00:12:40).	“First of all, you have to pick the right child. You know, the one you feel most comfortable with. The one that you hear things about in the family that’s maybe having a hard time. “Who do I think I could train?”” (00:12:40).	Survivor-participants reveal their targeted vulnerabilities: Aisa “was very trusting.” Keith was “insulated.” Katy was “alone.” Barbi was “quiet.” Nicole was “on my own a little bit” (00:12:53-00:12:57).	van de Pas reveals what made her a target, cutting to photos of herself as a child, while she narrates: “I was an insecure little girl. I think my body language probably showed it a little bit. I was <i>really</i> struggling with who I was, why were my friends not accepting me. I was really looking for somebody that cared for me” (00:13:01-00:13:17).	Jim Tanner, an expert on grooming and sex offender behaviour: “Adolescent female victims tell us, “he was my best friend” (00:13:35). “If the offender has done their job grooming, it’s going to feel like I was special to him. You were one of <i>many</i> who were special to him...From what I know about your case, I can almost assure you, there are other victims...you don’t get to be that good at it by accident, you get to be that good at it by practice” (00:14:02-00:14:38).

Table 5.1

Target the victim (Stage 1): Insights from Dennis, survivor-participants, van de Pas, and experts.

Note: From *Groomed* [Documentary Film], directed by Gwen van de Pas, 2021. © 2021 Gwen van de Pas, Yellow Dot Films.

	Survivor-participant Insights	van de Pas' Insights
Stage 2: Gain the Family's Trust (00:23:20).	Aisa: “He also groomed my family. Like for example, he asked my dad for piano lessons, he got his sister into our dance group.” Barbi: “And I’ve asked my Mum recently, I was like “why did you let me go with him? He was a man, like didn’t you think it was weird that some man wanted to spend time with your five-year-old?” and she was like “no you wanted to go, you were so happy, I didn’t think anything was going on” ...he didn’t set off that ‘I’m a paedophile’ vibe.” Keith: “Always having priests come to our home, was like Jesus Christ himself was in our house. He infiltrated our family structure in such a way, I mean my parents went to confession to him. He knew what all of their sins were” (00:23:47-00:24:34).	Tinus, van de Pas’ father: “In the beginning it was all very positive because we thought he was doing a good thing. He cared about you and worried about you. He supported you. We couldn’t always be present, so we thought it was good that there was someone who supported and helped you” (00:23:46).

Table 5.2

Gain the family’s trust (Stage 2): Insights from survivor-participants and van de Pas.

Note: From *Groomed* [Documentary Film], directed by Gwen van de Pas, 2021. © 2021 Gwen van de Pas, Yellow Dot Films.

	Child Sex Offender (Dennis) Insights	Survivor-participant Insights	van de Pas' Insights	Expert Insights
Stage 3: Build a Relationship (00:34:22).	“It starts from the moment they get there. When they get to my house, I’m grooming. To build a trusted relationship, I’m showing her more affection, I’m holding her, you know, I want her to be my best friend” (00:34:31). “I would show the affection, first thing when she got out of the car I’d be there to greet her, hug her and hold her. I almost never left her, she was my <i>girlfriend</i> to me, rather than a little <i>kid</i>. When she came in my room I’d be on my computer “come on, sit on my lap, you can play the computer, I don’t let anybody else play it, but I’ll let you play it”” (00:35:38-00:36:01). “I was a con artist, and I was constantly putting thoughts in their head. I guess you could call it brainwashing. I guess it <i>is</i> brainwashing. That’s what it was all about, was getting what I wanted you know, they <i>loved</i> me. I knew I had to make them think I was the greatest grandpa in the world” (00:36:15-00:36:33).	Barbi: “I always loved my uncle till 20 years later when I had my first memory, he was special to me. They would buy me gifts. They would take me to feed the ducks...” (00:34:32). Katy: “To me my dad was my hero, so like I wanted to be like him, I always thought he was smart and made something of himself” (00:35:14). Nicole: “He kinda seemed like a father Figure to me. He was around 65. He would take me privately into the back and ask me how I was doing, you know, what my opinions were, how I was doing in school. He would make me special meals. He was affectionate” (00:35:38).	Keith asks van de Pas if there were codewords or special things in the relationship, and van de Pas reveals that “Nine is my lucky number, and he kind of made it his lucky number too. And there were so many references to that. And then when I was Googling him, what I found was that he started a company with ‘nine’ in it. Something that was meaningful...” Keith: “that only you and him would recognise” (00:36:28).	Harriet Hofstede, a psychologist specialising in child sexual abuse: “Just imagine how it would be if the one who’s grooming you is of your own family, and very much liked by your father and Mother, or it <i>is</i> even your father and Mother – how complicated is <i>that?</i>” (00:34:57).

Table 5.3

Build a relationship (Stage 3): Insights from Dennis, survivor-participants, van de Pas, and experts.

Note: From *Groomed* [Documentary Film], directed by Gwen van de Pas, 2021. © 2021 Gwen van de Pas, Yellow Dot Films.

	Child Sex Offender Insights	Survivor-participant Insights
Stage 4: Sexualise the Relationship (00:48:24).	“After I get their trust and I feel I can do almost anything with them, I try molest them” (00:48:25).	Aisa: “The first time was at the church...He then holds me down and unzips my pants. When he was done, He told me to go clean myself up because I was probably bleeding” (00:48:38). Keith: “At one point, he pulled out a pornographic magazine... I remember him grabbing me by the back of neck and pushing myself down top of him...I can remember feeling like I was disconnecting from my body. Feeling like I was dying, in a way” (00:49:05). Barbie: “20 years after the abuse, I was walking with my son through their part of the house and I could smell his cologne and just wanting to throw up. I had a flash of my sister and me, 5-years old, in his bed. And I see my little, beautiful sister, he’s bouncing her on this [crotch] area. And I could just hear her crying and crying” (00:49:50).

Table 5.4

Sexualise the relationship (Stage 4): Insights from Dennis, survivor-participants, van de Pas, and experts.
Note: From *Groomed* [Documentary Film], directed by Gwen van de Pas, 2021. © 2021 Gwen van de Pas, Yellow Dot Films.

	Child Sex Offender Insights	Survivor-participant Insights	van de Pas' Insights	Expert Insights
Stage 5: Maintain Control (00:56:42).	“After the molesting, the big thing is, use the trust to keep her quiet. “This is secret. You don’t want to get Grandpa in trouble because then I won’t see you anymore”...But, getting somebody to tell you something that she hasn’t told anybody else, or he hasn’t told anybody else, and then holding that, so that [they] know that “if you ever told on me, I’m gonna tell on <i>you</i>”” (00:56:33-00:57:05). “Whoever is a sex offender, is gonna deny. They’re great at lying, they’re the best at lying” (01:00:20-01:00:42).	Katy: “I just remember him always saying, “don’t trust other people, don’t talk to other people about what happens inside the house”” (00:57:58). Aisa: “My dad asked why I didn’t tell him, and.. I had to keep telling myself “okay, I’m a good girl, I’m a good girl, I’m still a good girl, it’s okay, I’m okay, I’ll be okay.” But for some reason I just felt like I shamed the family somehow. So I didn’t want to talk about it” (00:58:00).	“I go back and forth on whether he explicitly said, “don’t tell anyone you need to keep it a secret.” But it was just really clear it was supposed to be a secret. I don’t know how I knew or why I knew, but I knew I had to not say anything” (00:57:06).	Jim Tanner: “They start with little secrets, and they’re testing to see if you will keep the secret. So it might be that he takes you some place you weren’t supposed to go, or gives you a little tiny gift that he can explain away if it ever comes to light. So, there’s this building up to secrecy (00:57:28).

Table 5.5

Maintain control (Stage 5): Insights from Dennis, survivor-participants, van de Pas, and experts.

Note: From *Groomed* [Documentary Film], directed by Gwen van de Pas, 2021. © 2021 Gwen van de Pas, Yellow Dot Films.

5.3 Reenactments of Traumatic Memory: Shifting Blame and Shame

Groomed opens with a shot of glistening pool water, consuming the entire frame. van de Pas narrates, “the dream starts like this...” (00:00:24), and the camera quickly pans upward to reveal a young girl climbing out of the pool's edge. van de Pas continues, “I see myself getting out of the water...” The camera pans to the right to reveal the back of a man, the offender, standing in front of young Gwen, who follows him through the pool area and into the shower rooms. Simultaneously, van de Pas continues, “and I see.. somebody, I can’t see it very clearly, but I see a person from the back” (00:00:39).

In the shower, water runs and trickles down the drain. Shots of young Gwen’s body, the offender’s body as he moves closer towards and grips young Gwen, and their surrounding environment, are jump-cut together in a montage-like fashion, ending on a shot of blood dripping onto the stainless-steel shower floor, seeping into the drain (Figure 5.4). As the blood drips, van de Pas narrates ““At that moment I see just a lot of blood” (00:01:43) it’s everywhere and I panic” (00:01:47). The shot crossfades into van de Pas awaking from the dream in a panicked state, before the scene concludes with a ‘talking head’ shot where van de Pas poses the following question to viewers: “how can something that wasn’t scary at the time be so scary later, like how can I wake up at night now being *terrified* even though back then it was like “all right let’s go into the shower let’s just go do this?”” (00:01:59).

5.3.1 Representing Traumatic Memories: Merging the Past, Present and Future

Reflective of a ‘Brechtian Distantiation’ type of reenactment (Nichols, 2008), the narration creates a separation of the reenactment from the specific historical moments it reflects. Recounting and reacting to her dreams while simultaneously bringing them to life for viewers to witness, viewers are made aware that the girl is representative of van de Pas’ childhood self, and the scene is positioned as a representation of van de Pas’ traumatic memories, manifested in dream form. The scene thus reflects a common experience for survivors, where traumatic experiences are ‘relived’ and ‘reexperienced’ through dreams and nightmares, and the impacts of the ‘reexperiencing’ transcend into the waking lives of survivors.

Representing memories evoked during dreams implies there is not one specific moment, event, or string of events being reenacted. Rather, the scene represents a collection or an amalgamation of van de Pas’ traumatic memories of child abuse that occurred over several years, which she is only beginning to confront and re/process. Consequently, van de Pas

creates a sense of merging the past, present and the future: “They evidence the passage of time, the gaining, or failure to gain, insight, and they do not carry the same consequences” (Nichols, 2013, p. 25). Thus, the reenactment depicts past experiences of abuse, and it also represents present and future hauntings of traumatic memories, nightmares, and visual and emotional flashbacks.

This interpretation is reinforced through the revisiting of footage of young Gwen and the offender throughout *Groomed*, often when van de Pas recalls memories or provides viewers with snippets of information (Figure 5.4). The constant revisiting helps to ground viewers in the reality of her experience, while functioning as a cue for the audience’s own remembering of what they witnessed earlier. However, it also reflects the relentlessness of traumatic memory, ever-present for the adult survivor, obscuring the boundaries of time and place.

5.3.2 Representing the Pervasiveness of Traumatic Memory and Rethinking the Survivor Experience

Attention is thus directed towards the pervasiveness of traumatic memory, demanding audience attention and ‘rethinking’ of what it means to endure the horrors of child sexual abuse – both for the child victim and adult survivor. To explain, Timothy Corrigan (2011) theorises that cinematic reenactments have two functions: one which exposes the event or subject reenacted, and another that evokes rethinking the event or subject to determine the truth, falsity, or meaning of the event. This understanding reflects Michele Pierson’s (2009) argument that “In a re-enactment, something is repeated (a past way of living, or doing, or acting), and through the activity of its performance, that which is repeated is also transformed” (p. 2). Reenactments can thus be a viable pathway to encourage rethinking of abuse experiences and re/processing for survivor-viewers, as they create distance between and simultaneously offer proximity to the trauma experiences, to avoid ‘shattering the coordinates of one’s reality.’ As cultural theorist Slavoj Žižek states (*The Pervert’s Guide to Cinema*, 2006, 00:04:40):

[We have] to perceive not the reality behind the illusion, but the reality *in* illusion itself. If something gets too traumatic, too violent, even too filled in with enjoyment, it shatters the coordinates of our reality. We have to fictionalize it

Viewers’ potential rethinking of what it means to survive the horrors of child abuse may be influenced by aspects of the opening scene. The tracking shot brings viewers closer to the

experiences of abuse, as if they are there in real time (Nichols, 2017). The tracking motion positions viewers behind young Gwen, rendering them as powerless witnesses or bystanders, as opposed to being positioned as the child victim or adult survivor using a point-of-view shot. Thus, audiences are implicated in the acts of grooming and sexual violation, forced to confront young Gwen's trauma. The narration exposes the haunting nature of child sexual abuse, as blood drips down the shower drain to symbolise the horrific violation, occurring in the past, present, and future. The combination of the heightened sound of running water, quick cuts between the stainless-steel shower faucet, young Gwen's body, and that of the offender as he gropes and touches her (Figure 5.4), reflects how traumatic memory can be somatically experienced and remembered, tied to visual, auditory, and other sensory triggers. Moreover, the stark contrast between the physicality of the offender and young Gwen directs attention towards the power imbalance within the relationship, magnifying the disparities in physical and psychological maturity, and thus the inability for children to consent to sexual abuse; a discourse that is necessary to emphasise, as argued in section 2.2.5.

Consequently, van de Pas' use of reenactment to represent traumatic memory functions to shift blame and shame onto perpetrators of sexual abuse; much like her use of evidentiary editing to expose the methodical, deliberate grooming processes that child sex abusers typically engage in. The scene magnifies the pervasiveness of traumatic memory and its enduring resonance for adult survivors, while exposing how vulnerable children are to being groomed and sexually abused – and how powerless society is in preventing child sexual abuse and grooming. These acts of violence are so pervasive, and often perpetrated by a trusted adult who uses coercive control and manipulation tactics to gain and exploit trust, that no child can be truly safeguarded or protected – a sentiment that van de Pas seemingly reflects when narrating at the end of the scene: “How can something that wasn't scary at the time be so scary later like, how can I wake up at night now being *terrified* even though back then it was like “all right lets go into the shower let's just go do this?”” (00:01:59).

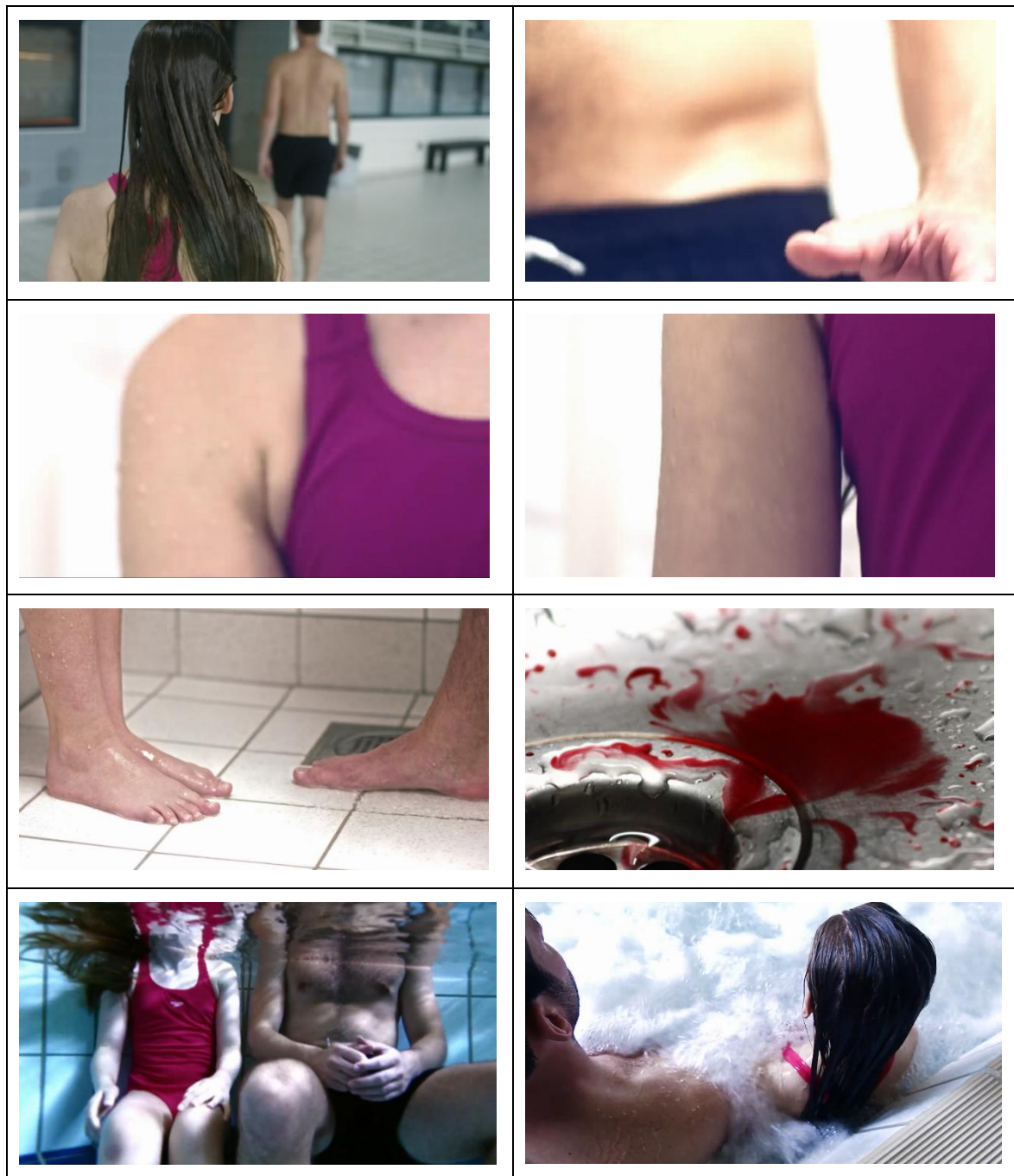


Figure 5.4

Collection of stills from the reenactment of van de Pas' traumatic memory (opening scene).

Description: The bottom two shots appear later in the film, the rest during the opening scene.

Note: From *Groomed* [Documentary Film], directed by Gwen van de Pas, 2021. © 2021 Gwen van de Pas, Yellow Dot Films.

5.4 *Relative* (Tracey Arcabasso Smith, 2022)

Relative explores Arcabasso Smith's experience of resistance from women relatives when attempting to investigate and discuss her experiences of child sexual abuse, the prevalence of intergenerational abuse, and the impacts of familial trauma. Resistance refers to the hesitancy, shame, and fear that surrounds disclosing and discussing abuse and its impacts. Resistance is a product of shame, fear and stigma that surrounds experiences of child abuse, manifesting through victim-blaming, such as minimising the seriousness of abuse and the potential impact upon themselves and/or others. Resistance also pertains to the impact upon the family members who participated in discussions, some of whom withdrew consent after filming interviews and having vulnerable conversations with Arcabasso Smith. Thus, *Relative* represents, and is a product of, intergenerational abuse and resistance to breaking the silence.

Conversations unfold among Arcabasso Smith, her mother, Nana, and her great aunts. Her mother reveals that her grandfather sexually assaulted her; Nana reveals that her father used to beat her, and that she was sexually assaulted as a child four times, twice by male cousins; and one of the great aunts reveals she was also sexually abused. Resistance and normalisation of abuse is apparent throughout much of the conversations. However, there are moments where understandings are negotiated, and there are displays of empathy and compassion between generations. *Relative* is thus an intergenerational negotiation between Arcabasso Smith and her relatives. Arcabasso Smith questions the failure of adults to effectively identify, name, intervene, protect or disrupt the cycle of family abuse, and why a culture of silence has permeated the family. Abuse is thus re-defined generationally as an issue that remains unaddressed, due to a culture of resignation, fear and shame surrounding the discussion and disclosure of experiences of abuse in the context of their Italian American family unit, where women struggled for power. As Arcabasso Smith's mother explains during one of the conversations, "it [child sexual abuse] wasn't allowed then either, it was just different.. the women had no – like I said, the women had no education, they knew nothing, they couldn't go anywhere, they didn't leave their husbands, they just, everybody stayed" (00:29:54). Arcabasso Smith adds, "no one talked about it" to which her mother confirms, "no one talked about it, everything was.. done under the covers, everything was hush hush."

Speaking on *Relative*'s 'rarity,' feminist author, speaker and playwright, Susan G. Cole (2022) distinguishes *Relative* from other documentaries about sexual violence:

Sexual assault, the failure of the justice system to make perpetrators accountable and the full extent of this epidemic of violence against women has been covered extensively in documentaries. But this story of a woman's determination to talk to her family about abuse inside of it adds a new dimension to the discussion (para. 1)

Through the narrative exploration of Arcabasso Smith's experiences of familial resistance, the 'it's all relative' discourse is represented. This discourse pertains to the socially bound nature of one's understandings about what constitutes abuse and victimhood, and how one responds to abuse. Thus, the identification, perception of, and responses to abuse disclosures are relative to one's socio-cultural landscape. Furthermore, throughout history, misogyny and patriarchal ideology have normalised violence and sustained the abuse of women and children, transcending geographical boundaries and culture.

The 'it's all relative' discourse could be interpreted as deflective, as it has the potential to excuse compliance, encourage bystander behaviour, and discourage acting or speaking out against abuse to protect children and themselves ultimately. However, this discourse is not represented in *Relative* for the women in the family to evade accountability and excuse resistance. It is represented to reflect the negotiation of truths between Arcabasso Smith's experiences and those of her relatives, and how these experiences can, and often are, dually held by survivors in contexts of intergenerational abuse and family harm. Arcabasso Smith's pain, anger, and shame in response to resistance and failure to intervene co-exist with the fear-driven silence, and previously unspoken pain and shame that surrounds their experiences of gender-based abuse (as children and adults).

Affording this is *Relative's* narrative structure. Arcabasso Smith utilises parallel editing to seamlessly move between family conversations and their processing, through discussions with other relatives, with her cinematographer, Topaz Adizes, and through engagement with therapeutic supports. Viewers are afforded direct access to the insights Arcabasso Smith receives from her therapist, challenging the resistance and stigmatising discourse perpetrated by her relatives: "...They are not isolated in this family. This kind of dynamic and violation has happened in a number of generations in your family. Across different relationships" (00:10:22). Thus, the resistance is processed *with* Arcabasso Smith, and viewers become part of the negotiation and processing of truths, across generations.

Strikingly similar to van de Pas's conclusion to *Groomed*, in the final act of *Relative*, Arcabasso Smith reveals to Nana that she and her partner, Magi, have found a sperm donor.

This is followed by title cards that reveal the birth of their first daughter two years later, named after her late great grandmother; how viewers learn that Nana passed away. *Relative* began with Arcabasso Smith's entry into the world and ended with her daughter's, symbolising a psychic rebirth for Arcabasso Smith throughout the filmmaking process. As with *Groomed*, the conclusion of *Relative* gifts survivors hope of breaking the cycle and cultivating a life worth living.

5.4.1 Aesthetics

Relative has a 'found-footage' aesthetic and feel. Arcabasso Smith utilises observational recording and framing techniques, filming conversations in long takes or presenting them with minimal cutaways (Nichols, 2017), while weaving her Nana's archive of home videos and photos throughout. The focus remains on the participants – and the archive, exposing their past endurance of abuse. The archive thus produces a temporal disparity, potentially evoking feelings of loss – of time and of innocence – what Jaimie Baron (2012) terms the “archive affect”:

When we are confronted by these images of time's inscription on human bodies and places, there is not only an epistemological effect but also an emotional one based in the revelation of temporal disparity. In other words, not only do we invest archival documents with the authority of the “real” past, but also with the feeling of loss (p. 109)

The archive functions as an anchoring point of reference for Arcabasso Smith's investigation into the family history of abuse. It is key for viewers' and Arcabasso Smith's own understanding about the abuse endured by the older generations of women, why silence permeates the family, and why resistance prevails. Nana gives the Super8 archive to Arcabasso Smith, and they explore the reels together. It is then revealed that Nana filmed the archival footage. In an interview, Arcabasso Smith exclaimed that “Nana essentially made the film” (ForReel, 2022), underscoring the archive's significance and its influence on the discourses it represents and on reconciliation between generations.

The ‘it's all relative’ discourse is constantly circulated and reinforced throughout *Relative* through Arcabasso Smith's recontextualisation of home videos, overlaid on interview audio with family members, spliced between scenes of family conversations and therapy sessions. Through this appropriation of the archive, “the past seems to become not only knowable but

also perceptible” as new meaning is realised (Baron, 2014, p. 1). At first glance, the videos seem innocent, capturing moments of laughter, singing, dancing joy, and love between relatives, across generations. However, a deeper analysis of the clips in the context of the intergenerational family abuse reveals the misogynistic, controlling and aggressive behaviour of the men towards the women and girls. They are constantly being touched, often forcefully, and watched like prey, all while appearing joyous about it, as Figure 5.5 illustrates.



Figure 5.5

Collection of stills from the Super8 home videos in *Relative*, showcasing the aggressive and voyeuristic behaviour of the men.

Note: From *Relative* [Documentary Film], directed by Tracey Arcabasso Smith, 2022. © 2022 Tracey Arcabasso Smith, Field of Vision, The We Collective.

Substantiating my interpretation, Cole (2022) makes a similar argument in her review of *Relative* for Point of View Magazine:

But look more closely. The girls and women are consistently being grabbed, groped and manhandled. See how one man pulls his resistant wife to him to grab a kiss. Notice how many times this kind of thing is going on. Watch how the males are looking at their female relatives. The evidence is there. This doc puts it into perspective (para. 6)

The act of recontextualising the archival footage to highlight the presence of abusive, misogynistic behaviour reflects the discourse ‘it’s all relative.’ Arcabasso Smith has created new meaning for these clips, which are *relative* to the context of the film. Consequently, the home video footage reminds viewers that ‘abuse hides in plain sight’ and that identification and responses to experiences of abuse (our own and others) are ‘all relative.’

However, the relatives' perspectives and conversations are key to giving the archive new meaning. For example, Arcabasso Smith overlays the voice of a relative on top of archival footage, where the relative exclaims: “Childhood sexual abuse is like a silent killer out there. Where is it, do you see it anywhere?! It hides! You’re touching on that very part of the problem, you know. If they do anonymous studies in research, they find out that it’s like an epidemic proportion” (00:27:00).

Near the beginning, Arcabasso Smith and her cousin Deb analyse videos of a family barbecue. They observe the family dynamics and Arcabasso Smith identifies the little girl as herself and Deb as one of the young women. The footage is wholesome and almost nostalgic, offering a picturesque snapshot of a seemingly happy family unit as the camera pans around the space. The barbecue is being fired up while children play around the yard and swim in the pool, the adults joining them or watching from nearby. Nothing seems out of the ordinary. Until the end of the footage, where viewers witness Arcabasso Smith as a young girl swimming and playing in the pool with an older male relative (as depicted in Figure 5.5, above). He picks Arcabasso Smith up and places her on top of a lilo, and simultaneously, Deb, whose voice is overlaid on top of the footage, reveals that “it was one big pretend” (00:05:30).

5.5 ‘Great Aunts’ Scene: Representing the ‘It’s all Relative’ and ‘Hidden in Plain Sight’ Discourses

The following analysis offers insight into the conversations or negotiations of understandings that took place, how resistance and empathy are represented and evoked for certain family members, and how the application of observational, direct cinema documentary techniques has informed the representation of the discourses that ‘it’s all relative’ and ‘abuse hides in plain sight’; an interconnected discourse.

Viewers are introduced to Arcabasso Smith’s great aunts, who sit around a table alongside her mum and Nana, as depicted in Figure 5.6. The composition of the shot is unbalanced, presenting “life as it is” (Vertov, 1984, p. 71). A Lactaid milk carton sits in the centre foreground of the frame, obscuring the bottom of Nana’s face as she sits in the background of the shot, eating and chatting candidly to one of her sisters. The great aunt who sits on the far right is only partially in frame, one side of her face peeking in and out as she moves her body and gestures while she speaks. Excluding the blurred face of a great aunt – a stark visual reminder of familial resistance – it is as if nothing has been disrupted, moved or staged for aesthetic purposes, and as if Arcabasso Smith has positioned the camera towards the table to exclusively capture the conversations as and where they unfold.



Figure 5.6

Great aunt scene in *Relative* (00:45:42).

Note: From *Relative* [Documentary Film], directed by Tracey Arcabasso Smith, 2022.
© 2022 Tracey Arcabasso Smith, Field of Vision, The We Collective.

A great aunt tells Arcabasso Smith that a family member abused her as a child, but she could not disclose the abuse to anyone in her family as she feared the abuser would be killed. Nana candidly eats and continues her conversation with another aunt sitting to her left, oblivious to the conversation unfolding across the table with Arcabasso Smith. Here, viewers have two conversations to focus on and comprehend, but Nana is the salient point, positioned in the centre. Viewers' gaze is likely to be drawn to Nana. While it may be challenging for viewers to focus their gaze on the great aunt speaking and/or to process, the imperfections of the shot and the overlapping of dialogue present a realistic representation of how family gatherings usually unfold: in a casual and relaxed manner, without the need for excessive conversational structure or formalities.

The casual conversation is juxtaposed with the sensitive conversation unfolding between Arcabasso Smith and another great aunt who is positioned in the foreground to the right side of the frame. This contrast symbolises a discourse about family harm and child abuse: that 'instances of child abuse and family harm hide in plain sight,' among the mundanities of life within a family unit. That is, family violence is not always detectable or apparent to those within and outside of the family unit, and where it is identified or suspected, it becomes so normalised or fear inducing that it remains unacknowledged. Abuse may hide in plain sight

because a family unit may be functional in other ways, so the dysfunction is unclear to outsiders of the family. Abuse may become normalised within the home, accepted as ‘just how it is,’ or not recognised or identified as constituting abuse. Further complicating matters, family harm is private in nature, often occurring within the “symbolic and literal closed doors of the home” (Gelles, 1975, as cited in Gelles, 1985, p. 349), which prevents family members from speaking out or raising questions and concerns about the family dynamic.

The women reveal why the abuse has remained unacknowledged. Abusive behaviours have been normalised through the witnessing and experiencing of such behaviours across at least four generations. Patriarchal Italian American societal expectations have influenced the occurrence and normalisation of family abuse and have contributed to instilling fear in the women to keep them silent. Arcabasso Smith’s mum, great aunts, and Nana all acknowledge this. One great aunt says, “the men of years ago were hard” (00:44:38). Arcabasso Smith replies that “a lot of the fathers seemed to be really-” and the great aunt continues, “*brutal, brutal*, not even hard! I saw my father hit my mum a few times, a smack, you know, well that to me was hitting, okay.” Another great aunt adds, “I’ll give you one better. How about they hit their wives, and they bring their girlfriends for dinner.” Arcabasso Smith asks, “for real?” and the women collectively respond, “for real!” The great aunt exclaims, “and the wives had to serve the girlfriend!”

The great aunt in the foreground to the right side discloses her abuse experiences with Arcabasso Smith (who sits off camera), revealing the “terrible, terrible fear I had” about disclosing, stating that “you couldn’t, you couldn’t. You could not. Because the bottom line is if it did happen...If I had to go and tell my father that I was being abused, forget it! He would have annihilated the person. But I couldn’t do that because it was a member of the family. So what do I do? What do I do?!” (00:46:42-00:47:26).

Arcabasso Smith expresses to Nana that “I feel like... what happened to me was a result of all of these things of like, you know, the women just accepted how things were. The men did what they wanted in our family. And.. it just continues to happen until we start talking about it. Ideally, I would have been able to go to Mum and tell her that I was, you know, I was being touched inappropriately, you know, or like I didn’t feel like I had that kind of relationship with her.” Nana affirms this and says: “No, you didn’t. No, no kid does. They think it was their fault. No child ever does. That’s why.. that’s why they never said nothing” (00:17:40). Nana acknowledges that children believe it is their fault, which indicates that

shame has been central to the family's experience; shame that has contributed to the normalisation of abuse, sustained silence, and resistance to speaking out. Nana's acknowledgement of shame is a display of compassion and empathy towards Arcabasso Smith – despite not extending that compassion towards herself (which the following discusses).

5.5.1 Presence and Absence of the Camera: Resistance and Empathy

While the great aunts continue to chat around the table, Arcabasso Smith cuts to a low-angle shot of Nana sitting in her chair, as if Arcabasso Smith has hit the 'record' button and placed the camera on the ground, only for it to be forgotten about while the women sit and chat in the next room. The great aunt with the blurred-out face walks into the room and stands off to the left side of the frame, and Nana asks them, "is she [the great aunt who disclosed her experiences of child sexual abuse] still talking?" (00:49:59) and then adds that "it's good for her to get it off her chest." The great aunt in the room with Nana says "yeah. Maybe it will help Tracey," to which Nana nods her head and responds "yeah, I hope so." Nana's responses here are evidence of the care, compassion and empathy that she possesses, suggesting that she understands how openly discussing experiences of abuse can be useful in re/processing.

This empathetic representation of Nana diverges from how she is represented throughout *Relative* – as stoic, almost unaffected by abuse. For example, near the beginning of *Relative*, Arcabasso Smith asks, "do you know why I'm making a film?" (00:13:37), the camera pointed directly at Nana as she shakes her head. Arcabasso Smith explains that she started to reflect on the abuse and how it was impacting her relationships, particularly with her mother, whom she felt anger towards for not protecting her. A conversation ensues, where Arcabasso Smith asks Nana to clarify details about the prevalence of abuse. As illustrated in Figures 5.7 and 5.8, Nana's eyes dart directly down the lens of the camera, aware of its presence and the vulnerable position she is in, before looking back at Arcabasso Smith. They grin at each other, acknowledging the camera and Adizes who operates it.



Figure 5.7

Nana looks into the camera lens, acknowledging its presence (00:16:50).

Note: From *Relative* [Documentary Film], directed by Tracey Arcabasso Smith, 2022.

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Figure 5.8

Arcabasso Smith and Nana laugh, acknowledging the camera's presence (00:16:54).

Note: From *Relative* [Documentary Film], directed by Tracey Arcabasso Smith, 2022.

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Further demonstrating Nana's stoicism and lack of self-compassion, during this scene (00:18:34-00:19:35), Arcabasso Smith asks Nana, "were you abused?" to which Nana confirms "yes, four times." Arcabasso Smith asks, "by who?" and Nana reveals, "oh, three of them are dead." Surprised, Arcabasso Smith asks, "oh different people?" to which Nana confirms, "oh yeah! When you're a little girl, and the men, men around, they get all these crazy ideas." There is a pause before Nana's head and eyes turn towards the camera lens (see Figure 5.9) and back to Arcabasso Smith. Nana continues while shaking her head, "but that didn't upset my life." Arcabasso Smith probes further, "you don't think that affected you?" Nana shakes her head again and says with conviction, "never. It happened, it happened, and that's all.. I wouldn't allow it to affect me." There is a pause before Nana says, "I had to be strong" while turning to look into the camera once more.



Figure 5.9

"I had to be strong": Nana looks down the camera lens (00:20:00).

Note: From *Relative* [Documentary Film], directed by Tracey Arcabasso Smith, 2022.

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The contrast between the empathetic representation of Nana, seemingly unaware of the camera, and the “strong” representations of Nana, aware of the camera, indicates that Nana has raised her emotional guard in response to the camera’s presence. This is why viewers do not encounter the same level of resistance when Nana is seemingly unaware of the camera recording, her guard lowered. Arcabasso Smith thus calls into question Nana’s performativity. As Bruzzi (2006) argues, all documentaries are performative, and everyone performs, whether consciously or subconsciously. However, by including contrasting representations of Nana, Arcabasso Smith spotlights the performative aspect of communication – both in general and in relation to documentary representations. This has the power to direct viewers’ attention to “the constructed – indeed, performative – nature of the world” (Flinn, 1998, p. 429, as cited in Bruzzi, 2006, p. 188). This provides viewers with the opportunity to challenge and critique social norms and assumptions that govern how one behaves and understands the world.

Nana’s responses have thus been ‘constructed,’ relative to her perception of whether she is being recorded, and therefore whether she is vulnerable to being criticised by viewers and/or family. Consequently, Arcabasso Smith represents the discourse ‘it’s all relative’, but extends the meaning, orientating it within the context of the documentary genre: how one conceptualises, identifies and responds to experiences and/or accounts of family violence and child abuse is relative to their relationship with the camera – to their relationship with being perceived by society.

5.6 *Silent Beauty* (Jasmín Mara López, 2022)

Silent Beauty showcases López traversing a path of familial healing for the women survivors, through conversations about the intergenerational prevalence and impacts of child sexual abuse, the culture of silence and fear, and how they are coping now. Like *Relative*, *Silent Beauty* exposes many threads of abuse across relationships and generations. Early on, López reveals that, upon disclosing that her grandfather sexually abused her, other family members were liberated to come forward about their sexual abuse experiences. After her grandfather’s death, López discovers that he was sexually abused as a child but still chose to abuse by inflicting harm across generations, passing on the responsibility of breaking the cycle of abuse to his victims. The testimonies of López and the women relatives serve to do just that. *Silent Beauty* offers family members, including the upcoming generation and those who

follow, a pathway to confront familial trauma while demonstrating the ‘beauty’ to be found and cultivated for their family.

Reflecting this, López’s younger sister, Sara, features alongside her daughter, Amelia. It is revealed that Sara was abused by López’s father. The birth of her niece compelled López to break the silence: “I knew I had to say something, so that Amelia would not be abused” (00:08:05). The representation of children (her niece and two nephews) is a defining feature of *Silent Beauty*, challenging the discourse that children (including victims) are too vulnerable to be part of conversations about family abuse. As Jane Callaghan (2017) highlights, this discourse informs policy, police investigations, and research, rendering children “as passive witnesses” and thereby silencing them (p. 3371). However, Callaghan (2017) concludes that children are articulate, reflexive communicators, and having their voice heard is imperative to supporting families impacted by family harm violence. López challenges this discourse, emphasising the importance of children’s voices, when stating: “My nephews know what I have experienced. But I always check in to make sure that what I say doesn’t scare them, so they feel safe asking questions” (00:33:33), and “Kids are *way* more perceptive than we give them credit for. I think that’s where we go wrong. We don’t speak openly to them, because we are afraid as adults” (00:35:43).

Additionally, children will inevitably be impacted by familial trauma (despite not being abused themselves), further compounding the need to consider their voice in conversations about family harm and intergenerational trauma. This understanding is reflected in *Silent Beauty*, as López asks Sara how her and Amelia’s lives have been impacted, and Sara reveals: “We don’t have visitors at home. We don’t really visit other people’s homes. I’ve told her that anybody could hurt her, not just strangers. I don’t want to be instilling fear into her, but I also don’t want her to not be aware...It can be lonely, without family members and stuff but, oh well” (00:25:32).

Similarly to Arcabasso Smith, López acknowledges the need to accept the healing trajectories of the survivors in her family, and divergences in engagement with coping mechanisms and supports: “I’ve only been able to see my past as ‘beautiful’ now that I’ve begun to talk about it (00:36:55)” and “It can be very difficult sometimes because I’m determined to heal so I push. But Sara can’t sometimes. I had to acknowledge that that is her process right now, and that is okay” (01:08:21).

Familial and institutional resistance are represented. López, Sara and Sandra discuss her two uncles, also police officers, who refuse to accept the truth. There is resistance from the grandfather when López confronts him over the phone, demanding that he admit to and apologise for touching her vagina. Instead, he gaslights her, denying ever sexually abusing anyone: “You must have dreamt it.” López has been met with resistance from relatives, as she expresses frustration about children still being at risk – and consequently reports him. Similarly to *Groomed*, the failures of criminal justice systems are highlighted, as her grandfather denies the abuse when investigated, walking away free.

Silent Beauty stands to challenge her grandfather’s denial through collective testimonial. This corroborates López’s claims and provides incontrovertible evidence of the exploitation of his power as the family patriarch and a respected Baptist minister to groom, sexually abuse, scare, and silence multiple relatives. When survivors stand united as López and the women in her family have, denying abuse becomes difficult for perpetrators and outsiders. As López narrates at the end: “My grandfather, Gilberto Jimenez Romero, will be buried today. As a father and minister, he built power to control and manipulate his children and family into silence. The silence lasted for generations. The silence ended with me, and my beautifully courageous cousins” (01:21:43).

5.6.1 Aesthetics

Compared to *Groomed* and *Relative*, *Silent Beauty* possesses stronger experimental and poetic flair, as López plays with the soundscape, symbolism, and poetic narration to represent aspects of her experiences and the survivors of her family. López’s use of these poetic conventions is what makes *Silent Beauty* so hauntingly beautiful. The ocean has a heavy visual and aural presence, opening and closing *Silent Beauty* and spliced throughout, as illustrated in Figure 5.10.

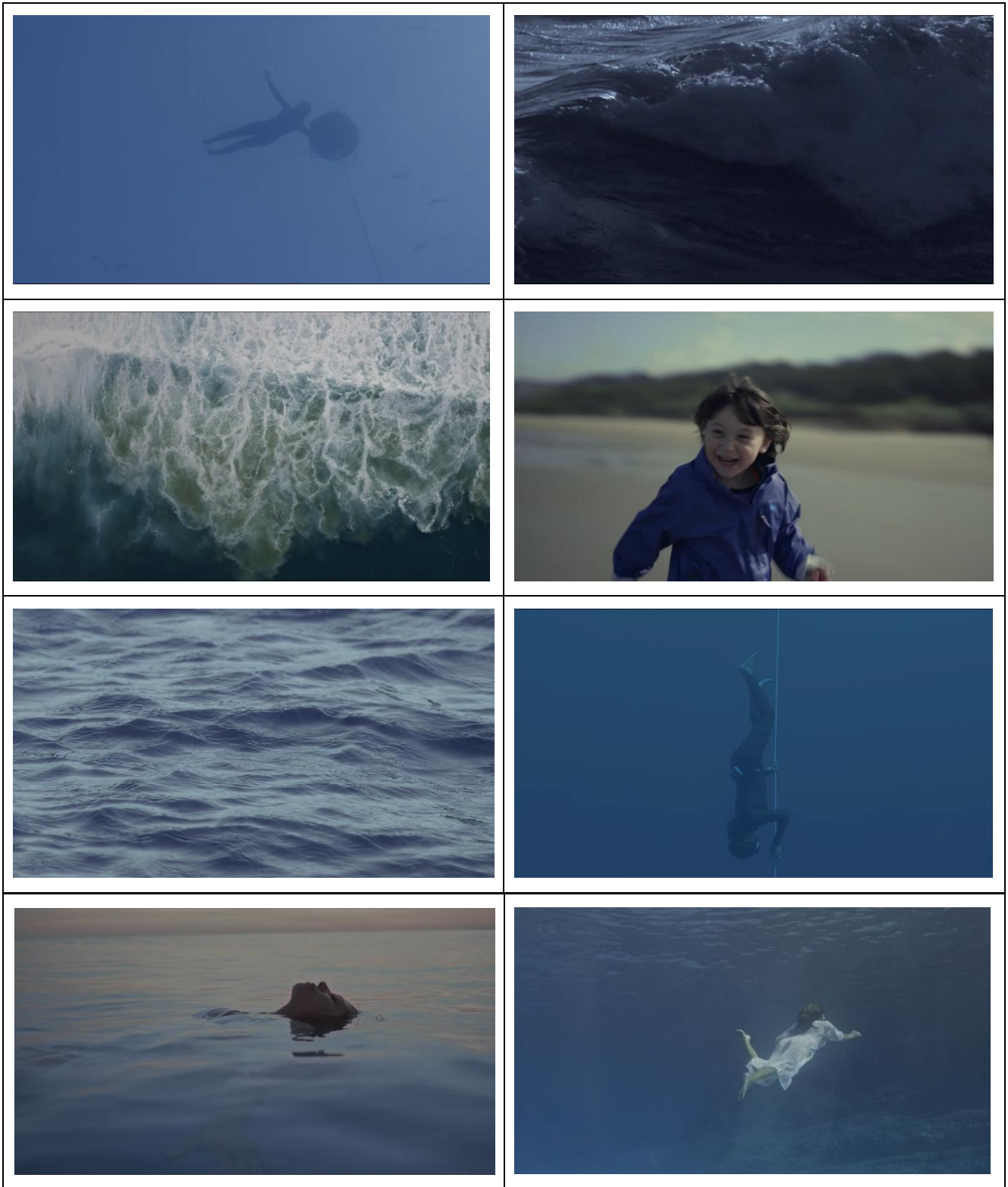


Figure 5.10

Representing the ocean as a mode of cultural and familial memory: Collection of stills throughout *Silent Beauty*. Note: From *Silent Beauty* [Documentary Film], directed by Jasmin Mara López, 2022. © 2022 Jasmin Mara López, Corazón Oscuro, Black Public Media, ITVS, Chicken & Egg Pictures.

Viewers learn that the sea symbolises the relationship with her late grandmother, Maria, and the love they shared for the ocean and deep-sea diving, growing up by the coast, a place that holds cultural significance for the family as immigrants from México. The ocean thus functions as a mode of familial and cultural memory, possessing significance for the family and potentially for indigenous collectives for whom the ocean, land, and earth hold meaning. This interpretation reflects the concept of ‘transoceanic memory’ (Teichler, 2024):

Collectives remember with and across oceanic spaces, both in their dimension as imaginary, ideational realms, and as actual environmental formations...memory is no longer tied to land, if it ever fully was, but unfolds in the interspace between land and water, between solid and fluid, between static and in-flux. The trans here marks this fundamental in-between-ness – in-between cultures, in-between histories, in-between temporalities. The oceanic signifies the in-between-ness of agency (human and more-than-human), of mnemonic materiality, and mnemonic infrastructures (p. 78; 88-89)

Moments of calm and serenity are juxtaposed with moments of stress, and the ocean is visually and aurally present throughout, creating “a rupture with ordinary experience in favour of a more spiritual quest” (Mottet, as cited in Lefebvre, 2006, p. 19). López balances representing the ocean as a therapeutic haven and as one which triggers and is a vessel for traumatic memory. As Sandra reveals to the audience that “The therapist and myself think my father molested me” (01:11:11), sounds of rumbling fade in, followed by sounds of choppy waves and shots of the ocean. Elsewhere, Sandra discusses her nightmares, which is followed by a few-second montage of ocean imagery. López narrates: “The nightmares, I have them too. I dream my sister is drowning, but I can’t reach her. My niece and nephews are drowning, and I’m trying desperately to save them. Our family is drowning” (00:22:26). Depicted in Figure 5.11 and Figure 5.12, López incorporates shots where she is submerged, hugging her knees and pushed under by a wave, as if she trapped in the ‘in-between’ of traumatic memory – whilst the ocean symbolises her family’s beautiful experiences. The ocean is a vessel and trigger for traumatic memories of child abuse, as López straddles representing both calmness and life, and chaos and death: “Water makes the screen a fluid and interconnecting threshold between two places, between here and there, between present and past, conscious and unconscious, waking and sleeping, life and death” (D’Aloia, 2012, p. 100).



Figure 5.11

“Our whole family is drowning”: López floats beneath the ocean surface (00:22:26).

Note: From *Silent Beauty* [Documentary Film], directed by Jasmin Mara López, 2022. © 2022 Jasmin Mara López, Corazón Oscuro, Black Public Media, ITVS, Chicken & Egg Pictures.

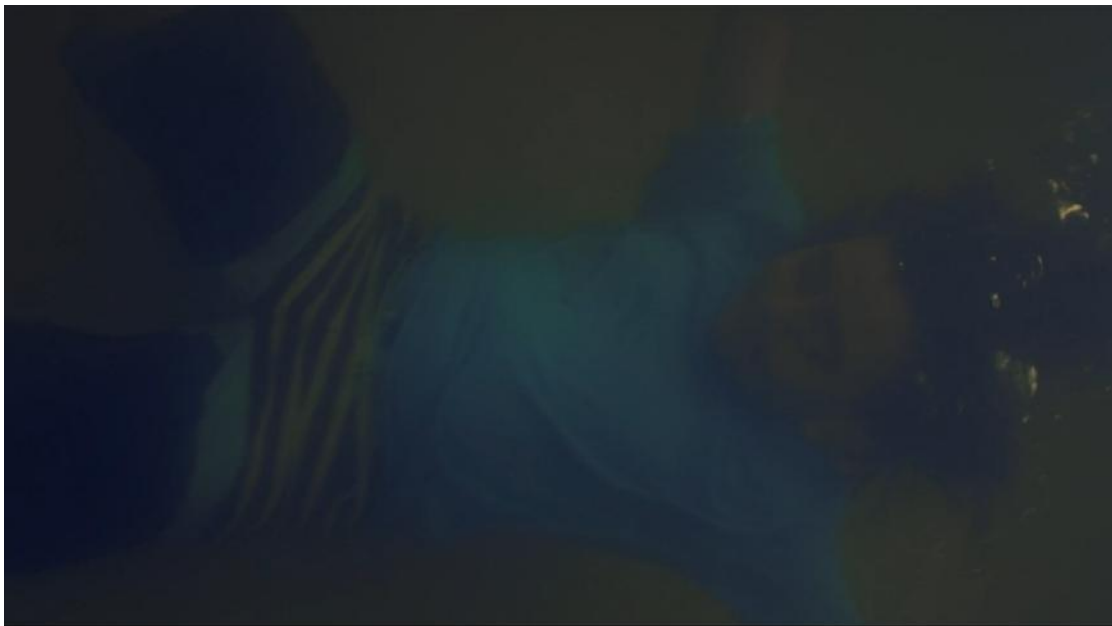


Figure 5.12

“Our whole family is drowning”: Drowning in traumatic memory (00:22:26).

Note: From *Silent Beauty* [Documentary Film], directed by Jasmin Mara López, 2022. © 2022 Jasmin Mara López, Corazón Oscuro, Black Public Media, ITVS, Chicken & Egg Pictures.

5.6.2 Childlike Wonder

Another defining feature of *Silent Beauty* is the childlike wonder established through the opening montage, which is upheld and afforded by the representation of López's niece and nephews. The montage, including shots represented in Figure 5.13, comprises archival home video footage of López as a child, recent footage (marked by the aspect ratio) of her niece and nephews playing and laughing, recent footage of herself and loved ones, and shots of nature and the ocean.

Silent Beauty has a layered soundscape, the most intricate of the texts, moving between sequences where diegetic sound is utilised and sequences where non-diegetic sound (or a combination) is present, including ranchera music (a traditional Mexican music genre) and soft humming. López confirmed during the interview that she vocalises the humming. Thus, it is a signifier of power reclamation, as López reveals in *Silent Beauty* that she temporarily lost her hearing after disclosing. The opening montage depicted in Figure 5.13 demonstrates the intricacies, layering non-diegetic and diegetic sounds to help create a sense of childlike wonder and the merging of time and space. Soft, tranquil piano notes complement the placidity of the waves lulling in the background. Windchimes sound, reminiscent of a child's music box, giving the impression of a field recording. Soothing humming becomes the loudest sound, and reverberation is utilised as a 'sonic space-making device' (Doyal, 2004, as cited in Schott & Barbour, 2020, p. 227) to further draw attention to time, place, and memory. Reinforcing the whimsical, childlike sense of wonder are sounds of playful laughter and excitable chatter from the children and adults, the clinking of glasses, and the closing shot where her nephew raises a glass and proudly exclaims, "I toast to our future!" (00:02:13).

Sonically striking, the montage merges time and space (which the ocean, as a mode of cultural memory, complements), reinforced by the deteriorated, found quality of the archival footage. It is otherworldly, evoking a sense of nostalgia, longing for innocence, and childlike wonder. The montage thus reflects the uncovering and re-discovering of beauty in López's life – an interpretation that is supported by her revelation in the following scene: "I broke down when I realised I wasn't allowed to see the good in my life, because of what happened to me. Those memories are there, I just have to dig for them" (00:03:44). Thus, *Silent Beauty* offers hope for the future, particularly for the next generation.

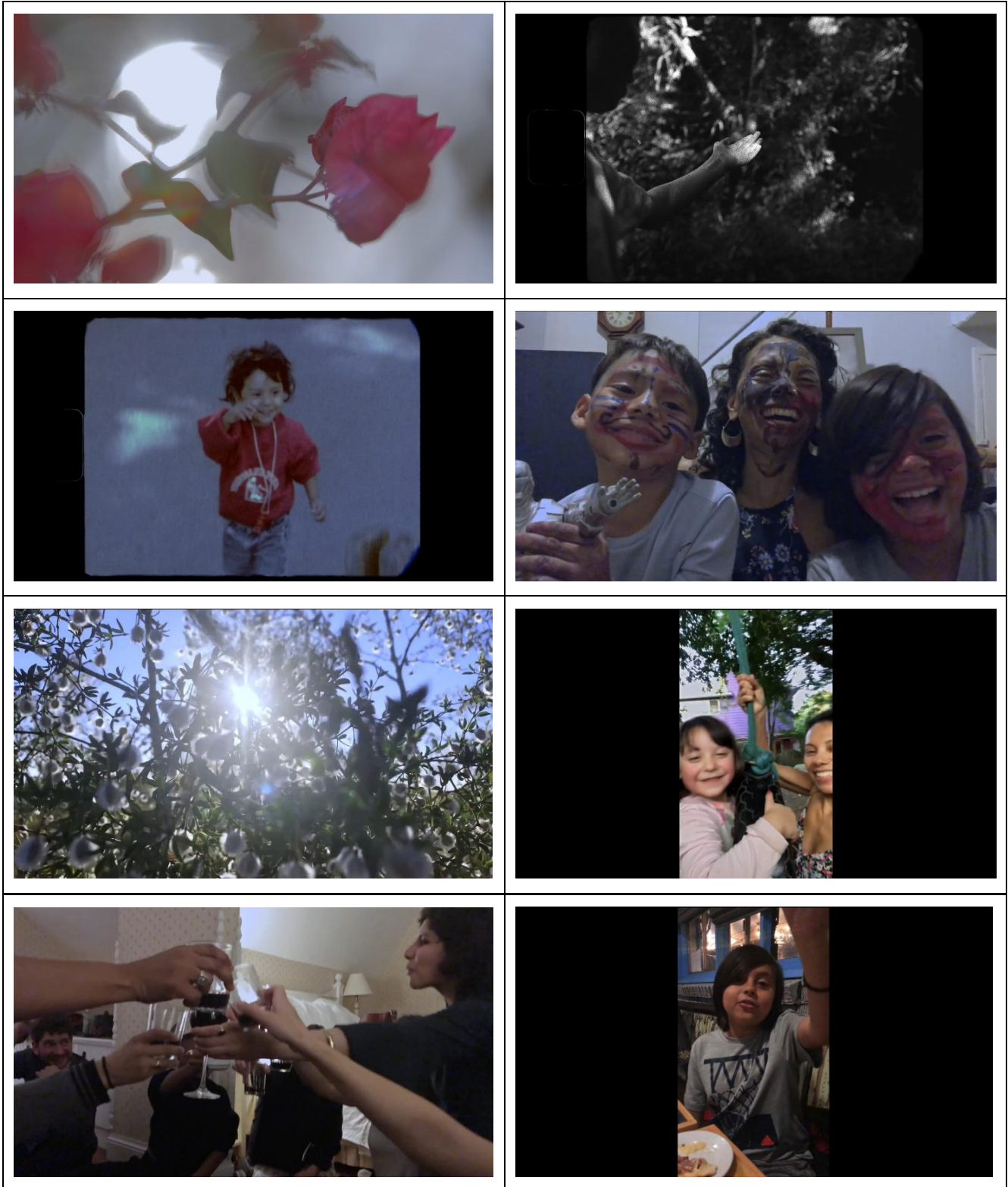


Figure 5.13

Establishing childlike wonder: Collection of stills from *Silent Beauty*'s opening sequence (00:41:00-00:02:13).

Note: From *Silent Beauty* [Documentary Film], directed by Jasmín Mara López, 2022. © 2022 Jasmín Mara López, Corazón Oscuro, Black Public Media, ITVS, Chicken & Egg Pictures.

5.7 ‘Washing Dishes’ Scene: Representing the Pervasiveness of Traumatic Memory

As a survivor-viewer, the visual and sonic symbolism of this scene has led to enduring resonance. Now, when I rinse and wash something, I often experience visual flashbacks to the imagery, and I can hear López’s voice, reminding me of how traumatic memory haunts survivors, the complexity of avoiding triggers, and that I am not alone in experiencing ‘unconventional’ triggers. In what follows, I explain how, through a simplistic combination of poetic and observational conventions, López represents the pervasiveness and relentlessness of traumatic memory.

The scene is filmed in one seamless take (00:16:15-00:18:58). It consists of a bird’s-eye-view shot of a stainless-steel kitchen sink, the frame remaining static to capture what moves in and out of the sink; an observational convention (Nichols, 2017). López’s hands move into the frame as she reaches for the tap, turns on the water, and picks up a sponge. She runs it under the water, picks up a bottle of dish-washing liquid, bringing it into the frame, and pours a smidge over the sponge. She then squeezes the sponge, lathering it with soap suds, before picking up a glass (Figure 5.14). This occurs in the first twenty seconds, establishing a slow pace that is maintained as López moves from dish to dish until the sink is empty.

After a few seconds, López begins to narrate through a voice-over: “You wash the glasses first” (00:16:35). She pauses for over ten seconds while continuing to wash the glass, and the diegetic sound of the running water becomes momentarily heightened. The pause in López’s voice-over narration is repeated throughout the scene, maintaining a slow pace. Additionally, the absence of López’s voice allows the sound of the running water to be heightened.

Because there are no other stimuli for viewers to focus on, viewers are given the opportunity to ponder the narration and become immersed in López’s repetitious movement.



Figure 5.14

Washing dishes scene in *Silent Beauty* (00:15:43).

Note: From *Silent Beauty* [Documentary Film], directed by Jasmin Mara López, 2022. © 2022 Jasmin Mara López, Corazón Oscuro, Black Public Media, ITVS, Chicken & Egg Pictures.

López continues: “The day my grandfather taught me to wash dishes, he stood at the sink, took a glass, and told me to start at the edges” (00:16:48). López picks up the second glass and begins to wash the edges: “Then, he had me try, standing next to me, watching as I followed his lead.” There is a pause in the narration as López finishes washing the glass, sets it aside on the bench and picks up the mug. Continuing: “My grandfather had rules for everything. What time we ate, what day we shopped. How we washed the dishes” (00:17:21). The narration pauses again as she continues to wash the mug. López continues: “I lived with my grandparents, my mother, my siblings, and my youngest uncles. We, the young girls in the family, had less freedoms than the boys in the family.” López picks up the cutlery, rinses them and starts to scrub with the sponge, and continues: “We had a hammock in the front yard that also had a rule. We couldn’t swing fast, but our uncles could. I broke that rule with a neighbourhood boy once. My grandfather hit me with a bullwhip that day” (00:17:44). There is another pause as López goes on to say: “In the past I have tried to forget him, the good and the bad. But I can’t. His memory is always present. In the most mundane of tasks, he’s there.” As López finishes up washing the last dish, she turns off the sink tap, moves out of frame, and the shot lingers on the empty sink as the last of the water moves down the

drain, leaving soap suds behind – symbolising the ‘residue’ that her grandfather has left behind in the form of cognitive and somatic memories; traumatic memories which co-exist with the ‘good,’ complicating and compounding the ‘presence’ of her grandfather.

The mundanity of washing the dishes is not only acknowledged through the poetic narration but also emphasised throughout the scene, as reflected in the formal properties. To explain, visually the scene is repetitive, both in terms of López’s movement and the lack of shot/framing diversity; it consists of one static shot, almost three minutes long. The scene is paced slowly, its tempo established through the cinema verité stylisation, with a static long take that evokes the sense that López is being observed. The ‘stop-start’ delivery of López’s voice-over maintains the slow pacing. The scene is simple, and such formal simplicity reflects the ordinariness of the task.

Furthermore, the slow pacing and repetition, particularly where only the diegetic sound of the running water is present, allows viewers to contemplate the task at hand and negotiate the meaning attached to the scene. This is because, in the context of documentary films, it can open up interpretative space for the viewer: “Longer takes, which create sequential chains and the narrative cloistering of meanings, also undermine these very meanings by leaving the viewer more time to ignore or challenge them” (MacDougall, 1993, p. 38). By providing viewers the opportunity to ponder the meaning and its personal significance to their lives, López directs viewers’ attention to the mundanity of the daily task. This is intensified by the bird’s-eye-view shot, positioning viewers as observers studying the task under a microscope.

Together, the narration and continuous emphasis on the ‘ordinariness’ of the task, essentially representing “life as it is” (Vertov, 1984, p. 71). López represents the pervasive and relentless nature of traumatic memory. This is because, compared to other stimuli, engaging in mundane tasks is less likely to be recognised as a potential trigger for traumatic memories. They do not carry a strong association to what psychology and psychiatry have historically considered to be experiences of trauma – a one-off, life-threatening event, like rape, experiencing natural disasters, or the loss of a loved one. This narrow understanding of what constitutes trauma or traumatic experiences has mediated and limited understandings about what a ‘trigger’ can be. Accordingly, by representing a triggering experience that viewers are less likely to associate with traumatic experiences (or that bears no explicit resemblance to a one-off life-threatening event), López challenges narrow understandings of traumatic memory and triggers, and consequently speaks to how relentless traumatic memory can be,

possessing the potential to taint experiences or engagement with certain stimuli that are, from the outset, unassuming triggers.

5.8 *Dandelions* (Ginene Humphrey, TBC)

Despite *Dandelions* still being in post-production (at the time of writing this thesis), the information I have found online combined with insights generated through the interview with Humphrey has allowed me to form a comprehensive understanding about the themes and discourses represented, what conversations are had and between whom, and the main techniques and representational strategies used to represent certain discourse and speak to the survivor experience.

A synopsis for *Dandelions* reads (International Movie Database, 2024):

This brave and gritty film is set to powerfully impact the global epidemic of child abuse. ‘Dandelions’ is a rare Autobiographical Documentary Feature geared to show the truth about what it is really like for adult survivors of Child abuse, neglect and abandonment (foster homes). Through Ginene Humphrey’s own family’s story, it aims to trigger serious discussion into the long-term realities (Emotional, mental, physical and spiritual) faced by often ‘silenced’ survivors, its effect upon families and thus society as a whole. Highly creative, it exposes what it’s like to survive, forget and then return home years later, to face intrafamilial trauma. All expressed from the heart with her own artwork/graphics/semi-animation weaved throughout and balanced with a dollop of dark humour

Comparative to *Relative* and *Silent Beauty*, *Dandelions* explores Humphrey’s and her family’s experiences of intergenerational abuse. Similarly to Arcabasso Smith and van de Pas, Humphrey is investigating her childhood, fractured familial relationships, and her own memories of family abuse and trauma as they begin to ‘come back’ to her. Humphrey confirmed this in the interview, adding that re-meeting and connecting with her estranged brother of twenty-four years triggered memories:

...that just made my mind go mush. I have what they say are flashbacks. Flashbacks to me are senses of smell and taste. Flashbacks are very personal. You can see things, you don’t see things. It’s very subjective. It’s very.. confusing, and it’s very scary. He told me things that I was like, “no.” And then the memories would start coming

back...So in having that memory loss, I had a lot of questions, and the only way to get questions is to go and ask

Investigating is exactly what Humphrey does, except she does so while armed with a camera. Humphrey confirmed in the interview those involved in the conversations, including her brother whom she reconnects with, her sister, and other relatives impacted and silenced by family abuse, including an aunty who “shares her story for the first time.” Where *Dandelions* seemingly diverges from *Groomed*, *Relative*, and *Silent Beauty* is in the included conversations with her estranged father and mother who abused Humphrey and her siblings. This complex dynamic, where the abuser is a parent or caregiver, is touched on in *Silent Beauty* through the acknowledgement of the father-daughter relationship dynamic of López and her grandfather. *Dandelions*’ early version shows Humphrey speaking to her mother, using audio presumably from the in-person conversations: “how can I trust or be with anybody else, when your own family hurts you and then abandons you, and then the boyfriend is doing the things they did, mum?” (00:02:36). Diverging again, Humphrey speaks to the abuse she endured in foster homes – systemic injustices that are prevalent worldwide, but undeniably so in Aotearoa, given the release of the Abuse in Care Royal Commission of Inquiry’s final report (2024), and the ongoing discourse surrounding the enquiry, as survivors demand adequate justice and reparations (discussed in chapter one). I foresee *Dandelions* catalysing and contributing to such discourse, acting as another piece of ‘evidence,’ but one in which her inner-child is brought to life through animation, empowered to ‘testify’ in ways that otherwise could not be afforded.

5.8.1 Aesthetics

During our communications, Humphrey divulged that *Dandelions* has developed significantly since the early version trailer – which Humphrey prefaced, reminding viewers that “What is shown in the rough trailer is only a tiny bit, a taste of just a few of the big moments” (Humphrey, 2014, February 11, para. 1). The ongoing development (as of July 2026) of *Dandelions*’ current cut explains why I have not analysed the trailer as comprehensively as the released documentaries. Instead, I have investigated the animations that Humphrey has confirmed will be present in the final cut. Stylistically, they are similar to the trailer animations, with a stop-motion-esque feel. What has developed is the frequency with which the animation occurs, and the technicality of the process. Formally, the animations are the defining feature of *Dandelions*, seemingly a heavily utilised representational strategy that will

impact the discourses and evocation of affect. *Dandelions* does not utilise archival material, photographs or home videos to the extent they are utilised in *Groomed*, *Relative*, and *Silent Beauty*, as Humphrey revealed that “...the big thing about my film is I have absolutely *no* filmic stuff, files, anything, except *one* photograph...” of herself and siblings as children. Humphrey also disclosed that she is rarely physically in the shots during the conversations, remaining behind the camera for most of *Dandelions*. The animations have therefore been relied upon to tell Humphrey’s story, demanding investigative attention.

5.9 Animation: Representing the ‘Inner-child’

Dandelions is one of the only animated autobiographical documentary features (that I have come across) representing experiences of child abuse and healing. The conclusion of my master’s thesis (Visage, 2021) highlights the need to investigate how autobiographical documentary filmmakers, who represent trauma and abuse, may utilise forms of animation to “aide imagination that can facilitate awareness, understanding and compassion from the audience for a subject position potentially far removed from its own” (Honesty Roe, 2013, p. 25). Indeed, the concept of the ‘inner-child’ is abstract, and the use of animation has given the child within Humphrey a physical presence, making the concept visually tangible. More significantly, animation has afforded Humphrey the ability to represent and convey subjective states of mind pertaining to her inner-child and adult self, including experiences of powerlessness, traumatic memory, and shame – juxtaposing the traumatic and abusive with the playful and wondrous.

Several qualities of the animations evoke a sense of innocence and childlike wonder, helping to establish a playful tone. The animations have a scrapbook-like quality – it appears as if the girl, depicted in Figure 5.15, has been created by layering textured paper cut-outs. The way the archival photograph is represented, as illustrated in Figure 5.16, demonstrates a scrapbook-like aesthetic. The animations help establish a playful tone, as the layering and collaging of two-dimensional images and textures reflects how a child might create: imprecisely, focused on the process, and without much concern about what looks ‘real’ or if the creation has a strong indexical bond to the historical world (Nichols, 2017). Other stylistic and technical aspects of the animations contribute to establishing a sense of playfulness, like the jerky movement of the girl and her surroundings, typical of a stop-motion technique (Humphrey revealed that the animations were created frame-by-frame through a mostly digital process).



Figure 5.15

Updated animation of the inner-child in *Dandelions*.

Note: Retrieved directly from Ginene Humphrey during personal communications. Reproduced with permission. © 2025 Ginene Humphrey, Conscious Films. © 2025 Ginene Humphrey, Conscious Films.



Figure 5.16

Updated use of the archival photograph in *Dandelions*.

Note: Retrieved directly from Ginene Humphrey during personal communications. Reproduced with permission. © 2025 Ginene Humphrey, Conscious Films.

Humphrey experiments with the scale of the girl and her surroundings, sizing up the dandelions in Figures 5.17 and 5.18, compared to Figures 5.15 and 5.19, where the dandelions appear truer to size. Her body language, gestures, and movements are playful and evoke a sense of childlike wonder, in the jittery movement and in actions such as picking the dandelion and blowing on the spores. Such actions are reminiscent of how a child might behave as they search for wonder, recognising beauty and magic amongst even the ‘weeds’ – what dandelions are perceived to be through a colonial lens of understanding, as opposed to being acknowledged for their medicinal properties and healing potential (Yarnell & Abascal, 2009). Humphrey embodies ‘play’ through the metamorphosis of the child and her surroundings: “In enabling the collapse of the illusion of physical space, metamorphosis destabilises the image, conflating horror and humour, dream and reality, certainty and speculation” (Wells, 1998, p. 69). In this way, viewers become immersed in a world where play flourishes, and restrictions cease to exist.



Figure 5.17

Animation of the inner-child reaching for an over-sized dandelion.

Note: From 2015 FUNDRAISING TRAILER for ‘DANDELIONS’ A Documentary Feature Film [YouTube video], directed by Ginene Humphrey, 2015. © 2015/2025 Ginene Humphrey, Conscious Films.



Figure 5.18

Updated animation of the inner-child in a field of dandelions.

Note: Retrieved directly from Ginene Humphrey during personal communications. Reproduced with permission. © 2025 Ginene Humphrey, Conscious Films.



Figure 5.19

Animation of the inner-child's face, blowing on dandelion spores.

Note: From 2015 FUNDRAISING TRAILER for 'DANDELIONS' A Documentary Feature Film [YouTube video], directed by Ginene Humphrey, 2015. © 2015/2025 Ginene Humphrey, Conscious Films.

There is an underlying eeriness and sense of darkness to the animations, afforded by the girl's jittery, jerky movements and gestures, which naturally challenge the audience's fluid perception of human movement. This tone is also present as *Dandelions* explores Humphrey's experiences of child abuse, memory loss as an adult, and her re/processing and healing. Thus, the playful is juxtaposed with 'the political' or 'the traumatic.' This is somewhat jarring, and potentially uncomfortable for viewers to digest, because 'child' and 'abuse' should be incompatible concepts, and when they are spoken about, children are not usually involved or represented. Humphrey rejects this, giving voice to the *child* version of herself and bringing her inner-child to 'life.' Honess Roe (2021) suggests that evoking audience empathy through animated documentary is informed by representations of "specific and identifiable characters with which to empathise" (p. 132) – like that of Humphrey's inner-child. Thus, the girl functions as a device for understanding and empathy evocation. Viewers are asked to identify and confront the abuse, while bearing witness to the child victim *and* the adult survivor; like van de Pas' representation of young Gwen (as discussed in section 5.3).

Humphrey's representation of the traumatic is exemplified by the animations of the girl sitting in a bathtub, as illustrated in Figures 5.20 and 5.21. This scene, which Humphrey confirmed remains unchanged in *Dandelions*' current cut, represents Humphrey's memories of child sexual abuse, which Humphrey narrates through a voice-over. The impacts of the sexual abuse, namely fear and shame, are represented symbolically; experienced both as a child and as an adult recalling the traumatic memories.



Figure 5.20

Animation of the girl in a bathtub, looking up and addressing the audience.

Note: From 2015 FUNDRAISING TRAILER for 'DANDELIONS' A Documentary Feature Film [YouTube video], directed by Ginene Humphrey, 2015. © 2015/2025 Ginene Humphrey, Conscious Films.



Figure 5.21

Animation of the girl in a bathtub, looking down and protecting her genitals.

Note: From 2015 FUNDRAISING TRAILER for 'DANDELIONS' A Documentary Feature Film [YouTube video], directed by Ginene Humphrey, 2015. © 2015/2025 Ginene Humphrey, Conscious Films.

Compositionally, the bathtub animations convey a sense of abandonment and powerlessness, the dark dinginess of the background literally framing and figuratively isolating the girl from the outside world, or from safety. Cramped in the corner of the bathtub, the girl takes up the least amount of space possible, emphasising the isolation. The girl looks directly into the eyes of the viewer, as if they stand in place of the abuser. Directly addressing the audience through eye contact can signify empowerment and control. However, the bird's-eye-view shot places the viewer in the position of the powerful, like a perpetrator looming over her. Viewers are positioned to observe the girl through a 'perpetrator gaze' – where they are looking down on a child who is afraid, alone, and vulnerable, the ideal target. Paradoxically, the girl could be looking to the audience for safety and refuge, her gaze a silent 'call to action' or a cry for help to adults with the power to intervene and protect. With either interpretation, the voyeuristic composition remains: the girl is naked and in a place of privacy, powerless in stopping the sexual abuse.

The rusty bathtub signals and evokes the passage of time, its deterioration a product of ongoing neglect. This may also be interpreted as signalling lost memory or the difficulty of remembering experienced by Humphrey. Reflecting the passage of time and lost memory is the girl's jerky movement as she raises her head, looks at the audience, and blinks directly at viewers, while a water droplet ripples on the surface. Humphrey creates 'jumps' in time and space through reduced frame rates, which give the impression of a stop-motion effect through the jittery movements of the girl and her surroundings. As animator Norman McLaren reminds us, "What happens between each frame is more important than what happens on each frame" (Solomon, 1987, p. 11, as cited in Wells, 2011, p. 13). Moreover, the use of animation, irrespective of the style, draws viewers' attention to the fickle nature of memory and subjective states of mind: "animations often involve assemblages of objects and people in their creation and within their representations, they also draw attention to the complex, collaborative dimensions of memory" (Walden, 2019, p. 88).

Finally, Humphrey represents the traumatic through the body language and gestures of the girl, constructed and positioned using 'shame signals.' Regarding abuse related trauma:

Shame signals (e.g., head down, gaze avoidance, and hiding) are generally registered as submissive and [appeasing], designed to de-escalate and/or escape from conflicts. Thus, insofar as shame is related to submissiveness and appeasement behavior, it is a damage limitation strategy, adopted when continuing in a shameless, nonsubmissive

way might provoke very serious attacks or rejections (Gilbert & McGuire, 1998, p. 102)

Revisiting Figures 5.20 and 5.21, the girl cowers, her head down and her gaze avoidant at first. The girl hugs her legs, making herself as small as possible, while creating a protective barrier for her body and vagina. Shame is represented in the animation stills referenced earlier to demonstrate the playful tone and childlike wonder they establish. The girl is represented as gaze-avoidant, looking down in Figures 5.15 and 5.18, and with her eyes closed as she blows on the dandelion spores in Figure 5.19. The body and face of the girl are presented in ‘parts,’ never entirely in one shot – nor is Humphrey for most of *Dandelions*. Even Humphrey’s artwork that appears in *Dandelions*, as shown in Figure 5.22, omits parts of her body to reflect shame and the state of dissociation (a trauma response) that Humphrey experienced as a child victim, and continues to experience as an adult survivor; the tagline for the promotional poster confirming: “I was a pest. Nothing but a weed when the darkness found me. Like the spurs of a dandelion, I would leave my body...”

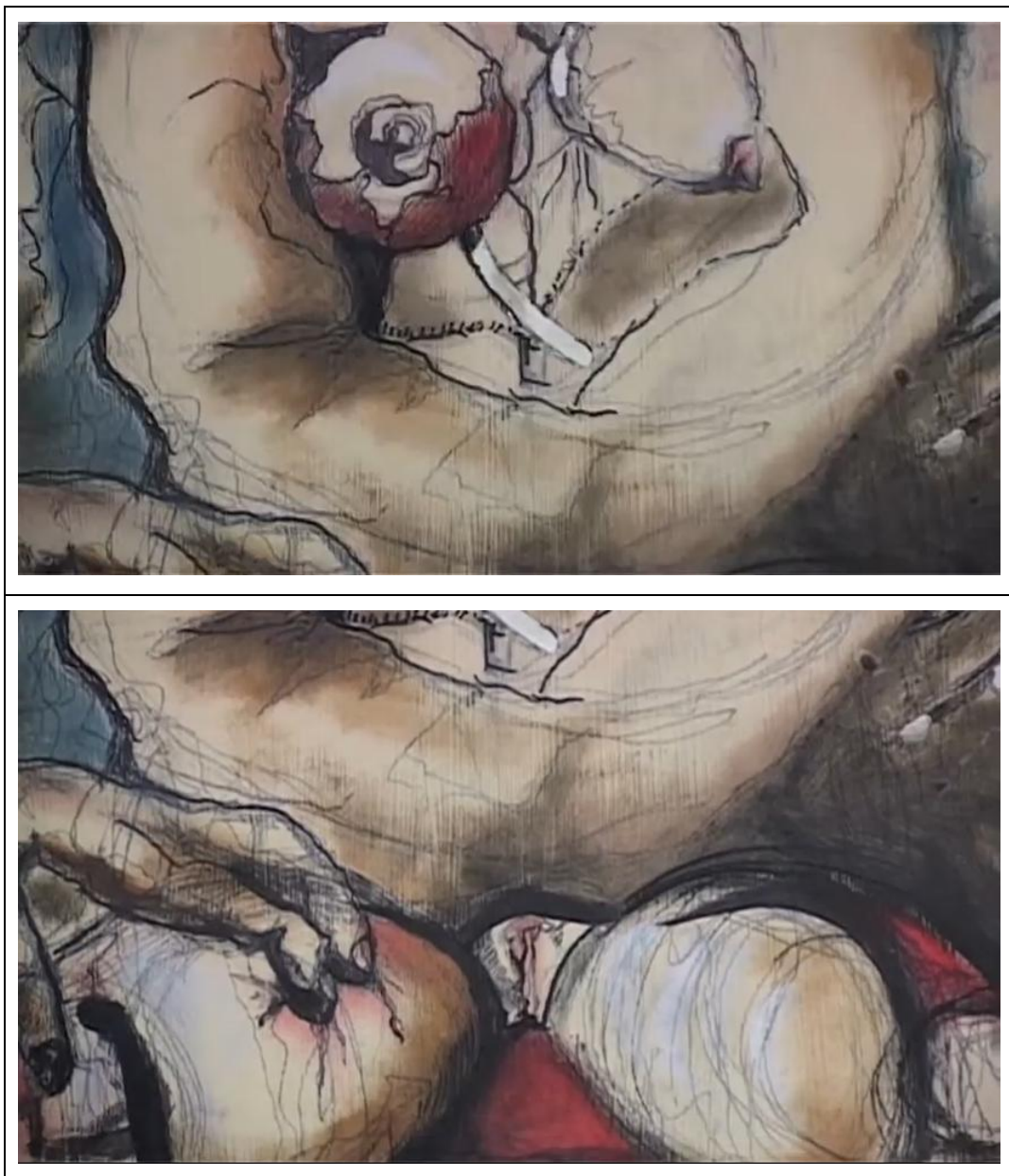


Figure 5.22

Representing dissociation and shame: Shots of Humphrey's surrealist artwork of her body, breasts and vagina exposed, hands non-existent.

Note: From 2015 FUNDRAISING TRAILER for 'DANDELIONS' A Documentary Feature Film [YouTube video], directed by Ginene Humphrey, 2015. © 2015/2025 Ginene Humphrey, Conscious Films.

5.10 Conclusion

While nuanced in the experiences they depict, and unique in their technical and aesthetic forms, at the heart of *Groomed*, *Relative*, *Silent Beauty*, and *Dandelions* is the disruption of stigma and shame surrounding child abuse, intergenerational abuse, and healing. These autobiographical documentaries challenge victim-blaming attitudes and beliefs through the counter discourses and aspects of the ‘child abuse survivor experience’ they represent and speak to. That is, what it means to have experienced child abuse, and be an adult survivor, navigating a culture of victim-blaming that reinforces the cycle of shame and silence.

Offering viewers a rich tapestry of insights, the thematic threads of the documentaries include traumatic memory, resistance, shame, and hope and healing justice. These aspects of the child abuse survivor experience are interconnected, as illustrated in Figure 5.23. The way they are represented, the discourses communicated, are afforded by the survivor-filmmakers’ aesthetic decisions and engagement with representational strategies, codes and conventions to ‘represent the unrepresentable’ aspects of the survivor experience; summarised below.

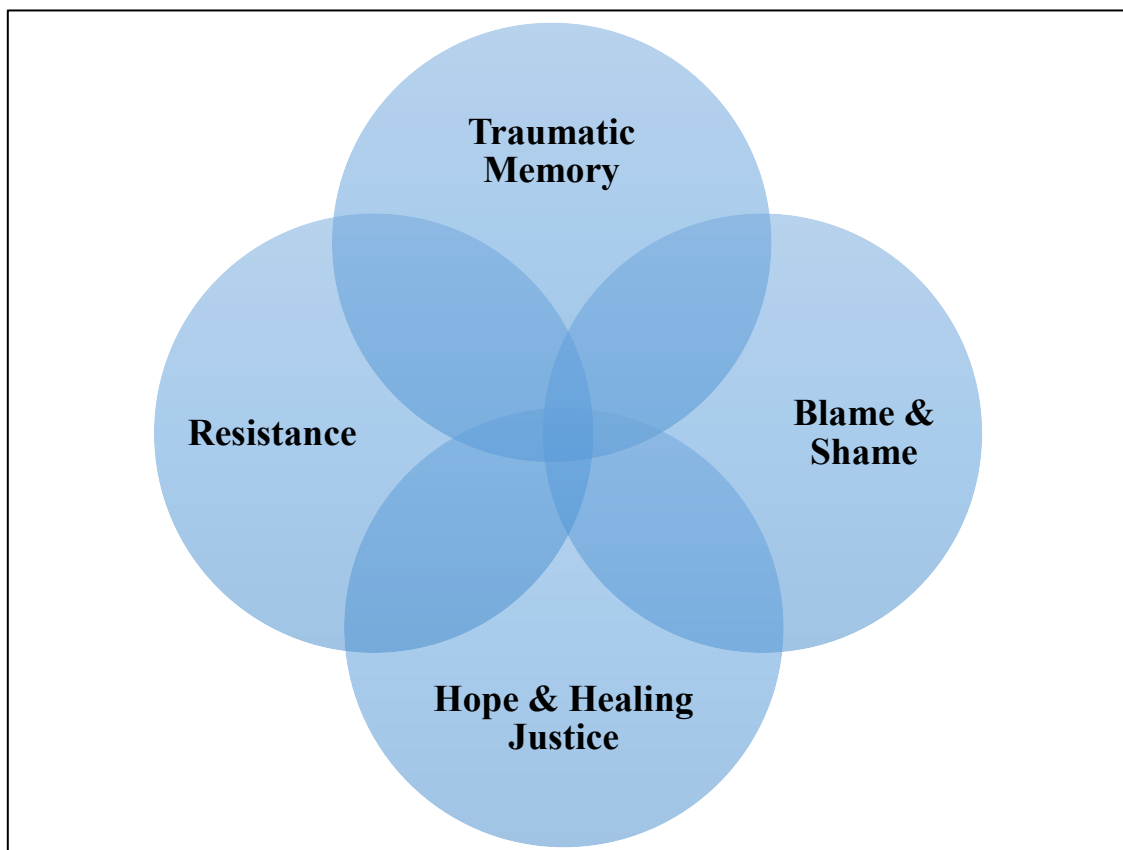


Figure 5.23

Interconnected aspects of the ‘child abuse survivor experience’ represented in *Groomed*, *Relative*, *Silent Beauty*, and *Dandelions*.

5.10.1 Traumatic Memory

In *Groomed*, van de Pas utilises scripted reenactments of traumatic memories (experienced in the form of dreams and flashbacks) where she is sexually assaulted as a child, groomed by her swimming coach. Snippets of the scripted reenactment are revisited throughout, reflecting how a survivor might experience traumatic memory as pervasive and relentless. Viewers are positioned as witnesses to van de Pas' traumatic experiences, and the stark juxtaposition of the young girl and adult man directs viewers to confront the undeniable occurrence of child abuse unfolding, magnifying how vulnerable children are to being groomed.

López represents the pervasiveness and relentlessness of traumatic memory in the 'washing dishes' scene. Captured in a single static take, akin to cinema vérité, the scene creates a sense of stillness and mundanity, while López's poetic narration reveals that her grandfather's presence haunts her, even during the most mundane tasks. The scene magnifies the pervasiveness of traumatic memory, observing López engaging with an unassuming trigger, not typically associated with abuse: washing the dishes.

The ocean is utilised by López as a mode of cultural memory, consistently revisiting and representing ocean imagery and sound throughout *Silent Beauty*. Always present, it becomes both a symbol of calmness and life and a symbol of chaos and death; its presence is neither here nor there, reflecting traumatic memory and the merging of the past and present. The merging of time and space is represented by Humphrey in *Dandelions*, afforded by the use of animation to represent her inner-child. Specifically, the metamorphosis of the girl, combined with her jittery stop-motion-esque movements, which subverts viewers' perceptions of time and space.

5.10.2 Resistance

A product of victim-blaming culture, experiencing and challenging resistance is explored in a myriad of contexts, including instances of resistance from the abusers; immediate and extended family members; faith-based communities; and instances of institutional resistance through criminal justice systems and proceedings. Perpetrator and faith-based community resistance is represented through the conversations that unfold in *Silent Beauty*, López's confrontation with her grandfather over the phone, and the inclusion of police interview audio – both instances in which he denied the abuse and questioned López's credibility and memory recall. The failure to charge and convict the grandfather is depicted, highlighting the

institutional resistance López faced. Institutional resistance is predominantly represented in *Groomed*, as van de Pas' case is dropped by authorities, compelling her to carry out her own investigations in the pursuit of gathering the required evidence to charge her abuser. Familial resistance is represented in instances where the silence around intergenerational abuse has been broken, which is represented aesthetically in *Relative*, and touched on briefly in *Silent Beauty* in relation to the response of family members outside of the film. Arcabasso Smith uses editing techniques like face blurring, reading an interview transcript verbatim, or using the audio recording of a relative who did not want to be visibly identifiable – all visual indicators of resistance, contrasting the found footage, direct cinema style of *Relative*. Furthermore, the use of observational filming of the negotiation of truths across generations of women during the 'great aunts scene' and Nana's empathy, seemingly unaware of being recorded, call into question her performativity and stoic persona, ultimately communicating the discourse that resistance (and empathy) in response to breaking the silence is 'relative' to being perceived.

5.10.3 Blame and Shame

Humphrey represents the subjective state of mind of shame, experienced both as a child and as an adult survivor. Shame experienced as a child victim is represented through the use of shame signals in the body language of the girl depicted in the bathtub scene, and in the whimsical animations of the girl and dandelions. Shame is always present because it is embodied in the girl's gestures, poses, and movements.

van de Pas uses evidentiary editing to synthesise accounts from survivors, herself, experts, and a convicted child sex offender. The methodical ways that child sex offenders typically operate are irrefutably exposed, shifting survivor blame and shame onto abusers. The reenactment of traumatic memory establishes a sense of undeniability, exposing the vulnerability of children and the risk of them being groomed by those they trust.

Arcabasso Smith applies a parallel editing technique, allowing viewers to process conversations and resistance experienced *with* her, alongside the therapist. This technique recontextualises home videos, exposing the prevalence of abuse and violence towards the women and girls within their Italian American family. Both aspects of *Relative* reflect the 'hidden in plain sight' and 'it's all relative' discourses, contributing to the shifting of blame and shame onto perpetrators, and (while not excusing any kind of complacency) grappling with revelations about how the women have been victims for generations. López shifts blame

and shame onto her grandfather by reclaiming the family archive and utilising it within *Silent Beauty*, through exposing her grandfather's denial and his attempt to silence her, and by revealing his full identity as the film ends.

5.10.4 Hope and Healing Justice

The documentaries all represent the discourse that there is a meaningful life to be lived and joy to be discovered, despite the trauma and pain – countering a deficit-based understanding of what it means to survive abuse. Reflecting this are the displays of empathy and compassion between Arcabasso Smith and the women in her family. Nana's gifting of the archive to Arcabasso Smith, and the participation of her mother, great aunts, and family members, are acts of compassion, understanding, and hope; all courageous enough to participate, despite stigma and shame. This interpretation applies to other survivor-participants and relatives in *Silent Beauty*, *Dandelions*, and *Groomed*; their presence also acts of compassion and understanding. López's intricate soundscape and poetic montages in *Silent Beauty* establish a sense of childlike wonder. The inclusion of children informs this sense of wonder, their presence invoking a hopeful mood. The ocean, as a mode of cultural memory, serves as a symbol of hope and familial healing. Taken together, these representations reflect the discourse of 'breaking the cycle' to give survivors and future generations a better opportunity to flourish. This discourse is also represented in *Groomed* and *Relative*, as both survivor-filmmakers conclude their documentaries by announcing the birth of their children. Finally, Humphrey's use of animation may be interpreted as hopeful, allowing her to give voice to her inner-child, juxtaposing the playful with the traumatic.

The interpretations and analyses are built upon and discussed further in what follows in chapter six and chapter seven.

Chapter Six: Survivor-filmmaker Experiences (Production Findings)

6.1 Introduction

Chapter six identifies and discusses four themes that reflect the most significant experiences of survivor-filmmakers: striving to therapeutically impact survivors; experiencing survivorship; re/processing; and navigating and responding to distress, triggers and ethics.

The themes pertain to how the survivor-filmmakers' wellbeing has been impacted by the construction and dissemination of their autobiographical documentaries, and what aspect(s) of their creative filmmaking processes have informed wellbeing outcomes. As it will become clear, the themes interconnect and inform one another, and shame is consistently highlighted, indicating its underlying significance across themes. Specifically, the potential challenging of shame. This interpretation is of significance when understanding the potential therapeutic function of autobiographical documentary filmmaking for child abuse survivors, given the centrality of experiencing shame, constantly reinforced for abuse survivors through victim-blaming culture.

The underlying autobiographical documentary affordances that have mediated wellbeing outcomes are exposed, revealing how the autobiographical documentary filmmaking process can function as a therapeutic toolbox for survivor-filmmakers.

Additionally, the findings described in this chapter begin to reveal the “multidimensionality of impact” (Nash & Corner, 2016, p. 4) that documentaries can cultivate (as introduced in section 1.3). The findings provide insights about the change goals of the survivor-filmmakers (to help survivors challenge shame), and their change targets (child abuse survivors, including viewers, participants, creatives, and family members) versus whom they perceive to have been impacted and how.

6.2 Striving for and Achieving Therapeutic Impact

A common spiritual thread identified amongst the survivor-filmmaker accounts points to the therapeutic value of autobiographical documentary filmmaking for survivor-filmmakers: a desire to therapeutically impact other survivors (including survivor-viewers, and survivor-participants).

This finding aligns with Herman's (2015) suggestion that survivors may engage in altruistic behaviours to cultivate newfound meaning in relation to their abuse experiences, and cultivate social change:

A significant minority [of survivors] as a result of the trauma, recognise a political or religious dimension in their misfortune and discover that they can transform the meaning of their personal tragedy by making it the basis for social action. While there is no way to compensate for an atrocity, there is a way to transcend it, by making it a gift to others. The trauma is redeemed only when it becomes the source of a survivor mission (p. 207)

Herman (2015) adds, "In taking care of others, survivors feel recognised, loved, and cared for themselves" (p. 209). Herman's understandings of healing recovery are grounded in over twenty years of research and therapeutic practice with survivors of sexual abuse and family harm. As Herman notes in *Trauma and Recovery*, "the testimony of survivors is at the heart of the book" (2015, p. 4). Consequently, Herman's findings are of significance to understanding wellbeing outcomes for survivors who engage with autobiographical documentaries about child abuse; and why correlations between Herman's understandings and the survivor-filmmakers' experiences are highlighted.

Herman's understanding that survivors may engage in altruistic behaviours to help other survivors and experience healing is supported by other survivor-based studies (Sheridan & Carr, 2020; Delker et al., 2019; D'Amore et al., 2018; Stidham et al., 2012). Most relevant to the survivor-filmmakers, Monique van der Westhuizen et al. (2023) found that helping other survivors can enable women child sexual abuse survivors to "feel stronger for going through the traumatic experience and recognise that it gave them meaning in life" (p. 1377). As it becomes clear, for the survivor-filmmakers such meaning pertains to sharing experiences of abuse and healing to break the silence and stigma surrounding abuse, and ultimately challenge shame.

6.2.1 Desire to Therapeutically Impact Survivors

The survivor-filmmakers' motivation to therapeutically impact other survivors was revealed in the context of asking: why they created their documentaries; who their target audiences are, who the actual audiences have been; and why they used documentary film to autobiographically represent their experiences of child abuse and healing.

Humphrey (*Dandelions*) revealed her primary motivation has been to help survivors, and that:

My other motivation was having people say to me that I was helping them without them having to go out and face their issues...I showed it [the early version trailer] to the class, and the response just blew me away...And he [a student] came up to me and he said, "I'd never fucking forgive my father! I'd never forgive my father if he did that to me. I don't know how you do it"...And one person just came up to me and said, "I don't know how.." you know? He couldn't even speak, and it's been a lot of that all the way through. So, the motivation is, the more I realised I could actually *help* other people.. the better. But at the same time, it puts a lot of pressure on you, and I sometimes feel very overwhelmed, and it's not easy to have that

Humphrey's commitment to helping other Survivors, despite the overwhelming nature of doing so, was further revealed when discussing the critique screenings of *Dandelions*, acknowledging the audience's role in determining impact:

...any feedback is good feedback. You just got to accept it, and at the end of the day, it's the audience's opinion of it that really matters, if you really want it to be a piece that can help other people

Humphrey's responses reflect the importance of gauging reception of survivor-viewers (and general audiences) to shape the representations and impacts, and how documentary representations of abuse and healing can encourage introspection in ways that are less confronting or triggering for the survivor-viewers: "...I was helping them without them having to go out and face their issues..."

Arcabasso Smith (*Relative*) revealed that:

I had to give voice to the problem [of resistance]...there was no quitting, or not finishing, even with all the resistance around the people who didn't want to be in it or were in it to an extent. And it's just like, that *was* the problem...It's a very *real* perspective and experience of that resistance, and the fear and shame that people have around this conversation. That was the driving factor. It had to be told because that was the whole problem, you know? Not talking about it

Arcabasso Smith continued, speaking to the centrality of experiencing shame following abuse, commonly experienced by survivors (discussed in section 2.5.2), and the

consequential need for autobiographical representations of abuse and healing to challenge victim-blaming culture, internalised victim-blaming, and shame:

My goal is to just get it into people's lives that need, just a reminder or just awareness around the fact that there are so many people that, while we're all in different places that have had different experiences, there's a community of this sort of shame, fear, etcetera, around especially sexual abuse. Yeah, because it does touch on physical also...and emotional, there's some gaslighting in there too. But I think it's about knowing that you're not alone

In the context of asking what drew her to documentary film to tell her and her family's story, López revealed:

I went to the New Orleans Film Festival and was just very inspired by a lot of films and the idea of filmmaking, as well as the community that I felt there...And so I saw how the family story had grown, and I saw how a lot of people, mostly my friends, responded to the story and the idea. And when I was at that festival, I decided that I wanted to be a filmmaker and that I wanted to share the story because I knew that it would reach people...And it was also a way to teach my niece and nephews [about] what the family was going through, so we would talk to them about it throughout the filmmaking process

Upon asking if López's motivation to educate her niece and nephews was constant, she added:

...that motivation was constant, but it was also for the rest of the family and to encourage the rest of the family to begin to talk about these things and to hopefully help them to see that we don't have to carry the shame and that we can be proud of our family

The above responses reflect the understanding that documentaries possess significant reach and impact potential. This affordance has thus positioned documentary as an ideal tool for combatting stigma, raising awareness, educating viewers about the realities of abuse, trauma, and healing – and thus for challenging shame to cultivate hope and empowerment for survivors.

Such hope is reflected in the discourses represented in the documentaries which challenge victim-blaming narratives and attitudes, as demonstrated throughout chapter six: there is a

life worth living following traumatic experiences; the familial cycle of abuse can be disrupted through breaking the silence; and future generations may be somewhat safeguarded from experiencing the shame and fear that silence and stigma uphold.

These findings also suggest the potential of utilising the autobiographical documentary filmmaking process as a healing tool to reveal and disrupt generational or family abuse related trauma, resistance, and shame. The documentaries may function as tangible records for family members, including children – like López’s niece and nephews – who need to process traumatic family history, and are thus vulnerable to experiencing shame, now or as adults: “we don’t have to carry the shame.”

6.2.2 Authenticity and Therapeutic Impact

Two survivor-filmmakers revealed why they perceive autobiographical documentary film/making, and the modes of representation it offers, as ideal for achieving therapeutic impact for survivors: It affords authenticity, or truthful, realistic representations of child abuse and healing experiences. In addition to their use of “*real* perspective” in their above response, Arcabasso Smith articulated:

...that [documentary] was the outlet that I was interested in directing...I was really interested in just truth storytelling and truth...And then it was about, well, what is the best way to tell *this* story?...Do I communicate the dreams? Do I incorporate that? Do I put a voice-over? How do I tell the process of.. what it’s like as a survivor to go through this experience? How do I express that process in the best way? And it felt like that medium and through the film and the way I did it was the best way I found that I could

Similarly, van de Pas revealed that she finds documentaries:

...so much more *pure* than fiction...with documentary film you go out on a day of shooting and think you’re going to shoot X Y and Z, and then something *completely* different happens, and you – the whole story takes a turn...for me it’s just a very *real* way to inspire and to show. And I also think with film about this topic in particular, we very rarely see people up *close* go through an experience like this, right? So you can put it in a fictional film, but then still there will be distance, and people won’t identify themselves as much as when it’s a real person that they can identify with, [who] goes through exactly what they’re feeling...I think too with trauma, you never

know when something is going to happen, right? You never know, the trigger is always there waiting for you in the background. So, I think documentary is the best way to have a camera ready very quickly, and be able to capture that in a very pure form, other than trying to re-create

Here, van de Pas perceives the therapeutic impact on survivor-viewers to be informed and mediated by the authenticity of their representations, highlighting the desire survivors often possess to see themselves and their responses to trauma in the lives of others – or, as Arcabasso Smith put it, “knowing you’re not alone.” This understanding is supported by López, as she approached the project with the belief that “this has to be a story that comes from *me*. It can’t feel forced, because I think other survivors will see right through that.” This response also speaks to how the autobiographical aspect of the filmmaking process, the sense of intimacy it requires, and proximity to the ‘survivor experience’ that it affords, is what may resonate with survivor-viewers.

6.2.2.1 Affordances and Authenticity

The above responses begin to underscore what technological affordances and representational strategies have impacted the survivor-filmmakers’ ability to authentically represent their experiences. van de Pas’ response suggests that the accessibility of film equipment to document what she identified in the interview as her “evolution,” and the narrative freedom afforded by creating documentaries as a situation unfolds and/or as a person evolves, has been central to truthfully capturing and representing her experiences as she investigates and processes her past experiences of abuse. Such accessibility is also crucial for Arcabasso Smith to capture and represent the experiences of resistance as they unfold:

I needed to be emotionally in a place that I was able to have these conversations, and sometimes I didn’t know when that would happen, and sometimes I would wake up and feel like, “alright, let me just go out there today” and I would bring the camera myself. So, I was just riding the energy of what I was capable of

For Arcabasso Smith, the observational, direct-cinema stylisation of *Relative*, discussed in sections 5.4.1 and 5.5, has been integral to creating *Relative*. This interpretation is further supported by Arcabasso Smith’s interview responses upon asking about filming the ‘great aunt’ scene, where she revealed how she managed filming while actively listening to and contributing to the conversations off screen:

...I had the camera on the sticks, and that was very hard because she started opening up to me and you could see she's at the edge of the frame...She was in such an intimate moment, I didn't want to interrupt her to adjust the camera, felt so [cold]. So I let it be, and then the Lactaid milk was in front of Nana for a while. It was kind of part of the reality, the realness of just sharing whatever

The substance of the interaction took precedence, as the style was not a high enough priority to warrant intervening to adjust the shot. Additionally, when filming the initial conversation with Nana, she explained that:

Obviously having an intimate conversation like that with cameras around can be difficult, so [it's] very much understandable [that Nana looked at the camera]. We wanted to leave that in the film because I think there's just a realness to it...it was just about me trying to make her feel comfortable and, I think by the end of some of the conversations, people would open up because they're not used to the camera being there

This speaks to the power of the camera's presence or perception of its presence, mediating the performance of those being recorded – as interpreted in section 5.5.1, where Nana appears stoic when aware of the camera, and empathetic when she seemingly forgets about it.

In contrast to the observational stylisation, when discussing the impact of the resistance experienced, Arcabasso Smith revealed:

But the way through it, [the resistance] I found, was to keep trying to figure out ways to tell the story with the reality that I was dealing with...whether that's blurring a face or not framing one in or using their story and not their actual words and audio...those things allowed me.. I was able to tell, I think, an impactful story

This suggests Arcabasso Smith's use of observational filming, and the subversion of the observational mode through the use of blurring, afforded her the ability to authentically represent the "reality" she was "dealing with." As interpreted in section 5.5, the blurring of the great aunt's face functions as a symbol of resistance. But as Arcabasso Smith revealed, the anonymity it affords also enabled her to honour and amplify the voices of the women who participated, while respecting the boundaries of the aunt who withdrew consent.

van de Pas directly referenced the use of reenactment to represent her traumatic memories, as interpreted in section 5.3. Upon asking about the inclusion of the scene, van de Pas revealed:

...we had a little bit of a feeling that something was missing around really seeing a young girl with an adult man...we felt like it would be nice to go back to that moment, but in a way that's not tacky...so we wanted to keep it very very simple...but I do think especially with the dream in the beginning of the film, I think it adds a lot to just get you in the mindset

van de Pas included the reenactment to enhance the truth value of *Groomed*, bringing viewers 'closer' to experiencing traumatic memory – or what it is like to survive grooming. The response also emphasises the potential for the scene to evoke an 'affective truth' of sorts for viewers, given the sensory aspects of traumatic memory and triggers are represented through jump cuts and heightened sound; as discussed in section 5.3. Substantiating this, van de Pas referenced the sensory aspect of the film medium, highlighting its affective potential:

...if we look at film broadly, because it touches so many senses, right? You're looking at something, you're listening – all these things happen at the same time. I think it influences and inspires more than reading a book, that's what – mentally, what it does for me

Ultimately, Arcabasso Smith's and van de Pas' responses reveal how authentic or truthful representations of the survivor experience are dependent on technological affordances and representational strategies across documentary modes.

6.2.3 Perceptions of Achieving Therapeutic Impact

The survivor-filmmakers revealed evidence of therapeutically impacting survivors to varying degrees.

Arcabasso Smith articulated that "It has been incredible to have the ability to have conversations about the film after it screens, so that's very meaningful." Furthermore, despite it being an emotionally taxing process:

At least this process of making the film helps other people. It's like a window into what it was like for me, which then hopefully will inspire and help other people. There's a quote that I love: 'Find your gift and give it away.' And that was a gift I felt I could give

Here, Arcabasso Smith suggests that the impact on survivors has therapeutically impacted her by attaching meaning or value to the experience of creating *Relative*, and thus her experiences of abuse and familial resistance.

Given *Groomed* had been released for over one year, van de Pas offered much more substantial evidence of achieving therapeutic impact – upon survivor-viewers and herself in return. In response to asking how audiences have reacted and how her wellbeing has been impacted, van de Pas revealed:

The amount of messages is *crazy*, like there are so many I've lost count. Thousands of emails and Instagram messages. And people saying that they shared their story for the first time after watching the film with someone that they cared about, or people having reported their abusers. I can't even *count* the number of reports that people have done. It just feels.. *powerful* to be able to do that versus just putting in, well, how I felt before was that I was sitting in the *powerlessness* all the time. And I couldn't get out

Regarding such therapeutic impact, van de Pas added:

...it's actually Jim Tanner [an expert on grooming] who's in the film...He *very* early on said 'you think you're making this movie as a prevention. It's not. It's a *healing* tool.' And then 'yes, there'll be a little bit of prevention that people will know what to look for and da da. It's *healing*.' And I *definitely* notice that, if I look at the messages that I get, it's *so* many people who recognise their own story in the film, and somehow were going to do something differently or think differently about it...I always thought, we just need to tell the world what grooming is and then – not that it would end – but we can make a difference there, and I think we *have*. It's how the audience has [been] shaped that is different than what I thought

Guardians who view *Groomed* may develop understandings about the methodical way in which grooming is carried out and become more susceptible to identifying predators – meaning that the child may be somewhat more safeguarded than before.

However, Tanner's speculation that *Groomed* would function as a 'healing tool' rather than a preventative tool helps orient the broader impact potential of autobiographical documentaries about abuse. Tanner suggests that the impact potential lies with *healing survivors* through challenging shame, not in *preventing abuse*. I agree, as there is significant danger in

sustaining the idea that raising awareness is an effective strategy to prevent abusers from perpetrating. Like other discourses of deflection, this discourse positions survivors, and everyone but perpetrators, as responsible for reducing rates of abuse, disregarding the agency and control that abusers possess, allowing them to evade accountability. Caution is also required when considering the extent to which we can identify children at risk, identify abusers, and ‘map’ out a typology of their behaviour, like the grooming stages that van de Pas represents.

van de Pas also perceives that *Groomed* has indirectly helped survivors who report to police, by unexpectedly educating and changing the approaches of police and professionals working with survivors:

...what I found out is actually there’s a whole *third* community of law enforcement and professionals that work in this field, which I’d never thought about, but that ended up being a huge part of my work after *Groomed* had finished...And what I realised when I told my story is a lot of people haven’t been trained on this in the way that we would expect them to be, or I always feel like I have this trust in the system, that they know everything they need to know and they get trained in the right way. And then you realise, ‘oh, just kidding, that’s not really happening.’

But too, what I realised is every person that you can impact while you’re on that stage has an impact that’s much broader than just that person, right? If I have one law enforcement professional, they’re going to interview, say, 1000 people in their careers, and if they tell you – which happened a few times – they would say, ‘I’ll never conduct an interview the same way after having heard your story.’ It just feels *massive*, you know, it feels *so* beautiful. Because I know how hard it is if you don’t get validated in your first interview when you report. And so, I think that for me was a whole new world that I didn’t expect that was very healing in a way, because I felt like practically that I was doing something that would help other people more skilled than I otherwise could. It’s therapeutic in a way, right? For me, that is the most therapeutic part, doing something good through this

van de Pas’ perceived therapeutic impact of *Groomed* upon survivor-viewers and the indirect impact upon survivors by prompting professionals to work more sensitively suggests that documentaries, post-release, may function as entities of power and influence, taking on a life

of their own as they circulate throughout contemporary culture. As documentary theorist Ilona Hongisto (2015) argues:

Documentaries depict individual lives, political events, and social hierarchies that keep acting and transforming in myriad connections even after films come to an end. In documentary cinema ‘the end’ is merely a threshold (p. 11)

The survivor-filmmakers’ responses exemplify how their autobiographical documentaries have taken on a life of their own, beyond what they intended or foresaw as possible. van de Pas and López expressed their understanding that *Groomed* and *Silent Beauty* have been utilised as tools within secondary school and tertiary education settings, López adding that *Silent Beauty* is being used as a resource within a course about gender-based violence and abuse. The ongoing impact and life force of documentaries was discussed by van de pas: “It’s just really nice for it to have gone around and live its life, and you’re just there supporting it. That’s the beautiful thing about film, right? It never dies.”

6.3 Experiencing Survivorship

A wellbeing outcome, ‘survivorship’ refers to the experience of *connection* between survivors of abuse. Such connection is facilitated by the disclosure and/or discussions of shared experiences of abuse and trauma. By ‘connection’, I refer to Brown’s (2020) definition of connection as “the energy that exists between people when they feel seen, heard, and valued; when they can give and receive without judgement; and when they derive sustenance and strength from the relationship” (p. 29). As Brown (2021) suggests, empathic communication is vital to establishing and sustaining meaningful connection.

Experiences of survivorship can be vital for the flourishing of survivors’ wellbeing and healing. ‘Flourishing’ means “a relative attainment of a state in which all aspects of a person’s life are good, including the context in which that person lives” (Lee, as cited in Lense, 2023, para. 5). This is because, as Herman (2015) argues, trauma survivors’ desire and ability to connect with others is often detrimentally impacted. Connection is central to the human experience. As psychotherapist Judith Jordan argues, seeking and experiencing “connection in which growth is a priority is the core motivation in people’s lives” (as cited in Brown, 2021, p. 169). Thus, humans live to connect, and experiencing connection is often perceived as the ‘meaning’ or ‘essence’ of existing on earth: “in the absence of these experiences, there is always suffering” (Brown, 2021, p. 159).

While the four survivor-filmmakers experienced survivorship, the people they connected with (relatives who are survivors, survivor-participants, survivor-viewers, and survivor-creatives) and the means by which those connections occurred varied across experiences.

6.3.1 López and Survivor-creative, Bron Moyi

After pitching *Silent Beauty* at an ‘Emerging Voices’ filmmaking programme, López revealed that another programme participant, Bron Moyi, approached her and shared that “this [child sexual abuse] happened to him and he never told anyone, he’d never heard anyone talk about it as openly as I did and...he just felt inspired.” López and Moyi, whom she described as “a very sensitive, gentle, spiritual person...became really close friends.” Eventually, López asked Moyi to take on the role of director of photography:

I knew he was good [at being a director of photography], but it wasn’t about that for me. It was the fact that...I had a feeling that he would understand, more than most people...And so, it was sort of like two survivors going on this journey together to document this experience. And it was very special because...I could talk to somebody that understood...It made it just a little more special, and it felt safe

This extract, combined with the above quotes, suggests that López and Moyi experienced survivorship. López “felt safe” with Moyi throughout the years that he was part of the documentary “journey,” while Moyi “felt inspired” to share his story – both examples of how ‘sustenance’ was derived from their relationship. López’s experience of feeling “safe” and understood was afforded by the reciprocal sharing and discussion of child sexual abuse experiences (the giving and receiving of stories, without judgement). Their shared identity as “survivors” and Moyi’s “sensitive, gentle and spiritual” demeanour have helped cultivate the sense of understanding that López feels exists between them, akin to feeling seen, heard, and valued. Additionally, for Moyi, gaining inspiration suggests that he may have felt seen, heard, and valued after hearing López’s pitch (receiving López’s story without judgement).

López used “safe” at the end of her response, as if to offer a summary of everything that she has articulated about her relationship with Moyi; it almost seems as though López is coming to that conclusion herself as she responds to my question. This places emphasis on the importance of safety within López’s relationships with other creatives. The importance López places on safety is expected, given that establishing, building and maintaining a sense of safety is crucial for the recovery of many trauma survivors, as any sense of safety one feels

tends to be severely impacted by traumatic experiences (Lebowitz et al., 1993; Herman, 2022). Without some sense of safety, healing and traumatic growth will likely be inhibited.

6.3.1.1 Survivorship Begets Survivorship

Witnessing and recording the conversations between López and her mother Sandra – where the impacts of abuse upon the family were shared, actively listened to, and empathically responded to by one another – was a powerful motivator for Moyi, prompting him to disclose his experiences of child abuse with his mother and grandmother:

...he [Moyi] actually opened up to his mother, disclosed to his mother after filming with my Mum. And so this project really encouraged his healing, and he started his own recovery, and he started a dialogue with his mother and his grandmother about how they were also survivors, and he'd never known that

Here, López suggests that Moyi's experience of survivorship encouraged Moyi to cultivate survivorship with his mother and grandmother. Thus, the survivorship between Moyi and López facilitated the cultivation of survivorship among Moyi, his mother, and his grandmother. This finding is supported by Brown (2021; 2020), who argues that experiencing connection begets other experiences of connection.

In response to Moyi's newfound pride and the cultivation of survivorship within his relationships with his mother and grandmother, López also derived sustenance: "And so that made me just so incredibly happy for him and his mother and grandmother." The joy that López felt likely would have strengthened her relationship with Moyi, bringing her experience of survivorship 'full circle.' The happiness gained from helping Moyi begin their healing journey (and by proxy helping his mother and grandmother) exemplifies how helping other survivors can be therapeutic for survivor-filmmakers; an example of how experiences of 'survivorship' interrelates and overlaps with 'striving for and achieving healing impact.'

6.3.2 Arcabasso Smith and *Relative*'s Survivor-participants

Arcabasso Smith experienced survivorship with the women in her family who were participants. This was revealed upon asking about the impacts of working with her therapist while creating *Relative*:

And, now that I'm on the other side of it, because I had to process a lot of that, I see so much of that as how they are able and haven't been able to process their own

experiences, you know? And I really am much more compassionate.. because maybe they didn't have the tools the way I did. So, I'm very much more accepting of, everybody is in a different place of healing and has gone through a different process, and I definitely have a lot more compassion. I'm seeing it all through a lens [of compassion] now I'm on the other side of it...I have found through this process that, often, the sort of actions or lack of action is from...this inability to *see* because they've had their own experiences of trauma. And I feel like people that are so quick to react or protect or to call it out and be like 'what is this insanity?' or you know, just to call out the reality of the severity...So there's almost a paralysis of being in the system. That said, it continues because of people that stay silent. And I had a lot of that anger, and it got me here, I think it got me on the other side of it. So, I don't know...it all depends on where you are in your process, but I wouldn't be quick to tell anybody that they should let go of some of the anger. Because you're not seeing that necessarily on the film, but that's what got me through

While Arcabasso Smith did not directly refer to her relationships with her relatives, the acknowledgment that she has become "more compassionate" suggests that survivorship has been experienced between herself and the women relatives. I offer this interpretation based on the understanding that to have and practice compassion for others is to practice empathy and understanding, and to offer judgement-free support (which are required to experience connection).

Regarding wellbeing impacts, also of significance is Arcabasso Smith's acknowledgement that the anger she felt propelled her through the process of creating *Relative*: "what got me through." This highlights how anger can be a powerful motivator for acting on injustice, and suggests that the filmmaking process has provided Arcabasso Smith with an opportunity to feel and re/process anger regarding their experiences of abuse and resistance.

Potentially affording Arcabasso Smith's re/processing of anger is their perceived impact potential of creating and disseminating *Relative*, and the evocative potential of the camera. Specifically, how the camera, and its perceived absence and presence, has functioned as the mechanism in which conversations have been able to take place – a mechanism for challenging silence, familial resistance, and thus the development of compassion and strengthening of relationships:

But I think the camera does provide a bit of a platform or a microphone to a certain extent...like an offering up of just the space to kind of talk about things that you've never talked about. So, it does weird things for people. But for the most part, I think it was successful...I don't think anyone really shut down

6.3.3 van de Pas and *Groomed's* Survivor-participants

van de Pas revealed that she had “never really talked to people in that much depth about the issue” of grooming until she interviewed and filmed adult survivors. Meeting survivors, listening to, and discussing their experiences of grooming “had a *major* impact” on van de Pas’ perception of her abuse experience: “the similarities [of our experiences] were *absolutely* mind-blowing, and I think it helped.” One instance of post-interview debriefing with survivors was particularly useful in illuminating these similarities:

...she, at some point, was like, ‘do you guys realise that you *all* tell each other what you should be telling yourself? Like your stories are the same, but you can see it in each other, but you can’t see it in your own stories’

van de Pas continued that:

...it was such an important moment for me, that really gave me a little bit of clarity. If I look at my own progress...it’s just that eye opener of, ‘okay, I think your story’s wrong, and I’m realising that my story’s exactly the same, so why would it be different?’

van de Pas gained “clarity” (a form of sustenance) about being groomed, as she realised the similarities between other survivors’ experiences and her own. Identifying similarities suggests that van de Pas may have felt seen and heard when and/or after receiving the survivors’ stories. These realisations were afforded by the reciprocal sharing and discussion of child sexual abuse experiences, without judgement.

The above extracts suggest that the clarity van de Pas gained was the realisation that the abuser had psychologically conditioned her to believe that her circumstances were exceptional, unique and special; a true divergence from the stories of other girls who have experienced ‘real’ grooming and abuse. In other words, van de Pas was realising the true extent to which she had been groomed and how that grooming had shaped her understanding of her own experience and the experiences of other survivors. This interpretation of van de

Pas' experience of clarity is reinforced by the following extract, where van de Pas explicitly referred to the grooming process and connected it to her limiting beliefs about herself and abuse experiences:

...because of the grooming that happens in your brain, you look at your own story very *differently* to how you look at other people's stories. So you think everybody else's story makes sense and 'of course that's wrong' and 'of course it's not their fault' and 'of course the perpetrator is at fault'. But then you look at your own story, and 'the power is different, it's not black and white' and 'I feel guilty' and 'I have all these emotions'

Like van de Pas, grooming survivors may experience contradictory feelings about the person who groomed and abused them and have skewed perceptions about their abuse experiences due to the psychological and emotional conditioning that occurs. Perpetrators of child sexual abuse often seek to gain a child's trust and confidence before they begin to abuse the child (van Dam, 2001). Consequently, the child is more likely to acquiesce to the abuse and not recognise that what is happening to them constitutes abuse. Additionally, offenders tend to place responsibility on the child for the occurrence of the abuse (Leberg, 1997; van Dam, 2001; Warner, 2000; as cited in Craven et al., 2006), meaning that the child may perceive the abuse as something they should enjoy and want to take part in. So, the child will likely not raise concerns, and the abuse can continue to go on undetected. Furthermore, if a child gains awareness that they are being abused and considers reporting or disclosing the abuse, the child may feel confusion, doubt, guilt and shame about reporting and potentially hurting the abuser. This is how grooming can "entrap" (Howitt, 1995, p. 176) child victims within their relationship with the abuser.

As van de Pas demonstrates in the extract above, the confusing, conflicting emotions and beliefs can follow the child into adulthood – through such conditioning, and the broader culture of victim-blaming that reinforces shame. Seemingly, there was a disconnect for van de Pas, as she self-blamed but refrained from victim-blaming the survivor-participants, who were also subjected to grooming. The experiences of survivorship have helped bridge this disconnection for van de Pas, magnifying contradictions between one's understandings of their abuse experiences and identity, and how they perceive other survivors.

6.4 Re/processing

6.4.1 Autobiographical Documentary Filmmaking as “Exposure Therapy”

Upon asking if there were technological aspects of documentary filmmaking that were particularly difficult to engage with, van de Pas revealed that putting herself in front of the camera was “terrifying,” but that:

...over time it gets easier and easier because your barriers lower...every time you cross one of those barriers, it gets easier. Every time you cross one, it gets just a little lower. So, by the time the film was released it was still absolutely terrifying, but I had crossed so many barriers at that point that it felt relatively doable

This response demonstrates that the autobiographical documentary filmmaking process allowed van de Pas to re/process, as her fear responses to her triggers and trauma were reduced. This interpretation aligns with van de Pas’ interpretation of the therapeutic impact of creating *Groomed* throughout the interview. van de Pas referred to her experience – as put by her husband – as “the most expensive ‘exposure therapy’ we could have done. Which I think is a very good summary of what it is.”

“Exposure therapy” is a fitting way to interpret the therapeutic value of the autobiographical filmmaking process for survivor-filmmakers. This interpretation reflects how survivor-filmmakers are afforded the expositional and investigative space to, gradually over time, desensitise themselves from triggers and traumatic memories (or reduce intensity and frequency of trauma responses). Autobiography requires (and somewhat forces) introspection and the confrontation of experiences and aspects of oneself that may otherwise remain unacknowledged and avoided.

Conceptualising the documentary filmmaking process as exposure therapy suggests that the time intensive process of the practice affords this therapeutic function. The survivor-filmmakers created their documentaries over a substantial amount of time. *Relative* took over eleven years to complete, *Groomed* and *Silent Beauty* took multiple years, and *Dandelions* has been in the works for over twelve years. This finding substantiates Kerem (2023), who assumes that for child sexual abuse survivors, “the lengthy film creation process slowly loosens the director’s grip on the trauma, developing a readiness for recovery” (p. 176).

The ability for the filmmaking process to function as ‘exposure therapy’ was further realised in the context of asking van de Pas’ how her wellbeing has been impacted overall, where she describes herself at the beginning of *Groomed* as a “character,” reflecting the evolution of her identity and reprocessing of the groomed mind to the ungroomed:

Massively.. I think you see it in the film, too, right? If I watch the first 30 minutes of the film I’m like, “who’s this person?” I don’t feel like I *identify* anymore with the character. And I think that’s partly the ‘exposure therapy’ as my husband calls is, but also just the *depth* of understanding that I got over time, you know, the *mirror* that the other survivors were for me, the other victim coming out which was *huge* for me and of course you don’t want there to be other survivors out there, but then, if they do exist, it’s *helpful* for your own process cause you realise that it wasn’t about me, and it wasn’t so.. innocent as I thought. And it’s much easier to be angry for them than to be angry for yourself. So, there were a lot of emotions unlocked when that happened. So, I think the combination of *all* those different parts of it definitely makes me feel *very* different than I did before. And it’s nice because I feel like it’s never going to *not* be there, right? It’s always going to be a part of my past, but it feels very.. like it’s in a little box and it’s there and I’m not afraid of it and I’m trying to use it as something *positive* and give something positive into the world with it, which I think worked!

The response highlights how the filmmaking process gave van de Pas the landscape to compartmentalise and organise aspects of her experiences and traumatic memory into a cohesive and empowering narrative. The completed documentary functions as a point of reference for van de Pas to identify and acknowledge their evolution in identity, trauma responses (like fear and shame), and the mechanisms in which such growth occurred; through the exposure therapy afforded by the process, particularly the exposure to the survivor-participants and the survivorship experienced.

6.4.1.1 Visionary Control and Exposure Therapy

A factor that influenced van de Pas’ therapeutic experience was having visionary control over the filmmaking process and *Groomed*’s narrative structure. This was revealed when discussing how the filmmaking process functioned as exposure therapy for van de Pas:

I think if you start, you think everything through and “Oh my God. It’s going to go from this point of how I’m feeling, to relief in my story being out in the world,” it’s

way too much, it's *way* too overwhelming. So, for me it was really just taking it step by step and knowing I have the control over to just cut it out altogether, if I wanted to. That made it much easier

This interpretation is further reflected in van de Pas' revelation that possessing visionary control persuaded her to step in *front* of the camera to document the transformation that she began to undergo. This was revealed upon asking van de Pas about the development of the storyline, aware that she originally sought to explore other sexual abuse survivors' experiences. This was until van de Pas came across 'grooming' when researching to find an "angle" for the narrative:

I started noticing a lot of change in how I looked at my own experience and my own past, and it was my producer saying, 'you are changing so much and how you're talking about what happened and your understanding of it. What about we turn on the camera, and start covering your experience?' And I thought, 'are you absolutely out of your mind?! There's no way!' And then again, my husband was like, 'well, let's think about this, it's always most interesting in the documentary when there's.. *evolution* in your character.' And that's *really* hard to find, really hard to find somebody who *also* just uncovered the topic of grooming and the effect it has on them, right? Like it's something new. And so he said, 'you're the director, so cut it out if you don't like it, and you can just *start*' and that gave me a lot of comfort and that's how we started...And that's also when we found out that, when we were talking to investors...It was *very* obvious that that's what people wanted

van de Pas' insights reveal how possessing visionary control cultivates a baseline of safety and security for survivor-filmmakers. This allows survivor-filmmakers to develop an autobiographical storyline and simultaneously confront and investigate their abuse experiences and identity, at a pace or intensity of exposure to potential triggers that feels manageable – or that they can disengage from, where distress may become overwhelming. Control includes managing production timelines and the culture or ethos surrounding the production, extending beyond determining the final cut and narrative construction to how representational strategies may be engaged with.

6.4.1.2 Limitations of Exposure Therapy

The extent to which the filmmaking process helped reduce her fear responses is limited, because the offender remained an intense trigger, so much so that she avoided watching footage of the offender until months after the release. This was divulged when asking van de Pas about her experience of editing and watching the footage:

...the only, like, really, really, really difficult part is the part where my offender is actually being shown. And so there was a safety protocol in the editing building that if the editor was working on that piece of footage...there was a sign on the door that I wasn't allowed to enter the room because I was so afraid of seeing anything...I never actually watched that footage at all, not until we had friends and family come here actually, a few months ago...I think I did like five or six sessions of EMDR with my therapist to try and get through watching those scenes

This is an instance where the 'exposure therapy' that autobiographical documentary filmmaking affords has been limited in managing triggers, requiring the implementation of safety protocols to avoid triggers, and professionally guided therapeutic support to manage her fear response. This is expected, though, as van de Pas was in the process of submitting evidence and awaiting a response from the courts when *Groomed* was released.

Consequently, that aspect of her experience could not be 'boxed up' and processed through filmmaking as other aspects were, including van de Pas' 'groomed' and 'ungroomed minds' – as I discuss below.

6.4.2 Separating the “Groomed Mind”: Survivorship and Reenactment

Another way van de Pas re/processed her experiences was revealed during the interview through her use of the term “groomed mind” within several responses. ‘Groomed mind’ was utilised by van de Pas to summarise the psychological and emotional conditioning she underwent during the grooming process, and the consequential conflicting feelings and perceptions she developed regarding the offender, herself, and her experience of being groomed. This interpretation aligns with and is reflected in section 6.3, where van de pas' experience of survivorship brought “clarity” about this conditioning process, exposing the “*absolutely* mind-blowing” similarities and patterns across experiences. Adopting van de Pas's terminology, experiencing survivorship has helped separate her “groomed mind” from her ‘ungroomed mind’ – or *process* the experiences in ways that magnify the deliberate

methodical process of grooming, placing accountability, blame and shame into the hands of the abuser; here, the words of López echo strongly: “we don’t have to carry the shame.”

van de Pas revealed another similar experience of re/processing when discussing her creation of the reenactment of traumatic memory:

...actually, for me it was a very *powerful* experience because we cast a girl that was really like me at the time in terms of age and shape of her body, her hair and then he was also very similar [to the offender]. So, we cast the people that really looked quite similar to what the real situation was. And it was quite powerful to watch them and to see them because you, again in your ‘groomed mind,’ sometimes it’s so hard to see the reality, and you kind of transpose your current adult self on yourself as a kid, and the way you think about the situation. And then you see them together, and you’re like ‘holy shit, this is so effed up!’...And it was helpful and powerful...And also just seeing them, because they were the same age as I was and he was, and just the two of them was *weird*, like they couldn’t connect on anything! They’re just like, a twelve-year-old girl and a twenty-five-year-old guy. They had nothing to talk about, it was awkward, and it made me realise...what’s normal, right? That’s how it shouldn’t be. Like he completely goes down to the level of a 12-year-old girl...So it was, in a way, a little bit of a therapeutic experience actually to see it. Difficult, but helpful

van de Pas’ response irrevocably reveals that directing the reenactment of her traumatic memories helped her to untangle her ‘groomed mind’ from her ‘ungroomed mind.’ Casting and directing the reenactment in ways that accurately reflected her memories and the physicality of her younger self and the offender, afforded van de Pas the ability to become a compassionate witness of her grooming experiences and own trauma: van de Pas is both distanced from and brought closer to the experiences, and given the opportunity to process as an adult who is developing newfound awareness and understanding. In becoming this compassionate witness, van de Pas retrieves ethical truths about her experience, further severing ties between her groomed and ungroomed mind.

This finding underscores Julian Koch’s (2023) argument that documentary reenactments can be integral in “accessing” epistemic, affective and ethical “truths” in the context of historical trauma (p. 4). The finding extends upon the theory, revealing the therapeutic value of creating reenactments for the autobiographical survivor-filmmaker when representing the traumatic memories of abuse. Furthermore, the finding suggests that casting child actresses to represent

the younger self at the time of the abuse, and adults to represent the abuse perpetrator, may be key to the re/processing of the ‘groomed mind’ and challenging of shame that the process of creating the reenactment can afford survivor-filmmakers.

6.4.3 The Camera as a “Protector”

For Humphrey, watching the footage of her conversations with her family members has been vital to processing the abuse she has experienced, and the conversations themselves, since they involved learning disturbing details about her childhood upon asking questions that have never been asked before:

...the camera was more of a protector for me... There’s a feeling like, when you’re actually there, you’re kind of a ‘fly-on-the-wall.’ Seeing it actually on footage is completely different from actually being there. In fact, I was in so much shock, half the time, most of the time, pretty much *all* the time, that I was disassociating myself quite strongly. And when I sat down and went through it, I saw things that I didn’t see the first time, and it kept happening, no matter how many times I went over it...

I interpret Humphrey’s response to mean that the camera ‘protected’ her by acting as her memory retention when experiencing the traumatic response of dissociation, limiting her ability to retain information and process. In this sense, the camera functions to store traumatic memory, allowing Humphrey to ‘expose’ herself to ‘remember’, and re/process the conversations infinitely and on her terms; another example of how the filmmaking process can function as “exposure therapy.” This finding parallels the experience of Arcabasso Smith, who recorded her therapy sessions to help remember the insights received from her therapist (discussed further in this chapter).

Humphrey underwent a constant transformation of understanding about her family and childhood, and a transformation in her emotional responses to triggers:

I can watch it [the footage] and not cry. But, when I first started, I cried all the time – *all* the time... Once you get neutral with it, which I think does take time and it’s very, very subjective within itself, I found that I... could actually cut it, well ‘put a hat on’ and be that editor... you start to be more technical. And the only way to be able to do that is that you have to heal with it first, through each *part*. *Really*. If you’re going to keep crying every time you’re seeing the footage, you know you’ve got to cry it out,

you've got to heal it out, you've got to get it out. Otherwise, you will never ever finish your film

Evidently, Humphrey's experiences of processing are bound to the editing process and afforded by the camera's function as a storer or "protector" of traumatic memory. Without the audio-visual recording affordances of film, Humphrey would not have uncovered truths about her abuse experiences through analysing and attaching meaning to how her family members (some of whom are perpetrators of abuse) behaved, performed, and responded to the confronting questions she asked. Humphrey's ability to assess the footage and make editorial decisions that were practically or technically driven, rather than driven by emotion, would have been affected. These findings indicate that Humphrey's experiences of re/processing, and constructing *Dandelions* in post-production, have been interconnected and interdependent processes. As Humphrey articulated above, "...you have to heal with it first, through each *part*..."

6.4.4 Animation, Connecting with the Inner-child and Re/processing Bodily Memory

Humphrey revealed how creating animations that represent her child self and inner-child (discussed in section 5.9) afforded her the ability to connect with her inner-child, re/process her understanding of her own unmet needs, and ultimately re-parent herself.

This was revealed when asking Humphrey if she felt like creating the animation helped her connect with her inner-child, to which she replied without hesitation:

Yeah! She's the little girl, isn't she, in the animation! She's there! And I still do have a lot of work, and I probably will have to continue to do a lot of work on that [re-parenting myself], but it's getting better...I had to become that 'mother' through the process of making the film. Getting to know that inner-child, expressing that inner-child throughout the whole film, connecting with that inner-child throughout the whole film, and it's still ongoing. And then learning to *mother* who I am, as a being. Because the thing is, like I said, I was right behind the editing machine all night, you know, going, going, going, going, going, going, going, you know, because of my inner-child needing to do the stuff

Here, Humphrey begins to reveal how, throughout the five-to-six-year-long process of creating the animations, she became so immersed that she forgot about and neglected her

needs, remaining focused on giving voice to her inner-child. This was revealed further upon asking about Humphrey's experiences animating, where she divulged that it has been:

Such a mission. It's like, the first two years of editing where I just had to get things down 'on the line' and get it going, and I was playing with it to see what I could do to make emotion come out and adding some music to get what I wanted to say, the same happened with the animation. When I was in that space, I was driven so much by just the need to *express* it, the need to get it out, time just *flew*! I used to stay up working, and sometimes I worked all night. When you're passionate about something, it takes over you, and it's the most important thing that you're doing, and you get annoyed if you have to stop and eat. That happened for probably the first five to six years

While creating the animations may have come at the expense of Humphrey overworking herself, the process simultaneously afforded her the ability to connect with and re-parent her inner-child and adult self, thereby magnifying where healing is required. Humphrey articulated how this awareness created a pathway to identify unmet needs and respond to her tendency to overwork herself when animating, at the expense of her health:

After a while, I realised I could not stay hiding in the school all night just so that I could edit all night, because I was burning out and that was not helpful for me. So, I started to use my tools that Debbra [my healer] gave me, which a lot of are about self-care and self-acceptance and self-being. Because of not having a family life that was normal and because of the sadness in the family life that I did have, I had to learn how to look after myself. To *father* myself. I had to learn to *mother* myself. And that's quite a relationship to grow, and that's going to affect your film as well. Maybe I'm reading too much into it, because a lot of the things it's only now, looking back, that I can express it like that

This experience points towards the long-term therapeutic impact potential of giving voice to the inner-child through the creative means of animation, over an extended period. Not only has the process allowed Humphrey to connect with her inner-child, but it has also magnified unmet needs and enabled her to re-parent herself.

Furthermore, Humphrey suggested that engaging in animation became an embodied process that allowed her to re/process bodily/somatic memories of trauma – another therapeutic impact of representing and giving voice to her inner-child. Bodily or somatic memory refers

to how memories become imprinted within the body and leave behind physiological residue, even in instances where trauma is not remembered. Bodily memories are remembered or experienced somatically, which may involve a range of physical sensations or conditions that can differ between individuals. Being so engrossed in the process suggests this, indicative of entering a state of ‘flow’ and/or a state of dissociation from her adult self, both of which are physiological responses. Humphrey suggested that dissociation from the adult self was indeed occurring, revealing that she has persistent genital arousal disorder (PGAD) which was triggered by the animation process:

...that [PGAD symptoms] would kick in all the time. I found it interesting that it would remind me to be in my body, you know? You know how you watch a film, and you lose yourself? It’s the same thing with doing art, you lose yourself. So, I was losing myself, and losing myself, and losing myself. And I had to come back to ‘the adult’ and to the point of me that I didn’t want to be in

When representing the inner-child, animating may thus be understood as an embodied process, affording survivor-filmmakers opportunity to process bodily memory, alongside or in conjunction with connecting with the inner-child, and re-parenting the child and adult selves.

6.4.5 Engaging With and Representing Therapeutic Strategies

Engagement with therapeutic strategies became intertwined with the documentary filmmaking process, helping survivor-filmmakers manage their wellbeing, and process triggers and experiences of resistance. Of particular interest is the experience of López, who revealed how her engagement with therapeutic strategies shaped the representations created in *Silent Beauty* to offer survivor-viewers a similar therapeutic impact.

Upon asking López to expand on the significance of the ocean in *Silent Beauty*, which she utilised as a mode of cultural memory (discussed in section 5.6.1), she confirmed that the ocean is a place of healing and re/processing trauma due to the cultural and familial significance it holds, and the serenity and calmness that the ocean evokes. López revealed that she “practiced a lot of different therapies” and saw a therapist to “unload on,” but that water meditations, journaling, and writing meditations were key for her wellbeing management:

...as part of the care framework, I did make sure that I carved out some spaces for myself...I would use some of those grant funds to go on a writing retreat somewhere that was near water...water allowed me to meditate in a different way, and so there were a lot of floating meditations that I did throughout the process...over the years I learned to trust the sea...it was very soothing to just go out into the warm water and just allow it to sort of lull me...And so, I also would think of what the water did for me, and I wanted to replicate that and offer that to the audience. Because it's just so much that we're packing into this film. And that was another thing that we did intentionally, creating that *space* between those very heavy moments that you experienced throughout. We wanted to make sure to have that space for the audience

Thus, water meditations became an intentional part of López's self-care and filmmaking process, the ocean functioning as a protective factor by soothing and calming López – and potentially viewers. This soothing, calming affect is what López has attempted to evoke for viewers, through representing the ocean as a mode of cultural memory. The presence of ocean sounds and visuals offers rhythmic breaks between heavy and potentially triggering content, giving viewers time to process, ponder, and breathe. López's attempt to soothe and protect viewers by giving them “space” to process parallels Arcabasso Smith's use of parallel editing to move between conversations with her relatives and therapist, allowing viewers to process the resistance ‘with’ her (discussed in section 5.4).

Another instance where engagement with therapeutic strategies has informed the representations within *Silent Beauty* was revealed by López in response to asking about her experience producing the washing dishes scene, as discussed in section 5.7. López revealed that the washing dishes scene is an outcome of her engagement with journaling to process traumatic memory, explaining that:

...sometimes I would focus on a subject or how I was feeling about something. Or, you know, if I had a response to something that [I] wasn't feeling so great about, I would write about that, and sometimes that would make it into the creative filmmaking process

López explained that the scene, which she is “very proud of,” was created during the early stages of production in 2018, while she was attending filmmaking workshops and programmes. During this time, she experienced:

...one of those mornings where I had just had like really awful nightmares and like I ended up calling in and I didn't go to the courses that day and so, I was just in a very frustrated place, and I wanted to express [that]...I started to write about the experience...And then I started to think about what I had just written and considered that experience of never being able to fully get away from it that people don't *really* understand if they haven't been through this kind of trauma...I wanted people to know *me*, I wanted them to know *survivors*...And so, I placed the iPhone on the cupboard right above the sink, and I just filmed myself washing dishes, and then went back to the writing and made some adjustments, and that was it. I made it that day, and that is exactly what you see in the film

The writing became the narration, which she then revealed she was “adamant” about keeping because of the scene's organic construction, created in direct response to the triggering and lingering of traumatic memory, and the journaling she practiced as a coping mechanism: “I *really* like the writing, and it was also *in* the experience in the moment.” This experience is another demonstration of how the filmmaking process and re/processing of traumatic memory becomes integrated and intertwined for survivor-filmmakers.

This finding reaffirms the accessibility of audio-visual recording and editing as technological affordances, which inform survivor-filmmakers' ability to *authentically* represent the survivor experience, as and when inspiration strikes. Here, López represents the pervasiveness of traumatic memory, and, while not obvious to survivor-viewers, she simultaneously represents her therapeutic engagement with journaling and the filmmaking process: “...I wanted people to know *me*, I wanted them to know *survivors*.” Supporting the above, López experimented with re-filming the scene to enhance the quality of the iPhone footage, but decided to use the original because of the sense of authenticity that she thought would have otherwise been lost:

...it was just very effective, and we had heard from our biggest funders, I think it was a couple, that told us that this is the *exact* scene that made them decide to fund us...that's another layer of the experience. It was a very empowering experience, to be recognised as an artist in that way when I could never call myself an artist because of all the self-doubt and work I had to do around my self-worth and believing in myself

This finding emphasises the importance of authentic representations of the survivor experience, for survivor-filmmakers who re/process in tandem with the filmmaking process, and potentially for survivor-viewers, as well as other audiences. It demonstrates another therapeutic layer of the experience for survivor-filmmakers, who may experience a sense of creative and personal empowerment upon receiving recognition and support from stakeholders. This is another instance in which survivor-filmmakers may experience the challenging of shame regarding their abuse and victim-blaming experiences, and regarding their creative pursuits. In other words, ‘creative shame’ and abuse related shame can be simultaneously challenged for survivor-filmmakers.

6.5 Navigating Triggers and Stressors

This theme encapsulates the stressors and triggers encountered by the survivor-filmmakers, and how they managed, navigated, or responded to them – mostly through ongoing consent, processes and taking approaches of care. These experiences expose how creating the documentaries function as a double-edged sword for survivor-filmmakers, evoking healing, traumatic growth, distress, and harm. Summarising this duality, López expressed: “The healing journey has been beautiful, but it’s also been incredibly difficult, and I know there was some harm there...It’s not all beautiful. It’s not all easy and healing.”

6.5.1 Framework of Care: Ongoing Consent and Collaboration

To varying extents, van de Pas, López, and Arcabasso Smith endeavoured to adopt a collaborative approach when creating their documentaries to safeguard other survivors and participants, prioritising ongoing consent from family members.

In the context of discussing ethical concerns, van de Pas revealed that she sought ongoing consent from her parents, reassuring them that she would not use footage they were not comfortable with, and allowing them to view the rough cuts of *Groomed* to give feedback as it developed. This sharing of power was conducive to cultivating a sense of safety and trust between van de Pas and her parents, which led to the strengthening of their relationships:

They saw it before it came out and they were prepared...my mom decided not to do an interview...they were super grateful to have helped navigate the whole thing. I think it’s been, for them, a way to feel like they can now finally do something while they felt kind of powerless before. I think it’s benefited us all in the end...it ended up

helping our relationship a lot because you kind of have to face what's there and what's been there, but what's always been avoided

This reflects the therapeutic value of autobiographical documentary filmmaking as a tool for relationship reconciliation and power reclamation for others affected by abuse. Such comfortability and empowerment cultivated through this collaborative approach, transcended on camera, which van de Pas was concerned would be lost:

I was afraid that my family would not be very ourselves. But we talked about it a lot. And also, they trusted me not screwing them up in the editing process or including anything that they wouldn't be comfortable with. And so, for all of us close to me, it would just be easy to get comfortable because of that knowledge

Due to financial and logistical constraints, ongoing consent was limited for the survivor-participants, van de Pas revealing: "You can't just give everybody the right to pull out at the last minute if you're making a film. It's too expensive and too difficult. But with my family, I did."

van de Pas put other protective factors in place to safeguard survivor-participants, including debriefing sessions post-interview, and ensuring that survivor-participants had professional support. Upon realising how easy it was to find willing survivor-participants to share their stories, van de Pas revealed that:

We ended up going through therapists exclusively, except for one person...we thought, but how do we know if people are ready to share their stories and if they're able to handle it, and then they're being caught with a little bit of a safety net afterwards?

López discussed her dedication to implementing a "framework of care," where her family members could retract consent throughout production: "something that was very important for me throughout was the idea of *care*, and then that includes constant consent. You don't just get consent once in the beginning." Arcabasso Smith explained how she strived to give her family members the same power:

I wanted to be respectful of where people were in their process and how open about their own experiences they wanted to be, and so, it wasn't an expose for me...it's a delicate line

The use of representational strategies (face blurring and voice-over to replace retracted interview footage) has afforded the management of this ‘delicate line’: the tension Arcabasso Smith experienced between the responsibility of preventing harm to her family and to tell the story of familial resistance, despite the detrimental impact she experienced. The most “difficult parts” were being met with resistance, particularly in instances where consent was retracted post-interview. On the impacts, Arcabasso Smith revealed:

I would really go, literally dark in the filmmaking process, and also ‘dark’ because it just.. it just emotionally felt like a closed door all the time. I would make progress, and then I would get a door slammed in my face. And it was heartbreaking and frustrating and debilitating. But the way through it I found was to keep trying to figure out ways to tell the story with the reality that I was dealing with

Thus, the representational strategies allowed Arcabasso Smith to honour retractions of consent, and to move through the triggers of resistance and debilitating heartbreak.

Similarly, López had to accept and honour the retraction of consent from survivor-participants. One cousin initially wanted to share her story, but then:

...she disappeared, and she stopped responding to me, to my messages and emails, and I sort of had to accept that. There’s no resentment...That’s where she was at. And if she doesn’t want to share her story, that’s okay...I can not exploit my own family just to make a beautiful film. It was never a question in my mind. If people don’t feel good doing this, then I’m not going to do it

Years later, while in the final editing stage, López reached out to Camille to give her an update about the film, with no expectations of her participating. To López’s surprise, Camille “was open to being part of the project again,” and they filmed her interview the following weekend. This experience reflects the power of adopting a process of care, ongoing consent, and collaboration whereby the lines of empathic communication remain open to family members who will be impacted.

López also had viewing consultations throughout the years which provided her family members with opportunity for choice and consent about their representation, and the children’s:

I didn’t show them the whole thing...I showed them the beginning so they’d understand where I’m going with the film. And then I showed them their sections. But

my mum and sister saw the entire film...it was another way of informed consent...Consent was super important, but not just like, 'hey, we're going to do this. Can you sign this form?' and that's it. No, *absolutely* not. Throughout the process, we have to share what we're doing, why we're doing it. Express any concerns, but also have those screenings before the film comes out because you have to be sure that...they are okay with how they're being portrayed...with my sister, I had to think about her as a mother and checking in with her and like filming with Amelia, filming with the boys, what does that mean? What does that mean for them later?

Additionally, as part of her framework of care, López hosted a family screening that included her niece and nephews; the participation of children contrasts the other survivor-filmmakers. The children were able to be part of understanding the extent of the abuse and impacts, and part of recognising and celebrating the family's resilience, thus minimising risk of overwhelm and traumatisation. Furthermore, the family screening fostered an environment of familiarity and comfort that encouraged the children to ask questions and process, López stating that one of her nephews needed, and was able to have, debriefing conversations with López and other safe adults.

6.5.2 Framework of Care: Cultivating Play

In acknowledgment of the ambiguous and challenging nature of defining the mind state of 'play', psychiatrist Stuart Brown & Vaughan (2009) explain the concept in what follows:

Sometimes running is play, and sometimes it is not. What is the difference between the two? It really depends on the emotions experienced by the runner. Play is a state of mind, rather than an activity. Remember the definition of play: an absorbing, apparently purposeless activity that provides enjoyment and a suspension of self-consciousness and sense of time. It is also self-motivating and makes you want to do it again. We have to put ourselves in the proper emotional state in order to play (although an activity can also induce the emotional state of play) (p. 47)

Play is a state of mind or emotional state, where feelings of joy, pleasure, wonder, and sense of timelessness are at the centre of the experience, or the absorbing, 'purposeless' activity being engaged in (Brown & Eberle, 2017, p. 21). For play to be experienced, an activity should be engaged in for the sake of it – because the process feels good or is “inherently

pleasurable and we yearn for more when it's gone" (Brown & Eberle, 2017, p. 22). Thus, there should not be any concrete expectations regarding the outcomes of engaging in play.

At various points throughout the creation of *Silent Beauty*, and as part of her "care framework" López consciously made efforts to cultivate play for her core team of creative collaborators, family members, and self:

...we were able to go out on various trips together and different retreats together where we would explore and get to know one another and have fun, because I always felt very confident that that was one way for us to be more creative

Time was spent leisurely without a strict structure or looming expectations about the outcomes of the trips, implying that 'play' was the intention behind the retreats, in conjunction with enhancing creativity. Research suggests that experiencing play can enhance creativity and contribute to the development of one's emotional intelligence, helping strengthen resilience (Ho, 2022; Brown & Eberle, 2017). Seemingly, López was aware of this, making a conscious effort to incorporate play into her "care framework." While the retreats involved her closest collaborators, including survivor-creative Moyi, and her sister Sara (a survivor-participant), López made efforts to cultivate play with her mother and relatives after filming interviews, and had short filming days so that time could be spent 'playing.'

López revealed how cultivating play informed the creation of *Silent Beauty*'s soundscape, enhancing the creative process when collaborating with her composer, Gil Talmi. In the context of asking how her background in radio impacted the production, López revealed that her background:

...helped me to make it much more [of] a creative experience that, sort of.. *added* to my collaborator's experience, because, later on when I was working with the sound designer and composer, we were able to play together and just, *make* things. And it was just very fun, *exhausting* work, it was hours and hours...My composer, who's open about this so I can share, is a survivor. And so, he was very committed to this project because of that, and we were able to be very playful about just bringing my voice into it...It was so cool, he created instruments...what sounds like different instruments throughout the film, is actually my humming...It's just so cool that he felt like he just got it...got what this was, you know, it was finding my voice...There

were also some very embarrassing moments where I'd be on Zoom recording myself, and we'd have a singing session, and I had to make sounds and *laughs* It was really embarrassing but really fun! I think, as hard as this film was to make, it was also so fun and empowering, and I just think I was very lucky to have this, and I think a lot of times people don't have that

Experimenting or 'playing' with the composer enhanced the creative process, not only in terms of affecting mood and emotional states during the experiments, but directly impacting the construction of the soundscape – and in a way that symbolises López's experience as a survivor, how she has “found her voice” and broken her silence. This finding demonstrates how experiences of play have been cultivated through the filmmaking process, enhancing collaboration between López and her composer, their creativity, and, in turn, the discourses represented in *Silent Beauty*.

This finding also suggests that survivorship may have been experienced between them, potentially enhancing the creative process and informing their ability to cultivate play and to focus on the process rather than the outcome.

6.5.3 Institutional Ignorance and Lack of TVI Care

Upon asking López what aspects she found challenging, she revealed that the ignorance and carelessness of some institutions and potential stakeholders has been hugely triggering:

Really just understanding the film industry, navigating the film industry as an independent filmmaker that doesn't come from wealth, and that's a filmmaker of colour and a woman and, you know, everything that brings. It has been so hard to accept that a lot of these institutions that you work with, they aren't always going to care for you in the way that you need, and that can be triggering, it can really trigger a lot of old things, and they have no idea. They're just going about their business, and that's what it is. It's a business...there have been occasions where it felt harmful and like they lacked care and thoughtfulness, and it was really 'matter of fact' decisions...They have to keep moving forward and not really stopping to ask, 'are you okay?' and that really affected my mental health. There were a few times that there were things I really wanted to have a conversation about, things that happened, but...with some [institutions] there are no sort of mechanisms in place for accountability and those kind of conversations...I really had to work hard to not only

navigate that and understand that, and come to terms with that, but address my mental health when it came to that and really recognise that, ‘yeah, I’m being triggered right now, because I’m feeling not cared for, and that’s what I felt my entire childhood, and even my adult life and they have no idea’...It’s just feeling like not cared for. Really just having to be on their timeline when it’s this kind of film. It’s my life, it’s my experience. It’s my trauma. And I’m having to be on *your* timeline.

López’s response emphasises the insensitive practices of institutions and stakeholders as triggers or stressors that survivor-filmmakers are vulnerable to encountering and navigating, particularly when seeking to distribute their films with the intent of reaching and impacting as many survivors as possible. Even when adopting frameworks of care and sensitivity to trauma, documentary filmmakers (and their creative crew) remain limited in safeguarding themselves and participants. Examining existing literature surrounding documentary practices and ethics, it is evident that the impacts institutions can have on the wellbeing of participants and filmmakers have not been scrutinised as harshly as the filmmakers themselves.

Documentarian and documentary scholar Dr Emily Colman (2024) conducted over 34 interviews with documentary filmmakers, concluding that:

In the existing academic literature, lapses in duty of care are usually ascribed to individuals, but this research suggests instead that embedded ethical flaws arise from systemic features of the political–economic organisation of the media (p. 1071)

López speaks to Coleman’s conclusion and highlights the irony and injustice of institutions privileging profit over people, yet virtue-signalling just enough to keep their practices and the harm they have caused out of documentary ethics discourse. Accordingly, this indicates a need for a TVI paradigm shift and institutional reform within the documentary filmmaking industry; as I noted in the interview: “It’s almost like there needs to be a huge trauma-informed paradigm shift,” to which López agreed.

6.5.4 Striving to Achieve Therapeutic Impact

For Humphrey, creating *Dandelions* in the hopes of therapeutically impacting other survivors has been a source of stress, revealing that:

...the more I realised I could actually *help* other people.. the better. But at the same time, it puts a lot of pressure on you, and I sometimes feel very overwhelmed, and it’s not easy to have that

Seemingly, Arcabasso Smith had a similar experience, acknowledging the “harm” inducing and “draining” nature of the process in conjunction with “trying to figure how to make the most impact”:

There was definitely harm my way...It was very draining. There were times where I couldn't stop because we were running out of money.. or whatever the case may be, and we had to hit a deadline. And it was hard...I funded it to the best of my ability, and we got a couple of different grants...We are just a small sort of film that could, you know? We're very small. Small team, no budget. Just trying to figure out how to make the most impact

Arcabasso Smith's response highlights the intersecting nature of stressors that often come with filmmaking, compounding one another. All four survivor-filmmakers expressed needing to navigate stressors of independent filmmaking where impact is the main priority: holding down full-time jobs, studying, caring for their families, learning technical skills, time constraints, deadlines, contractual obligations to stakeholders, and working with low budgets secured through small grants, self-funding and crowdfunding.

Survivor-filmmakers' interview responses suggest that their documentaries have been labours of love, where profit is not prioritised. Upon asking van de Pas about her experience working with her crew, she revealed:

I think everybody knew going in that this wasn't going to be a blockbuster, like people don't want to watch that stuff. I was told a million times that 'you won't see it on the Sunday night'...so people were in it because they really cared...they really wanted to make a difference

Similarly for Humphrey, while feedback has mostly been positive, “a lot of it was ‘you’ll never be in cinemas’ and it’s like, I don’t *want* it in cinemas! And it’s there for private use as well, which is more important than being in a cinema anyway.”

6.5.5 Lack of Control, Post Release

Another unavoidable trigger is the lack of control experienced, post-release. This overlaps with striving to achieve therapeutic impact, given that impact – for survivor-viewers, survivor-participants, others involved, and the survivor-filmmaker – can not be fully realised until distribution takes place.

For van de Pas, the lack of control post-release exposed her to criticism and was:

...the most challenging part... We talked a lot about me being in control all the time, right?... And then the release comes and then suddenly it's *completely* out of your control... It's like you're putting your whole life out there, and your heart and soul. And then people just critiquing it, that to me was a very terrifying thing... For a few weeks, I just felt kind of naked walking around

Fear of criticism and retaliation from perpetrators and their supporters was the “scariest” aspect of the experience for van de Pas, because the potential of being victim-blamed could re-trigger her groomed mind:

At some point you feel like your groomed mind is kind of being pushed away a little bit and your ungroomed mind takes over, right? You start to see things more clearly. But still, there's this trigger that can suddenly play into the groomed mind, and it can take over again. And what I was *really* afraid of was, what if people in my perpetrator's environment see the film and kind of take his side, if they're going to come after me? Or if people that were in the swim team might say, 'oh, actually this movie is bullshit. You made it up. I was there, and it's not how it happened.' Which is scary because I also don't remember everything. Because memory is a tricky thing... that was probably the most vulnerable part of this, where I felt super, super unsafe

For Humphrey, her circumstances are complicated because the perpetrators of abuse are her parents. While her father has died, Humphrey revealed that she has a fragile relationship with her mother, who she assumes will respond negatively upon *Dandelions* release: “I have no idea how, if she sees it [the footage of my brother discussing the beatings he would get from my Mother], if that's shown in any way, shape or form, how she'll react, but I know it won't be good.” However, like van de Pas, this potential impact has not outweighed Humphrey's need and desire to create *Dandelions*. *Dandelions*' creation and potential impact has taken precedence over the comfort of her mother, and the harm that Humphrey may experience if their relationship deteriorates:

...because it's [*Dandelions*] so important, and because it's a voice that needs to be out there... There's a gut bit in me that is quite mean about it and thinks, 'I don't care. I

don't care that you're going to be upset. I don't care that it might upset you. It's the truth, and it needs to be told'

Although attending the film festival premieres of *Silent Beauty* has been a “beautiful” experience, López emphasised the overwhelming and exhausting nature of engaging with audiences in the context of representing abuse and healing:

...it's a lot of energy that comes your way. People disclose to you. People cry. People that you don't know hug you and ask questions that are very personal. And usually, I love talking about the experience of making the film and working with my family and collaborators. But it's also hard, and it's a lot, and it takes a lot for me

Without warning, the overwhelm and exhaustion accumulated until it impacted López's capacity to function and communicate. Regarding her experience of attending the Black Star Film Festival screening and Q&A, López revealed:

I loved meeting people afterwards, just the way I connect with people and see how the film is affecting them in a positive way is just beautiful. But immediately afterwards I crashed, and I don't just mean I was tired. I spent two days not being able to have a good conversation with people. I couldn't form sentences...I talked to someone who's a survivor and a therapist, and she was like, 'I think that could be some unresolved trauma. It was like your prefrontal cortex was sort of shutting down'

López's experience exemplifies the unpredictability and uncontrollability of the impact on survivor-filmmakers' post-release, vulnerable to experiencing unexpected triggers and trauma responses – regardless of how “beautiful” the audience responses are.

This experience, and that of the other survivor-filmmakers, reinforces the value of adopting a “framework of care” to help manage survivor-filmmakers' lack of control and vulnerability to harm – while simultaneously magnifying that there is no foolproof method to safeguard survivors. Protective factors can be implemented to mitigate harm, or implemented in response to experiences of harm. Upon losing her ability to function, López revealed that she utilised the experience as an opportunity to reflect upon her limits and boundaries post-release, strengthening her sense of self and ability to self-protect. Now, López reserves her energy by only attending Q&As at film festivals, not the screenings.

6.6 Summary and Concluding Thoughts

Chapter six has outlined findings pertaining to the wellbeing outcomes of autobiographical documentary filmmaking, where experiences of child abuse and healing are represented, for four contemporary survivor-filmmakers who were interviewed at diverging stages of their production and distribution processes.

Reflecting their experiences, four themes have been derived and explored: Striving to achieve therapeutic impact; experiencing survivorship; re/processing; and navigating triggers and stressors. Summarised below, the themes reflect the therapeutic impact potential of autobiographical documentary filmmaking for survivor-filmmakers, while exposing how the filmmaking process is a double-edged sword. Connections are drawn between wellbeing outcomes, and the underlying autobiographical documentary affordances and/or representational strategies that have informed them.

6.6.1 Striving for and Achieving Therapeutic Impact

Survivor-filmmakers revealed altruistic motivations for creating their documentaries, aiming to help other survivors, and as seen in López's case to protect future generations from experiencing shame. This research suggests that autobiographical documentary filmmaking may thus function as a healing and reconciliation tool, to reveal, confront, and challenge resistance and shame for survivors.

Survivor-filmmakers revealed varying therapeutic impacts of their documentaries. Most pronounced – and expectedly so as the first film distributed – van de Pas revealed that *Groomed* has inspired countless survivor-viewers to seek healing and justice (this finding is also revealed in chapter seven). Police attitudes have been impacted, prompting them to reconsider procedures and interactions with sexual abuse survivors; often victim-blamed and retraumatised through justice processes, as highlighted in chapter one. López revealed that *Silent Beauty* is being utilised in educational settings. Thus, post-release, autobiographical documentaries are entities of power and cultural influence, taking on life of their own.

Therapeutically impacting other survivors, including disrupting resistance (within or outside of family units), leads to empowerment and a sense of healing justice for survivor-filmmakers, which may potentially be experienced in an ongoing capacity.

These findings point towards promising outcomes for the survivor-filmmakers going forward, and the therapeutic value of their documentaries for survivor-viewers (chapter seven explores the wellbeing outcomes for survivor-viewers).

Identified by the survivor-filmmakers or suggested within their responses, the perceived documentary affordances informing the ability to therapeutically impact survivors include: the reach and impact potential of documentaries, post-release; the ability to authentically represent aspects of the survivor experience (which may be considered as ‘unrepresentable’ aspects); the ability to utilise a range of representational strategies, which may inform the creation of authentic representations, and inform the management of ethical issues pertaining to the representations; and the accessibility and practicality of filmmaking, where observational and direct cinema filming to document the experiences and evolution of the survivor-filmmaker – as and when inspiration strikes, or when triggers, trauma responses and unpredictable developments occur.

6.6.2 Experiencing Survivorship

Autobiographical documentary filmmaking affords survivor-filmmakers ongoing ‘connection potential’: there is almost endless opportunity for survivor-filmmakers to cultivate and experience survivorship, across stages of filmmaking and across relationships (with creative collaborators, participants, relatives, and viewers). Through the reciprocal sharing and empathic receiving of experiences of abuse and healing, van de Pas experienced survivorship with her survivor-participants, informing the re/processing of her groomed mind. Arcabasso Smith’s development of compassion for her relatives, demonstrates how familial relationships, strained or impacted by intergenerational abuse and trauma, can be strengthened. Experiences of survivorship can prompt the flourishing of survivorship, beyond the survivor-filmmaker. This was the case for survivor-creative Bron Moyi, who gained the courage to disclose his abuse experiences to his relatives, catalysing healing across generations. This finding suggests the possibility of an ever-expanding web of therapeutic impact upon survivors, and thus upon survivor-filmmakers, considering their primary motivation to therapeutically impact survivors.

Extending on the findings, at the heart of the experiences of survivorship, and experiences of re/processing (their relationship overlapping), is the challenging of shame. As outlined in section 2.5.2, shame is a relational experience, that may impact one’s ability to cultivate and sustain relationships, particularly in contexts of abuse. Consequently, shame requires

relational healing, alongside and through interactions with others (Brown, 2020; 2021). According to Brown (2021), connection, and the empathic communication required, “creates a hostile environment for shame”, empathy ultimately functioning as the “antidote to shame” (p. 138). This is, for example, why a sense of safety was cultivated between López and Moyi, why Moyi broke his silence, and why Moyi’s disclosure encouraged his mother and grandmother to do the same – and why, as chapter seven reveals, survivor-viewers may feel compelled to break their silence post viewing. “Shame thrives on secrecy, silence, and judgment” (Brown, 2021, p. 137), but dies when silence is broken and stories are held with compassion – and the life force of autobiographical documentary offers a platform for experiences to be disclosed, shared, received and responded to with empathy and understanding.

Identified by the survivor-filmmakers or suggested within their responses, the perceived documentary affordances that have informed survivorship experiences include the collaborative process of autobiographical documentary filmmaking. This involves the intimacy that is required across personal and professional relationships, when representing abuse and healing. The collaborative process affords the witnessing of intimate, vulnerable, moments that may otherwise remain private, due to the stigma that persists regarding child abuse, familial and intergenerational abuse, and sexual abuse. The camera’s function as an evocative tool is another affordance, where participants’ perceived presence or absence of the camera mediates their performance, and catalyses conversations (potentially for the first time), enhancing opportunities for challenging shame and cultivating survivorship. This is underpinned by the accessibility and practicality of filmmaking, capturing conversations as and when they unfold, and vulnerability otherwise not performed or witnessed when the camera’s presence is realised by participants.

6.6.3 Re/processing

Re/processing involves coming to new understandings, the challenging of shame, and changes in stress and trauma responses. For survivor-filmmakers, the autobiographical documentary filmmaking process becomes inextricably linked with re/processing in relation to experiences of abuse and healing; the filmmaking and re/processing experiences informing and mediating one other.

Across time and production stages, the autobiographical documentary filmmaking process functions as ‘exposure therapy’, requiring vulnerability and introspection from survivor-

filmmakers, ongoing exposure to triggers and stressors, and collaboration that may involve survivors and outsiders to abuse.

The camera can function as a ‘protector’ of traumatic memory, ‘storing’ memory so that survivor-filmmakers can infinitely revisit conversations to re/process and ‘remember’. The camera allowed Arcabasso Smith to revisit the insights from her therapist, and protected Humphrey’s memories when a dissociative state was triggered upon interviewing her parents.

Several representational strategies have afforded re/processing for the survivor-filmmakers, demonstrating their therapeutic potential for future survivor-filmmakers. Reenactments of traumatic memories of the abuse, where a child actress represents the survivor-filmmaker’s younger self, juxtaposed with an adult actor who represents the perpetrator, can afford the re/processing of the groomed mind; an outcome that is afforded by survivorship in van de Pas’ experience, demonstrating the overlap between themes. Animation can be utilised to represent and thus connect with the inner-child, re-parent the child and adult selves, and potentially re/process somatic memory; the animation process over an extended period, a seemingly embodied process for Humphrey.

6.6.4 Navigating Triggers and Stressors

While creating autobiographical documentaries can evoke healing, the process can also evoke distress, harm and retraumatisation for the survivor-filmmakers, and potentially others. The process requires survivor-filmmakers to experience and manage triggers and stressors as they arise, given the unpredictability and personalised nature of triggers, while constantly directing attention and mental energy towards implementing protective factors and safeguarding those at risk (survivors, participants, family, crew, and even viewers).

The main concerns of the survivor-filmmakers pertained to the safety and wellbeing of their family members involved, particularly in Arcabasso Smith’s and López’s experiences, given their documentaries exposed familial and intergenerational sexual abuse. For some participants, like Nana and the great aunts in *Relative*, this meant disclosing and discussing abuse experiences for the first time, on camera. Time constraints, budgets, and the looming pressure to reduce risk of harm, and achieve therapeutic impact (which is the survivor-filmmakers’ driving motivator for creating their documentaries, impacting their wellbeing), and the lack of control post-release, contributes to inducing and compounding stress.

This is where implementing a “framework of care” that involves collaboration and a rigorous, ongoing consent process with those involved, can reduce risk of harm and alleviate worries and ethical concerns surrounding safety – the ability to do so, mediated by time constraints and budgets, compounding the stress of the process. While van de Pas did not have the budget to provide an ongoing consent process for her survivor-participants, she did ensure her parents possessed the ability to retract consent up until the release of *Groomed*, fostering safety and trust between them which contributed to the strengthening of their relationships. López and Arcabasso Smith took this approach with their family member survivor-participants, and both survivor-participants had survivor-participants retract consent. Arcabasso Smith managed this ethical issue by applying editing techniques including blurring and voice over, providing participant anonymity, while still representing the resistance that she was wanting to convey through *Relative*. López, Arcabasso Smith and van de Pas conducted regular check-ins and viewings of parts of the documentaries as they developed.

Contrasting the other survivor-filmmakers, López held a family-only premiere of *Silent Beauty*, where the children involved were part of the celebration and had opportunities to ask questions and re/process in a space of familiarity.

López also made efforts to cultivate play experiences for herself, and other survivors involved, demonstrating the direct impact play can have on creative experimentation and the documentary representations – and the cultivation of survivorship and strengthening of relationships.

Survivor-filmmakers identified several triggers and stressors which remained out of their control. López experienced institutional ignorance, which indicates the need for a TVI paradigm shift within the documentary filmmaking industry (particularly because autobiographical accounts of abuse and healing are being funded and are wanted by distributors). The stress and pressure to finish the documentaries, distribute, and achieve therapeutic impact, and the lack of control post-release, when the impact of creating the documentaries becomes fully realised.

Even with efforts to combat risk and minimise harm, it is impossible to safeguard every survivor-viewer, and for survivor-filmmakers to safeguard themselves, due to the unpredictable and stress inducing nature of investigating and re/processing experiences of abuse, trauma, and healing. Survivor-filmmakers also have no control over, nor are

responsible for, how perpetrators of the abuse and their supporters respond or retaliate upon the release.

These experiences of potential distress, harm, and retraumatisation, highlight the importance of protective measures and adopting a framework of care to minimise harm, while simultaneously magnifying how the autobiographical documentary filmmaking process functions as a double-edged sword for survivor-filmmakers.

Chapter Seven: Wellbeing Professional Findings

Chapter seven identifies and discusses three themes derived from the interviews with the wellbeing professionals, revealing the (potential) therapeutic impacts of viewing autobiographical documentaries about child abuse and healing, for survivors: cultivating a sense of survivorship; witnessing and feeling survivors: speaking survivors' shared language of shame; and possibilities of healing and traumatic growth.

The themes presented reveal how survivor-viewers may gain a sense of survivorship, validation and empathy, and newfound hope regarding healing possibilities and experiences of traumatic growth. Such therapeutic impacts are afforded by the interconnected processes of witnessing survivors and feeling survivors, where autobiographical memories and affect can be evoked for the survivor-viewer. It is the language of autobiographical documentary and its ability to speak to survivors' shared language of shame – to authentically represent aspects of the survivor experience – which may evoke these outcomes and experiences for survivor-viewers.

The themes are outlined and explored in what follows, establishing parallels and connections to the findings in the previous two chapters, where the four documentaries and the experiences of the survivor-filmmakers are explored.

7.1 Experiencing a Sense of Survivorship

This theme represents the potential ability for survivor-viewers to cultivate and experience a sense of survivorship through the viewing process, where they understand they are not alone in response to the witnessing and feeling of the survivors on screen. I use 'sense' in recognition of survivorship being a reciprocal experience; how 'connection' is defined in relation to the survivor-filmmakers' experiences in section 6.3. Here, the cultivation of a sense of survivorship is characterised by a survivor's desire to: feel seen, heard, and know they are not alone; experience validation and empathy in response to their experiences of abuse and healing – including experiences of triggers, trauma responses, resistance, victim-blaming, fear, and shame.

7.1.1 Combatting Loneliness, Social Isolation, and Shame

In response to asking what the wellbeing impacts might be of viewing the films and specific scenes, and why survivors might seek out autobiographical accounts that represent abuse and

healing experiences, the majority of the interviewed wellbeing professionals indicated that the autobiographical documentaries could be valuable tools for validating survivor-viewers, reinforcing the discourse that they are not alone in their experiences. For example, one of the wellbeing professionals responded that:

It's like a validation that.. 'I'm not alone,' or 'I haven't imagined this', or that 'people have the same feelings that I have had, the same reactions that I had' and all that sort of thing. Being able to identify and also being able to *dis*-identify and see how you're different...I would hope that it would help the survivor feel that I'm not alone. That, if she can go through it, I can go through it too (WBP3)

This response reflects how feeling alone and misunderstood may be combatted through the exposure to survivor accounts, offering a sense of survivorship for survivor-viewers. It is as if the autobiographical documentary representations create and afford a psycho-social bridge for survivor-viewers, connecting their experiences to the survivors on screen. Several wellbeing professionals suggested “connection” as a possible driving motivator for seeking out autobiographical documentaries about abuse and healing, or as a possible outcome of doing so. WBP1 discussed connection in relation to a “phase” that survivors may go through, reflecting Herman’s (2022) theory that healing often has three stages: establishing safety, remembrance and mourning, and reconnection:

...most survivors, when they're ready to be watching films like that – because most survivors go through a phase where they want to know about other people's stories – they want to know that they're not in isolation...Seeing someone else empowered enough to actually stand out there, make a video, and reduce that shame and isolation, that's *massive*. For just about everyone I know that survives some form of trauma, 99% of the healing is in reducing the shame and isolation. You know, knowing they're not alone, knowing they're not the only ones, knowing that actually it's not their shame, it's the perpetrators. Knowing that other people are healing, so they can too. For any kind of trauma, that's one of the key recovery goals: the reduction of those two things, shame and isolation. And those videos are going to do that

Thus, experiencing a sense of survivorship may function to combat feelings of loneliness and isolation, and abuse related shame. Shame is a relational experience, challenged relationally and through connection, as explained in chapters two and six. Supporting this interpretation, shame, loneliness, and social isolation – trauma responses, according to Taylor & Shrive

(2023) – have an interconnected relationship. As explained in section 2.5.2, loneliness is a typical trauma response for abuse survivors, particularly when experiencing shame and hopelessness (Thoresen et al., 2018). And shame isolates, hindering connection (Brown, 2021). Thus, where loneliness and social isolation are experienced, shame may be an influencing factor or an outcome of experiencing loneliness and social isolation – and vice versa.

7.1.2 Parasocial Relationships and Empathy

Autobiographical documentary representations offer survivor-viewers opportunities to encounter or witness survivors, which may evoke a sense of shared experience, validation and thus survivorship. In conjunction with the understanding that documentary representations can influence audience attitudes through realism, immersion, and the evocation of empathy (Borum Chattoo & Jenkins, 2019), this finding suggests potential for survivor-viewers to develop parasocial relationships with the survivor-filmmaker and survivor-participants. Donald Horton and Wohl (1956) proposed the term ‘parasocial interaction’ to encapsulate how communication media can afford users “an apparently intimate, face-to-face association with a performer” (p. 228). Jenn Lindsay (2023) suggests that documentary films provide fertile ground for parasocial contact and relationships to occur for viewers:

If a person does not have the means or the capacity to experience meaningful contact across social divides in vivo, documentary film can act as an intermediary, offering parasocial contact and an opportunity for fostering awareness and new emotional associations with the social group in question (p. 21-22)

Lindsay (2023, p. 14-15) explains how parasocial experiences, and the potential disruption of social biases, are mediated by the representation of the “performer” and whether viewers feel immersed in the documentary:

Parasocial contact, although mediated and pixelated, sparks a physical response, unlocking the same neurochemicals that face-to-face contact does; “the media viewer feels as if he or she is in a reciprocal social encounter with the media performer. This experience is especially triggered when the media performer addresses the viewer via body orientation and looking into the camera...While parasocial interaction occurs during viewing, a parasocial relationship can transcend the immediate viewing

exposure and more resembles a sense of liking for, or short or long-term involvement with, the media performer” (Dibble et al., 2016)

The survivor-filmmakers address viewers by applying representational strategies, including looking into the camera to make eye contact with viewers, speaking to the audience, orientating their bodies near the camera, or using close-ups to capture facial expressions in response to conversations; as Arcabasso Smith does when representing her facial expressions as she processes her therapist’s insights.

These representational strategies create a sense of closeness and afford parasocial contact between the viewer and survivor-filmmaker, which may evoke empathy for viewers and thus a sense of survivorship. Experiencing and practising empathy towards others is required to experience survivorship. Brown (2021) and emotions expert Karla McLaren (2013) argue that empathy is the basis for and foundation of communication, relationships, and connection – what “soothes us and makes us feel safe,” according to therapist Mona Fishbane (2007, p. 403).

One wellbeing professional alluded to the potential for a parasocial relationship to form for survivor-viewers, emphasising the empathy and validation that survivor-viewers may receive and experience, in conjunction with the ability to see new possibilities for themselves:

...if the sexual abuse was part of coercive control or part of this wider pattern of controlling and dominating, I think it’s quite common for people to doubt their experience that it actually happened. You know, ‘was it actually as serious as I remember? Am I just overreacting?’ I think that could be one of the reasons why all of these documentaries might be quite useful, [to see] the details of what they went through and how it was. And then talking about those particular terms, ‘grooming’ for *Groomed*, or the confrontation with the by-proxy interview [with Dennis]. I think it gives people an option, or they can imagine a possibility. And I think validation is so important because it’s really hard to get. It’s really hard to get proper validation and proper, accurate empathy, like Rogers called it. Accurate empathy about what happened and how *shit* it is, and how you doubt yourself. I think that’s what they’re going to get out of it, which might be very hard to do otherwise (WBP5)

Thus, the ability to form parasocial relationships with survivors on screen may present survivor-viewers with the opportunity to receive or feel empathy, where they may not have

experienced it from those they have disclosed to, or have been subjected to victim-blaming. This response underscores the importance of receiving empathy for survivors' healing, particularly regarding self-doubt and limiting beliefs about what is possible for their future. This is in recognition of the ability for empathy to function as the "antidote to shame" (Brown, 2021, p. 138). This understanding parallels the experience of van de Pas, who articulated that the survivor-participants acted as a "mirror" of understanding, magnifying experiential similarities. The empathy van de Pas felt towards the survivor-participants seemed to transfer to her, countering the internalised victim-blaming she was experiencing. She explained:

...because of the grooming that happens in your brain, you look at your own story very *differently* to how you look at other people's stories. So you think everybody else's story makes sense...But then you look at your own story, and 'the power is different, it's not black and white'...

As discussed in section 6.3.3, van de Pas' response demonstrates how survivors may self-blame while refraining from victim-blaming other survivors who have had similar experiences. Survivorship can challenge the disconnect between self-blaming and the compassion survivors may feel towards other survivors. As WBP4 suggests, the sense of survivorship and empathy that autobiographical documentaries can afford survivor-viewers may have a similar impact.

7.1.3 Healing through Storytelling: Autobiographical Documentaries as Healing Resources for Wellbeing Professionals and Survivors

Most professionals commented on the potential therapeutic value of utilising autobiographical documentary viewing within therapeutic practice, as a form of 'cinematherapy.' WBP3 was forthcoming with stating that they had clients who would likely find the survivor-filmmaker accounts as validating where such validation has not been experienced before, and highlighted the relatability for their Māori clients, where experiences of intergenerational abuse, resistance and victim-blaming within the family are represented. Regarding *Relative*, WBP3 revealed that "...I thought of several clients who would go 'Oh yeah, I know how that goes,' you know, 'just suck it up'...And three of my Māori clients really stand out."

This finding is indicative of how Māori are more prone to experiencing victim-blaming in response to sexual abuse. As discussed in chapter one, Petrina Hargrave et al., (2024) found

that victim-blaming is most often perpetuated by whānau, and Māori are particularly vulnerable to victim-blaming and compounding harm, as racial stereotypes and ‘ideal victim’ myths underpin their victim-blaming experiences; findings which support the assertion that racism and colonialism underpin Māori experiences of victim-blaming. Subsequently, breaking the silence, including expressing and discussing emotions and wellbeing impacts relative to the experiences of abuse and victim-blaming, can be especially challenging for Māori. Retraumatization, shame, and other emotional injuries may be evoked and compounded by the historical and intergenerational trauma brought about through colonial violence. This is why, as WBP3 suggests, Māori survivors may find therapeutic value in viewing autobiographical representations of abuse and healing where familial resistance is concerned – like *Relative*.

This finding suggests the possibility that autobiographical documentary representations of child abuse and healing can transcend cultural boundaries, due to survivors’ shared experience of victim-blaming, resistance, and shame – what I conceptualise as a ‘shared language of shame.’ This interpretation echoes Arcabasso Smith, who revealed that survivors’ shared experience of shame, irrespective of culture, was a motivating factor for creating *Relative*: “...there are so many people that, while we’re all in different places that have had different experiences, there’s a community of this sort of shame, fear, etcetera, around especially sexual abuse.”

Bridging both findings – the ability for autobiographical documentaries to function as potential healing resources within therapeutic practice, and transcend cultural boundaries through speaking to survivors’ shared language of shame, WBP4 suggested that the autobiographical documentaries are a form of ‘pūrākau’; the sacred Māori practice of storytelling, to make sense of and give meaning to our lives:

I feel like therapeutic modalities really need to be quite holistic, because they can be *anything*. Say, within Māori culture, we have ‘pūrākau’, which is stories, and it’s not very different from the filmmakers. It draws on your whakapapa⁹, it draws on your knowledge. That’s one way that I think you can build a therapeutic relationship

⁹ ‘Whakapapa’ refers to genealogy, and the mapping of relationships to preserve and transmit cultural knowledge across generations.

This observation also reflects the innate desire humans often possess to experience connection, and the desire survivors may possess to experience survivorship, to see themselves in the lives, identities, and stories of other survivors. And, as WBP5 has suggested, to receive empathy which may otherwise be difficult to receive due to the persistence and pervasiveness of victim-blaming culture. Thus, autobiographical documentaries have the potential to function as healing resources for professionals within cinematherapy contexts, affording survivors a sense of survivorship and the subsequent challenging of shame.

WBP1 also articulated how, through their authentic and raw portrayals of the survivor experiences, the documentaries could function to challenge shame:

It's a 'shame free' zone almost in the videos, which is really good. You know, from a therapeutic perspective, that's a really good thing...people are able to witness other people not being ashamed or ashamed of their own abuse journey...we don't have to feel shame if we're having a bad day where we can't cope or if we're just triggered in the moment. And actually, that's not our shame. It might belong to the perpetrator, but it's not ours

This therapeutic potential of challenging shame is significant for therapists and other wellbeing professionals seeking to help trauma survivors. According to Ruth Buczynski (2020), "Shame can be one of the most challenging emotions to work with...Even when a patient seems to be making progress, shame can sneak right back in and create road-blocks in a patient's recovery" (p. 2). While there are various pathways to challenging shame, survivorship is a pathway that may become restricted within 1-1 therapeutic settings. Thus, utilising cinematherapy could help wellbeing professionals evoke a sense of survivorship for survivors, which may otherwise be unachievable within their scope of practice.

It is worth highlighting that several professionals commented on the value of the term "groomed mind" put forward by van de Pas and adopted by myself throughout the thesis, to conceptualise the conditioning that occurs for the child when being groomed, often persisting into adulthood. WBP3 could imagine themselves using the terms in their own practice:

I'm just thinking about someone I have, and I think would be really useful to talk in those terms to them, because of their situation and the conflict that you have.

Grooming gives you rewards, and of course you want rewards, and it's natural to want

rewards, and it's natural to want to be liked. And to see that, when an adult does it to a child, of course it's going to make you feel special. I think it's good. I can see myself making use of them...It's more specific than just *naïve*. I mean, I have said *naïve* to clients, but you know, a groomed mind is.. there's all that naivety and all that wishing and hurting...

This reveals another way in which survivor-filmmaker accounts can be useful tools for wellbeing professionals and survivors, as they can offer alternative language and terminology to conceptualise the experiences of abuse survivors, which may otherwise be difficult for survivors to articulate, understand and/or identify with. This is particularly regarding complicated psychological experiences like the conditioning that occurs through the grooming process, and conditioning that generally occurs during child abuse.

The potential for autobiographical documentaries to offer survivors and professionals a “shared language” to articulate and understand experiences of abuse and trauma was suggested by WBP6, upon reflecting on instances where clients referred to the film *Once Were Warriors* to explain their life experiences:

...so many people have said this particular phrase to me, ‘have you seen the film *Once Were Warriors*?’ but they often will say, ‘that was my life.’ And that’s really interesting, because it’s such an iconic New Zealand film that did represent some people’s experience. And then, rather than having to say a whole bunch, they can just say this one thing and people can kind of know. And I have heard that particular phrase, just over and over and over again...And they never said ‘I couldn’t stand watching that film.’ They never said, ‘that film traumatised me,’ so I don’t know. This is just a guess...there were some parts of that that definitely resonated. It was definitely portraying their lived experience accurately, and they didn’t complain that it was awful to watch, that wasn’t the main point when they were saying it...And I guess if there was an iconic story around [sexual harm], that everybody had a shared language around

7.1.3.1 The Cruciality of Survivor Agency and Control

Regarding the potential therapeutic function of utilising autobiographical documentary viewing as a form of cinematherapy, WBP3 stressed the survivor-viewers’ control and

agency over their viewing experience to facilitate therapeutic impact and avoid retraumatisation and distress:

...done sensitively, giving the client the power to choose what to see, how much to see, when to stop, being available to talk about things. It could be very useful done that way

This observation, the cruciality of control and agency, is reinforced by the responses in relation to explaining their therapeutic lens and the modalities they engage with, using language that centres survivors' active role in determining the trajectory of their therapy and healing process. WBP3, for example, explained that within their scope of practice:

We have a Hakomi word, 'organicity,' which means allowing the client to develop that, you know, we follow the client's lead, and their natural impulse to heal. That would be the way I would conceptualise it [therapeutic]...I appreciate 'survivor,' because it *empowers* the client to feel that they survived, not that they've just been a passive victim. It gives them agency, and it acknowledges their agency

Indeed, not all survivors will feel empowered by such language and therapeutic approaches. This is why WBP3 emphasises taking a client-led approach – and why the wellbeing professionals have suggested therapeutic impact specifically for survivor-viewers seeking survivorship.

7.1.4 Not for All Survivors: Survivors Seeking Connection

Expectedly, all wellbeing professionals acknowledged that viewing autobiographical documentaries about abuse and healing will not be appropriate or therapeutic for every survivor, irrespective of whether they view the documentaries independently or alongside a wellbeing professional. Wellbeing professionals suggested that a case-by-case approach should be taken to determine the appropriateness of utilising these healing resources within therapeutic contexts, considering several aspects of the survivor's healing trajectory. This includes sensitivity to triggers and receiving criticism, if the survivor is in a place of avoidance rather than wanting to confront their experiences, and if they are seeking some form of connection and validation.

WBP6 did not watch the autobiographical documentaries, as they do not engage with any form of media content about child abuse and trauma outside of working with clients as a

clinical psychologist. WBP6 did, however, offer insights about whether her clients would access these films. Their client base consists of people diagnosed with PTSD and complex-post-traumatic stress disorder (C-PTSD), many of whom have been subjected to child abuse and “have had disrupted attachment, disrupted childhoods and disrupted developments.”

WBP6 revealed that, for their clients diagnosed with PTSD or C-PTSD:

...avoidance is a key part of it. And then the other part is the hypervigilance and staying alert to threats all the time. So poor sleep, and feeling jumpy, on edge, not trusting people, those are kind of the key features. And so, in terms of looking at your study – I can’t speak for the people who might be interested in viewing that kind of material – but for my client group, I can imagine *avoidance* would be a *strong* part [of their experience]. I know for sexual harm victims, sexual content on TV is either tolerated with distress or avoided altogether, or sex is just avoided. And I’m thinking about media and movies and things like that, they’re not heading out to watch anything like that at the points that I’m seeing them. It might be later on that there’s some curiosity there, or a wish to kind of test it out a little bit or willingness, but because avoidance is a key part of the criteria [for PTSD and CPTSD], I imagine they would be mostly avoiding it...in terms of documentary stuff, I can’t think of a client who’s curious in that way. But, I am working with very complex, severe people...the functioning is quite poor in my groups that I’m seeing...they definitely are not looking [at autobiographical accounts about abuse and trauma] because they’re avoiding something...If they were doing this [accessing autobiographical documentary films], it would be because they were trying to sabotage themselves in some way or make themselves feel worse. Although the content that you’re describing would potentially be really helpful. But whether they would seek it out for that purpose, my clients, I’m not sure

WBP6’s response underscores the importance of considering how survivors are currently coping with their trauma, their sensitivity towards triggers, and whether they are actively avoiding exposure to potential triggers or accounts of abuse and trauma; as many of WBP6’s client base are. Supporting this finding, sensitivities to triggers were highlighted by other professionals. WBP3 and WBP4 recognised the arbitrary nature of determining what will be triggering as triggers will diverge between survivors:

And then there were other people that I've worked with, who would run a million miles, and it's triggering, it's triggering, and it would be a retraumatisation...it could go either way...just thinking of the people that I work with, it's more about them and how they approach the world, rather than a stage of healing. And about their core beliefs about themselves. You know, someone who believes that 'I'm a bad person' or 'I can't do things right,' is going to be really susceptible to criticism. And then possibly see that as retriggering or retraumatising. See, I have someone in mind, and that's the way it is for her. She can't even watch the news, because it's too much for her system (WBP3)

...triggers are quite funny and unexpected things I think, where it could be just like a particular perfume, particular smell. It's personalised. So, it's kind of hard, I think, to try and avoid everyone's triggers. Even if it's a movie about something completely different, I think it would be hard to do that...I'm almost worried about applying it as a blanket application or anything like that. Because the thing is, two people can experience the same things. It could be traumatic for some, and it may not be for the other...I think it would be helpful if the person becomes more curious about what happens when wanting to make sense of it and wanting to *go there*, I suppose, as opposed to wanting to forget about it, like nothing happened. I think there probably needs to be some of that curiosity, and not avoidance (WBP5)

These insights support the finding that survivors who seek out survivorship are the cohort of survivors who will likely benefit from engaging with autobiographical documentaries. This is where survivors may possess a sense of curiosity about their experiences and that of other survivors, and are thus likely to be in a place of confrontation and curiosity rather than avoidance.

The responses magnify not only the uniqueness of triggers but also the individualistic nature of interpreting documentaries, including identifying the discourses represented and experiencing affects. Survivor-filmmakers can only minimise, not absolve, risks of triggering survivor-viewers, and as discussed in section 6.5.5, can only influence the survivor-viewers' interpretations so much. Furthermore, the interviews revealed divergences between interpretations of discourses and perceived impact, between participants and my analyses as a survivor-researcher. In contrast to my interpretation, WBP5 was cautious about the impacts

of the therapists' insights in *Relative*, stating that it could risk perpetuating discourses of deflection:

I wasn't sure if that advice to her [Arcabasso Smith] at that point will be applicable for other people...the therapist said something about how by not talking about it, your family is disconnecting, something along the lines there. I just felt like there were more to it...it seemed like she was focusing on personal and family things, rather than *systemic*...I think the only slight worry [I have about *Relative*] would be kind of posing it [the prevalence of abuse] as 'it was back in the days. Now we have resources,' kind of message. Which unfortunately, isn't always true. That's what I would be kind of worried about. But you can't be perfect, you know. This is *her* story.

WBP1 highlighted the potential for the documentaries to perpetuate the discourse that reporting abuse and seeking criminal justice is where healing is cultivated, which may lead survivors to report when they are not ready to endure what is likely to be a retraumatising process, leading to no conviction.

Contrastingly, WBP5 stated that the documentaries expose the harsh realities of the criminal justice system (discussed in chapter one), and communicate that healing can take various forms beyond reporting; aligning with my analyses:

...for someone to be realistic and be like, 'it's going to be really hard. You're going to be asked to prove a lot of things. It's unlikely for you to get anywhere with this. What are you getting out of this?' I think [it's] really putting that person first, because a lot of people think, 'okay, reporting is the way to get safe justice or whatever.' This often isn't the case and just ends up hurting the person more, and more, and more. It's revictimising them. So, having that person go, 'so, what do you want out of this?' and then deciding whether to report, I think that's quite cool to have that reality check

Given the arbitrary nature of determining how survivors may interpret and respond to the documentary representations, WBP3 emphasised the need for discussions with survivors throughout the viewing process:

I think you'd want to have a discussion. I would *imagine* the ideal would be to watch a film like this together with a client to be able to just discuss it. And then to be able to say, 'it isn't for everyone. It isn't for everyone to go through the process of

formally lodging a complaint. It can be very damaging. It can be very hurtful and a wounding process too, because you get put under the microscope.’

This is where a therapeutic window of opportunity could be opened, allowing the professional to guide re/processing, and challenge victim-blaming rhetoric that may be interpreted or internalised by the survivor-viewer – potentially enhancing their ability to experience a sense of survivorship and to challenge shame.

7.2 Witnessing and Feeling Survivors: Speaking a Shared Language of Shame

Witnessing and feeling survivors has been identified within the interview responses as possible processes or experiences of survivor-viewers, which underpins and affords therapeutic processes and outcomes; including experiencing a sense of survivorship (which encompasses knowing you are not alone and feeling validation), re/processing (as the findings within this section will demonstrate). By ‘feeling’ survivors, I mean the evocation of affect, and autobiographical memories (traumatic and non-traumatic), which are seemingly symbiotic processes that trigger and/or occur in conjunction with one another.

Witnessing and/or feeling survivors presents an opportunity for survivor-viewers to “identify or dis-identify” (WBP3) with aspects of the survivor experience – that parallel and extend upon the aspects and associated discourses identified in the analyses of the autobiographical documentary representations, presented in chapter five: experiencing traumatic memory, trauma responses, resistance, blame and shame, and hope for the future and healing justice. These findings are explored in what follows, providing evidence of how autobiographical documentary representations of the survivor experience – and ultimately, the language of autobiographical documentary – possesses the power to ‘speak’ to survivors’ shared language of shame; in other words, to authentically represent aspects of the survivor experience. This is what primarily affords the evocation of affect and autobiographical memory, and experiences of re/processing.

7.2.1 Re/processing the Groomed Mind: Representing Traumatic Memory and Perpetrator Accounts

Several wellbeing professionals suggested that van de Pas’ reenactment of traumatic memory functioned to offer a sense of validation for child sexual abuse and grooming survivors. WBP3 revealed that the scene prompted her to reflect on her clients’ experiences because of

the parallels. For WBP3, the scene represented experiences of a “client who has a *very* similar story. And so, I was thinking about her, and also thinking about the stories about gym coaches, and that reality that that *was*, and still *is*, you know, we’re starting to have our eyes open to it.”

WBP4 articulated how the scene left little possibility for any “grey area” or doubt about the abuse occurring, and the impacts of grooming for survivors, revealing how the scene impacted their own re/processing of their groomed mind as a survivor of child sexual abuse:

I just thought ‘that’s how it happens.’ There were no real surprises. I’m glad they were able to show it. And that’s the thing about it too, is I guess that kind of language and what you tell yourself about that, the rhetoric, whatever tape you’ve got playing about things that have happened to you. And then to *see* it like that is.. the *facts*, almost. There’s nothing else happening, it’s just this action, and this is exactly what’s going on here. There’s no ‘*grey*.’ And, I think for my own experience, those things are so confusing, because of what happened, because of being groomed...And then it becomes, ‘that’s you. That’s your fault, that’s your story. That’s what you’ve got to hold. You carry that now and that’s the way that you are. That’s just you, now.’ And, to have that displayed in the film.. it was a really good way to show it, I thought. That’s exactly what happened. That’s how it happens. And there’s no grey area. That’s the facts of the situation

WBP4 identifies the victim-blaming they have been subjected to, revealing how the reenactment has challenged denial by allowing the “facts” or reality of the situation to be represented for what it is: child sexual abuse. Several aspects of the scene evoked this experience, including the imagery of blood and the sexual abuse it symbolises, and the stark juxtaposition between the physicality of young Gwen and the adult offender, exposing the innate power imbalance present. A sense of undeniability is established, the vulnerability of children being groomed and abused by trusted adults magnified.

Supporting this interpretation, WBP4 revealed that their experience of re/processing was an embodied process, identifying how certain “details” of the scene evoked sensory memories of their abuse and triggers – and describing each experience of viewing the autobiographical documentaries as “a visceral experience”:

...there were details about that scene that tell the story, like the sound. The fact that it's at the pools, there's something about that too, and the echo.. all of those *details* that I think, as with my own child sexual abuse, that's what I resonate with, are those little things, those details that, unless it's happened to you, it's like you don't pick up all those things. And I think that's how the story gets told, is in those details, and those are quite specific, and yet they're so general to the public...even with the blood, to me it was like, that's like that blood in my ears that I experienced, you know? The silence is deafening... I think all three of them hit different aspects of my own experiences. And they all stood out for different reasons...It was almost like they were so similar, it could have been *my* story. And yet, they're very, very different experiences. But, it's like they spoke to me and my story. Even the images, the sounds, you could almost smell your own childhood in it...I thought it was quite a visceral experience, watching these films

WBP4's response exemplifies how the language of autobiographical documentary affords the ability to represent aspects of the survivor experience – in this instance, the sensory-based nature of triggers, or “the details” – and how re/processing has occurred through witnessing and feeling survivors. Audio-visual techniques applied to the reenactment to represent traumatic memory (the echoing sound and rapid cut to blood, for example), combined with positioning viewers as bystanders (as discussed in section 5.3.2), evoked sensory memories. Sensory memories pertained to WBP4's abuse and triggers, and led to enduring resonance, evoking a sense of validation and survivorship: “...they're very, very different experiences. But, it's like they spoke to me and my story.”

Undeniability of abuse and its impacts is reinforced through the van de Pas' representation of the child sex offender, Dennis. As discussed in section 5.2, van de Pas utilises an evidentiary editing style, moving between the perpetrator, expert, and survivor-participant accounts. This representational strategy functions to expose the methodical, intentional grooming process in an undeniable way, shifting blame from survivors onto the perpetrators. This interpretation is supported by WBP3, who described witnessing Dennis' admission as “taking power *back* from the perpetrator” for survivor-viewers. Upon asking what the potential implication of Dennis' inclusion may be for survivor-viewers, WBP3 continued:

I thought that was really affective, because again, it takes the blame away from the person and places it back to the perpetrator. And I've had people realise, 'ohh, it was all planned.' And to *hear* a perpetrator admit that is very powerful

Several responses from the wellbeing professionals suggest that how Dennis is represented affords such potential impact. For WBP5, it was reassuring to know that the perpetrator "had already served his sentence" because it suggests that "there's less incentive for them to participate in some ways...so it feels almost like they genuinely want to help this person understand and genuinely want to answer questions."

WBP4 highlighted the direct delivery of Dennis' responses, impacting the perception of his honesty and lack of an ulterior motive:

There was something quite candid, I thought, about the way that he spoke. He was quite honest about it. And you can never really tell if they mean it or not, you can never really know the inside of that. But, how he spoke, something about the tone of voice and everything.. because it's almost like, someone who grooms another person, like those perpetrators that I've seen on [other] documentaries, they continue to still do it. It's almost like they're then trying to groom the interviewer! So, they're still keeping up on this thing, they're still trying to do something, they're still grooming a situation for their best outcome...Whereas there was nothing really that [Dennis] was saying that was like that

This observation is one example of how the language of documentary film has been utilised to speak to survivors' shared language of shame. Comparing Dennis' portrayal to perpetrators in other documentaries suggests that van de Pas' use of evidentiary editing to expose the methodical grooming process (as opposed to glorifying his account), challenges victim-blaming rhetoric, thus affording the re/processing of the groomed mind for the survivor-viewer, where blame and shame are shifted back to the perpetrator.

7.2.2 Representing Resistance and Intergenerational Trauma

Several wellbeing professionals identified *Relative* as functioning to expose the complexities and challenges of healing from child abuse, where abuse is intergenerational and resistance is prevalent:

I thought that [*Relative*] was really valuable for showing a family perspective and the difficulties of, you know, *family*. And I thought of several clients who would go ‘Oh yeah, I know how that goes,’ you know, ‘just suck it up,’ which is what some of the older women were saying. And then this young woman having the guts and the courage to be able to talk to her relations about it and *see* it’s an intergenerational thing... Somebody who says, ‘No. No, no, no, no. This is the *norm*, but I don’t like the norm.’ And three of my Māori clients really stand out (WBP3)

WBP3’s response reflects the validation, or sense of survivorship, that may be evoked for survivor-viewers who have been subjected to victim-blaming by family. This was WBP4’s experience. WBP4 revealed that the conversations mirrored their experiences of familial resistance upon disclosing and attempting to discuss abuse within their family:

The reality of those relationships [in *Relative*] are not unlike my own. It was like, *wow*. It was just uncanny how.. that could’ve been me, how that’s *my* story...I thought it did a really good job of showing those intergenerational relationships. I thought that was really.. empowering, if that’s the right word. Because it was like, that’s what it’s *like*! It’s like you’re just up against a brick wall

These observations and interpretations are indicative of the therapeutic power of simply witnessing survivors’ experiences. This is particularly evident because of the observational stylisation of *Relative*, most prominent in the great aunt scene and interview with Nana, capturing “life as it is” (Vertov, 1984, p. 71).

Furthermore, the recontextualisation of home videos may afford validation, offering insight into the structural issues that have informed the sustained prevalence of familial abuse and familial resistance across generations. This is suggested by the responses of several wellbeing professionals, including WBP3, who highlighted the effectiveness of Arcabasso Smith’s engagement with the recontextualisation of home videos as a representational strategy, exposing chauvinistic behaviour and the sexual violation of women:

I thought that was really affective. ‘Oh! there it was, right in front of you – the chauvinistic behaviour, and the sexual violation of women’s rights...*here* it is. I’m not making it up. It’s right *there*. Clear as day.’

7.2.3 Challenging the ‘Ideal Victim’ Stereotype: Representing Triggers, Trauma Responses, and Resistance

Supporting the above interpretations, WBP5 acknowledged how Arcabasso Smith’s representations of familial resistance, and her responses, may validate survivor-viewers by challenging misconceptions regarding how survivors respond to being abused or victim-blamed, and how society responds to survivors – responses which are often informed by discourses that perpetuate the ‘ideal victim’ stereotype.

The concept of the ‘ideal victim’ reflects how societal understandings of victimhood have been constructed in ways that narrowly construe the legitimisation of victims and survivors of crime, perpetuating a hierarchy of victimhood (Christie, 1986). According to Nils Christie (1986, as cited in Hargrave et al., 2024), ‘ideal victims’ of crime are perceived to be innocent, weak, and are victimised in public during daylight, while doing a respectable activity. According to Hargrave et al., (2024) ‘ideal victims’ are more likely to receive support, validation, and care across personal and professional relationships, often impacting criminal justice proceedings.

The ‘ideal victim’ of child sexual abuse is informed by “rape myths (Adolfsson, 2018), gender stereotypes (Lips, 2017), and sexual scripts (Sun et al. 2016)” (as cited in Eelmaa & Murumaa-Mengel, 2022, p. 262). ‘Ideal victims’ are perceived by society to be girls no older than ten to thirteen, who, at the time of the abuse, were weak, defenceless, vulnerable, virtuous, dressed non-provocatively, and were resistant towards the abuser(s) (Eelmaa & Murumaa-Mengel, 2022). Their behaviour in the aftermath of abuse is another factor which determines the legitimacy of their victimhood, as the ‘ideal victim’ is expected to be visibly traumatised, expressing emotions of fear and anxiety (Eelmaa & Murumaa-Mengel, 2022).

WBP5 identified discourses surrounding victim and survivor behaviour in response to experiencing abuse, highlighting how they function to discredit and victim-blame child sexual abuse survivors who do not reflect the ‘ideal victim’:

I think hyperarousal is often kind of seen as the stereotype...it [the ideal victim stereotype] also puts people – puts women, into these boxes of how they’re supposed to react after some sort of victimisation. You know, you’re not supposed to *retaliate*. You’re not supposed to be *angry*. You’re not supposed to be *drunk*. You’re not supposed to get over it with substances. You’re not supposed to get *fat*, or whatever. I think it’s just.. there’s so many stereotypes. You’re supposed to be crying, not eating

and withdrawing, and needing protection, which is all these things that kind of gets people in their heads, thinking ‘oh shit, was I.. maybe I’m *not* a victim or a survivor.’

WBP5 articulated how the films, particularly *Relative*, challenged this ideal victim rhetoric. Regarding the representation of Arcabasso Smith’s responses to the resistance, the re/processing of insights with her therapist, and the representation of familial resistance:

...those are all very realistic reactions, which we’re not very exposed to. I think there is this myth that, if a girl talks about their rape story, that everyone’s coming to rescue them. There’s that predominant reaction. So, I think to show otherwise will be very validating to a lot of women...I think for [Arcabasso Smith] to be so honest with her responses – because the other ones are a little bit more cinematic and things like that, whereas for her it was more like actually *showing* her facial expressions of disappointments, or whatever it was – I think that was really cool, and I can see how some people might feel quite good about seeing how others feel disappointed as well, and how other families don’t really talk about it that well. To get some sort of validation, I reckon it’s possible

The response magnifies how *Relative* challenges a discourse which deflects from the harsh realities of the survivor experience: that there is a societal readiness to believe and support survivors, instead of victim-blaming them. As WBP5 continued:

...we unfortunately do still live in that sort of society. It’s so hard, for that sense of legitimacy, ‘I legitimately experienced this’...a lot of women, especially young women, have so much going against them. And, they still have to swim across the current, which makes it harder for them to get some sort of validation that you can react whatever way you want to. It just doesn’t happen. It just feels impossible. I think that’s why a lot of women get discouraged

The challenging of the ‘ideal victim’ stereotype, and the assumption that society is better positioned than before to respond to survivors without retraumatising them, may offer survivor-viewers validation where resistance has been experienced – whether familial, systemic, or interpersonal. *Groomed*, *Relative*, and *Silent Beauty* collectively represent aspects of these forms of resistance. *Groomed* and *Silent Beauty*, for example, represent institutional resistance where the criminal justice system has failed to prosecute abuse

perpetrators and protect the survivor-filmmakers. Remaining adamant that witnessing such resistance will not be a validating experience for all survivors, WBP5 added:

I think if a survivor tried to report and they were shut down, I think it would be beneficial for them to watch them, to be like, 'Oh yeah, I wasn't alone.' But also, I imagine there could be a sense of hopelessness or helplessness, 'It's inevitable, systemic and no one can change anything,' kind of response.

7.2.4 Speaking a Shared Language of Shame

Contrastingly, WBP4 suggests that survivor-viewers may experience validation and a sense of survivorship through witnessing and feeling representations of the survivor experience that are adjacent to the 'ideal victim' stereotype. Diverging from the other survivor-filmmakers, van de Pas' reactions to the triggers that she encounters (including resistance) were visceral, and thus aligned with the assumption that victims will present as visibly traumatised, and express fear and anxiety (Eelmaa & Murumaa-Mengel, 2022). On viewing van de Pas' representations of emotional distress and vulnerability, WBP4 exclaimed:

I saw it, and it was like *wow*. That's what happens on the inside, you know? And yet, the fact that she was having that on the outside, like she was showing like.. [how] she was experiencing it. But I think for myself, I've never really.. I don't really.. express my emotion like that. And that to me is like, that's what it feels like on the inside... That's what I feel like, and I don't show that... I thought it was quite revealing as well, how it reduces you, like you go from this woman who's clearly courageous for a start, really articulate. And then, being reduced, kind of like a child. For me, it was just like, 'ohh wow, that's just really what it's like.' And I could relate to my own life, how at times I've not been able to function... showing it was just so *raw*. I've never really witnessed that before. That's what it looks like. That's what I look like from the inside, at times that's what it's like. And it was like no one gave a shit, like no one cares

WBP4's response demonstrates how representations of emotional distress, pain, and vulnerability in the contexts of exploring abuse related trauma can resonate with and therapeutically impact survivor-viewers, even in instances where the survivor-filmmakers' experience and responses to abuse and resistance do not exactly emulate their own. For WBP4, witnessing and feeling this aspect of the survivor experience offered validation and

evoked introspection. This allowed WBP4 to compare and identify their emotions and trauma responses regarding their abuse and resistance experiences, including the repression of emotions and physical displays or embodiments of pain and trauma. In other words, witnessing and feeling this aspect of the survivor experience allowed WBP4 to engage in ‘emotional reflexivity,’ “the intersubjective interpretation of one’s own and others’ emotions and how they are enacted” (Holmes, 2015, p. 61).

Affording such therapeutic impact is the ability for autobiographical documentary representations to speak to survivors’ shared language of shame. WBP4 themselves supports this interpretation, summarising their experience of watching *Groomed*, *Relative*, and *Silent Beauty*:

It just hit me straight away, just right in the heart. That’s happening straight away, that oh, these *mean* something...And not one was more or less, it just gave more understanding for myself about my own experience and dealing with it...For me, it [viewing the documentaries] was like *words* to experiences I had that I hadn’t *said*. And that language to be able to say what happened. I think one of the biggest things when it happens in childhood – something quite as *pervasive* as sexual abuse – is you don’t have the words to talk about it. You don’t have the language to tell your story, and I’ve never really told my story. I’ve said what’s happened to me, but I’ve never really told my story. And that’s what those films.. it’s like they gave me *words* to things I didn’t have words for. And that felt so freeing. Like, even now when I talk about it, it’s like I just feel my body breathe. It’s quite.. you don’t expect it, you don’t expect *that*. You don’t *know* that you didn’t have the words. You didn’t *know* you hadn’t talked about things. You didn’t *know* that! I didn’t know I hadn’t talked about a lot of really hard things that have happened in my life. You just didn’t talk about it

Here, WBP4 reinforces the understanding that the witnessing and feeling of survivors, through viewing autobiographical documentaries, are symbiotic processes. WBP4 discusses how these processes, and the therapeutic impact they can evoke, are underpinned or afforded by the representation’s ability to speak to and challenge survivors’ shared language of shame. Both processes of witnessing and feeling survivors, including the emotional resonance and physically cathartic affects experienced, provided them with “words” or insights about their unspoken and unexpressed experiences. This helped WBP4 to make sense of and validate

their experiences so that such silence and lack of self-expression may be challenged. This impact on WBP4 is outlined and explored further in the section that follows.

7.3 Possibilities of Healing and Traumatic Growth

This final theme pertains to how autobiographical documentaries can prompt survivor-viewers to re-imagine possibilities for their future, in which hopelessness and deficit-based understandings of the self may be experienced. Re-imagining possibilities may evoke other forms of traumatic growth, including remembering the beauty, breaking the silence, and experiencing the autobiographical impulse.

Given the persisting culture of victim-blaming, shame, and silence surrounding child abuse (discussed in chapter one), the wellbeing professionals commented on the survivor-filmmakers' undeniable bravery and courage to create and publicly disseminate their documentaries. Their documentaries, and certain representations of their experiences, were positioned as acts of resistance to victim-blaming culture. WBP1 described Arcabasso Smith as "really, really brave," while WBP2 commented on the emotional vulnerability shown by de Pas in *Groomed*: "I thought she was really brave to show herself on camera. And most of us don't like the look of ourselves when we're crying and upset. So, I thought it was effective to leave that in and the camera rolling while all that was going on. And it made her very human."

Regarding the inclusion of Dennis in *Groomed*, for example, WBP5 acknowledged that "It was really brave that she [van de Pas] agreed to do that...It's almost like an act of resistance." The acts of resistance – creating and disseminating these films – may be inspiring for survivor-viewers as they demonstrate the possibility of reclaiming power through breaking their silence and experiencing traumatic growth. As represented in the documentaries, this includes gaining insights about the self and the abuse, developing compassion for the self and/or other survivors, strengthening familial relationships, gaining self-confidence, becoming a parent, or gaining agency to decide how to move forward, including considering whether to report perpetrators. To witness and feel courage to break the silence, and the subsequent traumatic growth, can present 'alternative possibilities' for survivor-viewers who feel hopeless. WBP5 aptly articulated this, stating:

I think another thing that people could get out of this is.. because Bessel van der Kolk talks about how people are trying to process trauma by re-imagining things, re-

imagining alternative ways of coping or alternative ways of being after [trauma]. And I think that, watching people like Tracey, going on to have a stable relationship and then having a child. Or Gwen, going on to get all these private investigators and getting actual DNA.. *Wow*. I didn't even know that was a possibility! So, it's opening up a possibility of, 'well actually, these things are very shit. But other things can happen too. And you *can* live.'

WBP5 realised that people could care and empathise with them, in response to her disclosing and discussing abuse. This alternative possibility of receiving care and empathy was informed by witnessing van de Pas' conversation with her brother, where he broke down in tears in response to van de Pas disclosing the grooming she endured:

...it was like he shared the pain. It was just something about that sort of, they're *there* for her. They love her. And [they're] non-judgmental, not blaming. And [they're] having genuine hurt about that, that it happened. That spoke to me. It was reassuring to me that people care

WBP3 recalled a client who considered taking police action, suggesting that witnessing van de Pas' process of untangling her groomed mind and eventually reporting once she had more clarity, could inspire survivor-viewers to do the same:

...when she [a survivor] first started therapy, her intention was 'I want to get clear so that I can make a complaint to the police'. And, we talked as much as we could about, you know, 'this is going to be a really difficult process,' and I got someone in to talk to her about that...for *Groomed*, and watching the progression of that young woman, I know that she really would benefit, and she'd see the parallels. So, I definitely think it can give strength, and it can give hope, and it can open possibilities, and inspire

This response suggests that the client may simultaneously gain the understanding that healing is not contingent on reporting offenders and getting a conviction, and that there are other alternative healing possibilities. Supporting this interpretation, the survivor-filmmakers did not receive 'justice' upon reporting; the responses and proceedings of the criminal justice systems represented in the documentaries were described by WBP5 as "pathetic." van de Pas and López both include disclaimers that survivors' healing should not be determined by receiving criminal justice, and that reporting is just one avenue of healing justice.

7.3.1 Remembering Trauma and Remembering Beauty

WBP4 revealed that viewing the documentaries, particularly *Relative* and *Silent Beauty*, lead to the remembering or ‘unlocking’ of memories of trauma and of beauty, which magnified their ability to experience traumatic growth:

...after watching those films, realising how a lot of my own memories or my own voice, I had not told *so* much about my experiences, to *anyone*. Watching those films is kind of.. what made me realise that I do have other memories. It unlocked quite a lot. And you feel it in your body, I just felt it in my body that I could breathe...I know I’m a visual person. Art was the first thing I had, I guess, that was *mine*, and I could express myself, I felt safe doing it. And so, it was the visuals, and it was the sounds, I think, that captured me straight away. And then the story, the storytelling is another way that it captured me. Because sometimes, some of the ‘language-ing’ is different, and it doesn’t kind of sit right, or it’s like, ‘that’s not my story,’ or things like that. But, I must say, it was those visuals and people ‘remembering.’ I think for me that was one of the standout things about *Relative*, was her saying about her memories. And that really got me too, it was like ‘I’ve got *other* memories.’

The viewing experience and subsequent remembering, were embodied processes for WBP4, evoking both physical and emotional catharsis: “...I just felt it in my body that I could breathe...” This response reveals a potential vicarious transfer of remembering from the survivor-filmmaker to the survivor-viewer, mirroring Arcabasso Smith’s experience of remembering. The mention of “language-ing” suggests the representational strategies used by Arcabasso Smith (as described in chapter five) have influenced the evocation of memories. This finding supports my interpretation that the autobiographical documentary representations can speak to survivors’ shared language of shame.

Paralleling López’s experience where her ability to find the beauty in her life became clouded by trauma, WBP4 revealed that viewing the opening sequence in *Silent Beauty* evoked the remembering of positive memories and beautiful aspects of her life:

I saw the first few bits of *Silent Beauty*, and it was that raw footage which just reminded me so much of my childhood. And I had all these flashbacks of just.. so many different things, like textures, and smells, and the photos. And it took me back straight away...In *Silent Beauty*, it was the good memories. And that’s where I

realised how much I've missed out on my feelings and showing people how I feel about them because of that. It just obliterated everything, like just stole all of *that*. So, the memories are the good things too, the smell, the good smells, the wallpaper, my grandparents' fruit trees, and just things like that. It just really hit home about how I grew up. And then, how I didn't share how I felt about anything after that. For me, I did say what happened, and it was like it was dismissed. Or it just didn't matter. And then, I think that's when I stopped sharing how much I love people, like when I had my son, and it just made me think of all the times that I didn't talk about and didn't share or express my feelings – about how much I love people, especially. Like, those *good* feelings, like joy, and happiness. I cried for ages. I had to stop the film, and this time it was realising that, like, I'm 42 years old and just realising that I've never had a chance to hear and feel that

WBP4's response reveals how the childlike wonder, nostalgia, and merging of time and space established in *Silent Beauty's* opening montage sequence (as discussed in section 5.6.2), has afforded the triggering or sensory restoration of fond childhood memories, like smelling the citrus from her grandparents' fruit trees, or feeling the wallpaper texture. The triggering of memories of beauty has allowed WBP4, for the first time, to remember, acknowledge, witness, and feel the past and present joy, happiness, and love within her life, reinforcing the possibility of healing. This finding reveals another experience of emotional and physical catharsis through memory recollection, gaining awareness about how their ability to express how much they love people has been impacted, and crying for an extended period to re/process harboured pain and grief.

7.3.2 Breaking the Silence and Triggering the Autobiographical Impulse

There is evidence to suggest that viewing the autobiographical documentary films and the represented possibilities of healing and traumatic growth, can instil courage in survivor-viewers to catalyse or re-ignite conversations across relationships to promote personal and familial healing. After witnessing the survivor-filmmakers do exactly this, WBP4 felt compelled to discuss the "revelations" they gained with her sister and mother, influencing her to rebreak silence, but with a stronger sense of empowerment and clarity:

I think it was a combination of watching *all* of them. For me it was.. I couldn't.. like words couldn't express it. But I spoke to my sister on the phone, not long after I'd watched them. I was saying, you know, I need to speak to mum about it, about what

happened. Because you just say it that one time and then *nothing* happens about it and then it's never spoken about, ever again. So, it's that I have related to it in such a natural way, that for the first time it felt like I could still go to the police! That was a *crime*! You know? I've come to this revelation that I could actually just tell my story, however I want, when I want, with what I want to say. I just felt 'freer' to want to talk about it. And I can be as explicit as I want. That was just so freeing to me, and I was bawling on the phone to my sister about that. And, for the first time, not worrying about how *they'd* feel, how my parents still feel about it, me talking about it, me actioning it, me wanting to do an art exhibition about it and telling my story...But it just gave me so much, watching those films. I was so grateful to be a part of it, to watch them. They gave me *something*, they gave my voice back to me. And allowed me to feel safe to revisit memories. That it's okay to talk about it, that the world hasn't gone by, expired...This is *my* story. And whenever I have told it, it was like someone wanted to re-write it, or re-say it, or re-do it, or 'no, this is really what was going on at the time.' And *no*, it fucking wasn't! This is what I'm saying happened! No changing it! Don't change the words. No, that's not what I said!...And I've got a lot to say. And it's worth saying. That's my right and it's my experience, my voice. I think that it just inspired me to continue to find a way to do the work that I want to do with people

WBP4's response speaks to gaining understanding about several healing possibilities in response to witnessing, feeling survivors, and remembering both the traumatic and the beautiful in their life: the possibility of reporting, of re-breaking the silence, and of exercising their autobiographical impulse to tell their own story of abuse through an art exhibition. WBP4 has been empowered with a sense of agency and choice to use their voice and approach their healing in whatever way is best for them, not others.

This response suggests that gaining a sense of survivorship and empathy, and experiencing parasocial relationships with survivor-filmmakers, may lead to flow-on therapeutic impact, in which silence is re-broken by the survivor-viewer. This potential outcome parallels López's experience with her cinematographer, Moyi, who felt inspired and broke their silence, catalysing their own healing journey and that of other family members.

7.4 Conclusion

The findings outlined and explored within this chapter have illuminated the therapeutic potential of viewing autobiographical documentaries about child abuse and healing for survivors, both within and outside of professional therapeutic settings. Through the interconnected processes of witnessing and feeling survivors' experiences on screen, survivor-viewers may find a sense of survivorship and validation, helping combat loneliness, social isolation, and shame. A sense of empathy may be evoked for survivor-viewers, due to the parasocial relationships and contact afforded by the films. These potential outcomes, and the potential to utilise autobiographical documentary films as therapeutic healing resources, are indicative of the power of storytelling; the autobiographical documentaries, and the insights they offer, sharing similarities with pūrākau. While the therapeutic impact of viewing is evident, particularly for survivor-viewers who are seeking survivorship, viewing autobiographical documentaries like *Groomed*, *Relative*, and *Silent Beauty* will not be suitable for all survivors. This is especially for survivors dealing with specific triggers and sensitivities they can not manage, and who are avoidant of their own experiences. In professional therapeutic contexts, survivor agency and control over their engagement must be prioritised to minimise risk of harm and retraumatisation.

Witnessing and feeling survivors can evoke various forms of re/processing, all afforded by the ability for autobiographical documentary representations to speak to survivors' shared language of shame. For example, re/processing the groomed mind may be experienced. Affording this outcome is van de Pas' creation and use of the reenactment of her traumatic memories, and the inclusion of the child sex offender's account, where evidentiary editing is applied to contrast his grooming process alongside the survivor experiences and professional insights. This creates a sense of undeniability about the abuse occurring and exposes the intentional, methodical grooming process to shift blame onto the perpetrator, and ultimately challenge survivor shame.

Finally, the findings suggest that survivor-viewers may gain a depth of understanding about healing possibilities, leading to traumatic growth. This includes gaining understanding that healing is not contingent on formally reporting abuse perpetrators, and a sense of agency over the trajectory of their healing, leading to traumatic growth. As WBP4 demonstrated, her experience of watching the documentaries compelled her to rebreak her silence with family members, realise they could still report to the police, develop a strong conviction that their

story is theirs to tell despite the invalidation from others, and evoked the desire to exercise her autobiographical impulse to tell her abuse story through an art exhibition: “They gave me back my voice.”

Chapter Eight: Discussion

8.1 Introduction

Drawing on and synthesising the findings, this chapter assesses the functionality of autobiographical documentary filmmaking for survivor-filmmakers who have represented experiences of child abuse and healing.

I propose that autobiographical documentary filmmaking processes may be understood to function as a ‘platform of vulnerability’ for survivor-filmmakers. Resulting from data analysis, this emergent theory produced insights regarding how the filmmaking process generates a tension between experiences of traumatic stress and traumatic growth for survivor-filmmakers. It also suggests that autobiographical documentaries (particularly post-release and distribution) can function as ‘collective healing artefacts’ for survivors. To support this interpretation of the data, ‘vicarious therapy’ is introduced as a response and emergent concept that articulates the potential therapeutic impact of watching autobiographical documentaries about child abuse for survivor-viewers.

The implications of the findings and the theories put forward are discussed, and future research possibilities are explored, suggesting the value of moving towards a ‘shame and trauma-informed framework of care’ for survivor-filmmakers and autobiographical documentary practitioners.

Before proceeding, it is important to acknowledge that my interpretation of the findings and the focus on therapeutic outcomes in this discussion risks reinscribing the very limitation that Matthews (2025) discusses in their exegesis, where art created by survivors is often interpreted only through a therapeutic lens (as discussed in section 1.4.2). My intention, however, is to acknowledge the “multidimensionality of impact” that the autobiographical documentaries can have (Nash & Corner, 2016, p. 4), position the autobiographical documentaries as possessing the capacity to afford therapeutic impact for survivors, whilst maintaining that the texts are artistic, political, and cultural interventions that can have social impact beyond the abuse survivor and wellbeing professional communities. Thus, arguing that ‘vicarious therapy’ is a potential wellbeing outcome, for example, is not intended to negate Matthews’ argument that survivor-based creative works possess value as a form of artistic expression. It does, however, highlight an ongoing tension within this thesis between

honouring survivors' creative works as artistic expressions, and positioning them as potential therapeutic resources.

8.2 A Platform of Vulnerability for Survivor-filmmakers

Autobiographical documentary filmmaking can be conceptualised as a 'platform of vulnerability' for survivors of child abuse, meaning that there is vast opportunity to practise and experience vulnerability throughout the filmmaking process, and post-release and distribution. This experience allows shame to be challenged, and what makes the filmmaking process both therapeutic and harmful. The following describes experiences of vulnerability identified in the data produced through the research, where survivor-filmmakers have been put at risk of experiencing traumatic stress and other detrimental impacts.

It is important to remind readers of the critiques by Yazeed and Jackson (as discussed in section 2.5.2.1). Here, their critiques highlight how survivor-filmmakers will have unique relationships with experiencing and practising vulnerability, mediated by intersecting aspects of their identities and how their identities have been responded to. Therefore, certain experiences of vulnerability may feel manageable for one survivor-filmmaker, but stressful, high-risk, or unsafe for another. The autobiographical documentary filmmaking process does not offer a level playing field for survivor-filmmakers to practise vulnerability in ways that mitigate risk and foster traumatic growth.

8.2.1 Re/disclosing Abuse and Creative Shame

Disclosure, or 'coming out' as an abuse survivor, is an ongoing process for survivor-filmmakers. Disclosure is likely to occur over several years, or even over a decade – as was the case for Arcabasso Smith (*Relative*) and Humphrey (*Dandelions*). Disclosure is required across stages of filmmaking, including when pitching the documentary concept to potential stakeholders and creative collaborators; applying for grants; fundraising; collaborating with creatives and producers; involving participants, including survivors, family members and wellbeing professionals; and debriefing with family members and the wider family unit who are at risk of being impacted. The necessity of continuous disclosure is akin to a 'coming out' process, recognising that disclosure is never a one-time event but an ongoing process that constantly threatens the survivor-filmmakers' sense of safety.

Engaging with creative practice is another ongoing process that may be a trigger for evoking anxiety and shame, further positioning survivor-filmmakers as vulnerable. As was López's

(*Silent Beauty*) experience, survivor-filmmakers may fear criticism of the unoriginality or inauthenticity of their works, which may be exacerbated if they are inexperienced in the craft of filmmaking or are experimenting with unfamiliar representational strategies.

8.2.2 Re/processing and Autobiographical Documentary Filmmaking: The Process is the Product

Such vulnerability is compounded where survivor-filmmakers create their documentaries whilst undergoing, or seeking to undergo, personal growth or healing. For example, Humphrey sought answers from her parents who perpetrated abuse and used the camera as a “protector” to document the conversations, which were never had before. Arcabasso Smith documented potentially triggering conversations, also never had before, about the prevalence of intergenerational abuse and misogyny within her family unit. van de Pas (*Groomed*) investigates her childhood, wrestling with her groomed mind and the prospect of reporting the abuse to police, which she eventually does. Similarly, López contemplates before deciding to report her grandfather to authorities.

Survivor-filmmakers do not merely recount experiences that have been processed in ways that have facilitated traumatic growth. Instead, survivor-filmmakers produce their documentaries knowing there will be identity evolution, impact on their healing trajectory, and potentially impact on others. This is without certainty about what such impacts will be, or what supports may be required to mitigate harm. This contrasts with the concept of “filming the invisible” (Chanan, 2008, as cited in Green, 2023), which suggests that documentarians are often limited to addressing the impact or aftermath of a socio-political event:

...documentarians are often inherently unable to film the socio-political ‘*moment*’ as it happens for a variety of practical reasons, so instead they must engage with its aftermath, the residual atmosphere of the socio-political framed in moving image (p. 8)

For survivor-filmmakers, the craft of autobiographical documentary filmmaking is interconnected with re/processing abuse and trauma – which are impacted and afforded by the representational strategies and documentary codes and conventions used, and the ethical frameworks and protective factors implemented. This supports and extends upon the theory put forward by the Documentary Accountability Working Group (DAWG), that the documentary filmmaking “process is the product” (2022, p. 1). This means that the ethical approaches applied will impact the authenticity of the representations and ability to form

connections, arguing that “a values-based approach to documentary filmmaking not only reduces harm with the potential to build connections across communities, but also makes for more authentic stories at a time when they can be hard to come by” (2022, p. 1). My interpretation that re/processing abuse and traumatic memories becomes interconnected with the autobiographical filmmaking process, extends the meaning of the “process is the product” to include the understanding that experiences of re/processing are afforded and shaped by the documentary representations created and the representational strategies engaged with, and vice versa.

Additionally, the survivor-filmmakers’ strategic filmmaking processes, where they have strived to therapeutically impact survivors, minimise harm, and employ TVI filmmaking strategies to safeguard crew and help achieve such impact, also substantiates the notion that “the process is the product” in the context of documentary filmmaking (DAWG, 2022, p. 1). Drawing on the work of Whiteman (2004), Nash and Corner (2016) argue that “social impact is something that the project team works to produce, through the processes of strategic communication, rather than something that just happens (or not) when audiences encounter a documentary film” (p. 230). The findings of this study highlight how the survivor-filmmakers have achieved this, as impact has been co-produced through strategic communications where therapeutic motivations, impact, and the application of TVI filmmaking strategies have become intertwined.

8.2.3 Striving to Therapeutically Impact Survivors

The primary motivation revealed by all four survivor-filmmakers was to impact other survivors therapeutically – whether they are viewers, participants, crew, or relatives. Survivor-filmmakers are under immense pressure to expend energy on reassuring and safeguarding participants, crew, and family members, and to create and distribute a documentary that benefits survivors. Humphrey, for example, expressed the difficulty and “pressure” of seeking to therapeutically impact survivors – simultaneously her driving force for creating *Dandelions*.

Survivor-filmmakers may feel obligated to work through periods of stress, trauma, or refuse to stop production in instances where they recognise immense detrimental impact on their wellbeing – like when Humphrey continued to work through her animation sessions, sacrificing her own health. This can stagnate or disrupt their own healing trajectory, particularly in the short-term, while the film is being created. Arcabasso Smith revealed that

there was “definitely some harm my way” and had periods where she “went dark” because the process was emotionally and financially taxing.

Furthermore, in independent filmmaking contexts, there is no guarantee that the survivor-filmmaker will secure funding or distribution partnerships. Consequently, the potential to impact survivor-viewers hinges on the documentary's accessibility and visibility, and on how far that visibility extends to survivors and to those working with survivors in some capacity. It is thus a risk to the survivor-filmmaker's wellbeing and healing trajectory if their efforts are not met with the desired reach and therapeutic impact. Such uncertainty can add another layer of stress, potentially hindering the therapeutic impacts that creating the documentary may have initially evoked for themselves.

8.2.4 Lack of Control, Post-release

The public release and distribution of their documentaries requires survivor-filmmakers to practise vulnerability to a degree that differs from how it is practiced or experienced during production stages. Despite the potential for distress and fear to arise pre-release, there is more opportunity for the survivor-filmmaker to cultivate internalised safety. This is because the creation of the film – the representational strategies used, the discourses represented, and the safeguarding approaches taken to mitigate ethical concerns – remains largely in their control. Once distribution takes place, such control is relinquished, and any sense of safety that survivor-filmmakers have cultivated is at risk. Experiencing a lack of control can be triggering for survivors. It can reinforce feelings of powerlessness that have been evoked in response to abuse and subsequent victim-blaming. van de Pas, for example, revealed that such lack of control post-release was a significant stressor, jeopardising the comfort and safety slowly established throughout the process; as indicated by the filmmaking process functioning as “exposure therapy.” Survivor-filmmakers shift from a somewhat controllable environment, where safety and connections are cultivated over time, to one that sacrifices this stability in several ways. There are no longer opportunities to fine-tune the documentary, apply feedback from stakeholders and participants, offer ongoing consent, or experiment creatively. Simply put, a documentary can not be retracted from the public sphere once it is released, opening the gates to possible ridicule, criticism, and victim-blaming.

Perpetrators within society, particularly perpetrators who have not been charged or convicted, pose a threat to survivor-filmmakers' lives and that of their families. It is rarely the case that child abuse perpetrators are charged or convicted, let alone reported to authorities. Up to 90%

of child sexual abuse cases across the United Kingdom go unreported, and child victims are unidentified, as protective services including the police and social services expect children will self-refer and report, despite rarely doing so (Longfield, 2015). Such justice system failures are represented in *Groomed* and *Silent Beauty*; both investigations are dropped after the survivor-filmmakers file police reports. Fearing that the perpetrator and their supporters might retaliate with violence, threats, and victim-blaming rhetoric, was the case for van de Pas, who expressed fear about their reactions jeopardising the traumatic growth she had experienced, separating her groomed mind from the ungroomed. Humphrey experienced similar fear, expressing concern about having “no idea” about how her mother, a perpetrator of abuse, would respond upon *Dandelions*’ public release. Humphrey’s circumstances are further complicated by her ongoing connection to her mother and the strained nature of their relationship.

Even when responses are generally positive, the release stage can be an overwhelming and triggering experience. Unexpectedly, López experienced diminished brain function, impacting her ability to communicate coherently, despite how “beautiful” connecting with other survivors felt.

8.2.5 Ongoing Tension Between Traumatic Stress and Traumatic Growth

The vulnerability required to engage with autobiographical documentary filmmaking positions survivor-filmmakers at risk of experiencing traumatic stress, retraumatisation, shame, and can derail or stagnate their healing. However, such engagement with vulnerability is the same mechanism or experience that enables therapeutic impact and traumatic growth.

As articulated in chapter six, therapeutic wellbeing outcomes of the survivor-filmmakers include experiencing survivorship, re/processing trauma and traumatic memory, challenging shame, remembering, and the general desensitisation and reduction of fear in response to the “exposure therapy” that the filmmaking process afforded; all interconnected and overlapping wellbeing outcomes. López would not have experienced survivorship with survivor-creative Moyi without courageously disclosing her experiences of child sexual abuse to an audience of people when pitching *Silent Beauty* – her act of courage compelling Moyi to reach out to López, disclosing his own experiences and thus creating space for survivorship between them. Arcabasso Smith would not have connected with the women in her family or been able to re/process her experiences of abuse, had she not opened herself up to the risk of being met with resistance – which did occur across over a decade. van de Pas would not have been able

to untangle her groomed mind from the ungroomed (re/processing), had she not sought out other survivors to share their stories, experienced survivorship with them, or had she not interviewed and represented the convicted child sex offender – which “terrified” her and risked retraumatising her. Humphrey would not have realised the potential impact of helping other survivors by creating *Dandelions*, had she not exposed herself to criticism.

Thus, without experiencing or practising vulnerability, the identified therapeutic impacts are unattainable. Supporting this interpretation of the findings is Brown’s (2007) theory of vulnerability and shame resilience, which provides a framework that can be oriented to the context of healing abuse related trauma – of challenging shame and building shame resilience. Practising and experiencing vulnerability is the cornerstone of shame experiences, and where connection, belonging, joy, and love may flourish – which Brown (2007) reflects in the form of a ‘continuum’:

If you think about connection on a continuum...anchoring [one] end of that continuum is empathy. It’s what moves us toward deep, meaningful relationship. On the other side of the continuum of connection is shame. It absolutely unravels our relationships and our connections with other people...Empathy is about being vulnerable with people in their vulnerability (00:03:01)

Autobiographical documentary filmmaking straddles this continuum between experiences of empathy and connection, and experiences of shame, traumatic stress, and retraumatisation. There is ongoing tension between evoking experiences of traumatic stress and traumatic growth for survivor-filmmakers, because of the vulnerability that they are exposed to and must practise. In this way, autobiographical documentary filmmaking functions as a ‘platform of vulnerability’ for survivor-filmmakers, in which ‘shame resilience’ can be cultivated. According to Brown’s shame resilience theory (2006), the capacity to recognise shame, to move through shame while maintaining authenticity, and to cultivate meaningful connections, is what builds shame resilience.

8.2.6 Relational Space

Affording this functionality is the collaborative, relational process of documentary filmmaking. These affordances create ‘relational space’: environments and opportunities for survivor-filmmakers to engage with others through creative processes and collaboration, and through the exchange of stories, perspectives, and insights.

It is within the relational space across production stages that survivor-filmmakers re/process their abuse experiences, confront internalised victim-blaming, cultivate survivorship and other meaningful connections, and challenge shame. As Brown (2021) positions it, shame is a relational experience evoked by others and therefore must be challenged in relation to others.

This is why the collaborative, relational nature of documentary filmmaking holds significant therapeutic impact potential for survivor-filmmakers and survivor-viewers, enabling survivorship, re/processing, and the challenging of shame; all outcomes that inform one another. Such outcomes possess immense significance for survivors of abuse related trauma, given that shame is a central experience (as highlighted in section 2.5.2), the ability to forge connections and maintain relationships is often impacted, and perceptions of the self may become skewed in response to victim-blaming discourse and attitudes, which permeate all facets of culture.

Relational space is not limited to ‘in-person’ interactions between the survivor-filmmakers and other participants or creatives, survivors or otherwise. How the camera functions as a “memory storage protector,” and the editing processes, expand the bounds of the ‘relational space.’ They allow survivor-filmmakers to continuously analyse and re/process interactions and conversations, as Humphrey was able to re/process the conversations with her parents, and as Arcabasso Smith was able to “remember” the insights offered by her therapist. Using certain representational strategies may push the boundaries of relational such space.

Humphrey’s use of animation afforded her the ability to represent, and ultimately connect with and “mother,” her “inner-child” and adult self. van de Pas’ inclusion of a scripted reenactment of her traumatic memories also afforded relational space. This is convoluted in a stark physical contrast between the actor and young actress, prompting van de Pas to re/process as an adult outsider to her own experience while simultaneously confronting the traumatic experiences of her child self.

Finally, relational space expands upon the release and distribution, highlighting the tension between traumatic stress and traumatic growth for the survivor-filmmaker. Such tension may reach a crisis due to three factors: the survivor-filmmakers’ lack of control; the impact and reach potential of the documentary – its ability to take on a life of its own as it circulates within contemporary culture; and the survivor-filmmakers’ motivation to therapeutically impact survivors.

The significance of the release stage is explored further in what follows, which discusses the ability for the documentaries to function as a ‘collective healing artefact.’

8.3 A Collective Healing Artefact for Survivor-filmmakers

I propose that autobiographical documentaries may function as ‘collective healing artefacts’ for survivor-filmmakers, as they create opportunities for traumatic growth and healing through and within connection and community.

8.3.1 Collective Healing Approaches: Beyond the Mainstream

‘Collective healing’ refers to a broad array of therapeutic approaches to healing trauma, which contrast individualistic, Eurocentric healing practices that remain mainstream in society, their roots in a bio-medical model of understanding trauma, underpinned by colonial hegemonic beliefs. One-on-one therapy sessions, for example, are standard practice and are what survivors encounter when accessing professional supports. While helpful for some, individualistic healing practices have been criticised for failing to direct survivors to examine the external, systemic factors contributing to their experiences of distress, suffering and trauma (Burstow, 2003; Watkins & Shulman, 2008). Instead, deficit-based understandings of the self are perpetuated, and blame is placed on the individual, as outlined in chapter two.

In contrast, collective healing approaches operate on the basis that systemic and collective dimensions of trauma must be acknowledged to support the healing process, and on the understanding that community and the cultivation of meaningful connections play a significant role in healing. That is: healing occurs through and in community, not in isolation.

Such therapeutic potential is often overlooked and has been decentred within mainstream therapeutic practices, yet research continues to demonstrate the healing power of such approaches for trauma survivors. For example, child welfare expert Carlina Black et al., (2019) conducted a study with and for Aboriginal survivors of institutional child sexual abuse, developing and delivering a ‘cultural healing programme’ to assess the outcomes for survivors. Black et al., (2019) concludes that connection with one’s culture and the programme’s collective approach were vital to the healing of survivors.

It must be recognised that indigenous and non-Western communities have long advocated for the acknowledgement of the therapeutic power of collective healing practices and storytelling; a collective healing practice. Therefore, these ideas are not new. Nevertheless, they remain outside of mainstream thought, displaced and ruptured through colonial violence.

Psychiatry continues to perpetuate colonial violence through diagnoses that are informed by cultural biases (as discussed in section 2.4). Indigenous communities have healed trauma through connection, community, and storytelling, long before colonisation and the assimilation of psychiatric paradigms of human behaviour that centre individualistic responsibility. Stories are sites of resistance, “a communicative act” of “pedagogical witnessing” (Simon et al., 2000, p. 294, as cited in Iseke, 2013, p. 568) in which knowledge develops through: “only as [knowledge] is manifested can it be considered knowledge in any real sense” (Haig-Brown & Dannenmann, p. 453, as s cited in Iseke, 2013, p. 559). Collective healing practices are thus decolonial practices with transformative potential for any person or community.

8.3.2 Autobiographical Documentaries: Collective Healing Artifacts

Healing within community, through connection and storytelling, is ultimately what the creation, dissemination and consumption of autobiographical documentaries can offer survivors, positioning these texts as ‘collective healing artefacts.’

Both production and dissemination offer relational space for survivor-filmmakers in a multitude of ways: the collaborative nature of autobiographical documentary filmmaking and the potential impact and reach post-release. While these aspects are what make the survivor-filmmakers vulnerable to experiencing trauma, shame, and stress, they are the same affordances that allow for connection, and thus shame to be challenged – where survivors can connect, identify themselves in someone else’s story, and express that to the storyteller.

Through empathic communication, the cultivation of survivorship, and the exposure to accounts of abuse and healing, the findings demonstrate how survivors are afforded the ability to understand their abuse experiences from a ‘systems lens.’ This is where intersecting forms of systemic oppression and violence that have informed their experiences of abuse, and victim-blaming culture, may be identified. Exposing such injustices is critical for challenging shame, as they allow for the repositioning of fault and blame onto the perpetrator(s), oppressive systems, communities, people and relatives who have enabled and/or perpetuated abuse – as opposed to placing fault on the survivor.

As aforementioned, this is a central tenet of collective healing approaches to trauma, which requires individuals, groups, and communities to identify harm inflicted upon and/or by themselves to others, commonalities in experiences, and where or how they seek to challenge existing systems. Disrupting isolation, bridging the gap between survivor experiences and

exposing injustices is exactly what autobiographical documentaries can offer survivors; both in their construction and dissemination.

8.3.3 Circulating Impact, Post Release

The release of the documentaries can be exceptionally powerful and transformative for survivor-filmmakers. Post-release is when the wellbeing impacts upon survivors become fully realised. van de Pas continues to receive “thousands of messages” from survivors expressing gratitude and thanks, from parents who decided to act on their suspicions. Such impacts can transcend beyond what the survivor-filmmaker had foreseen as achievable, *Groomed* and *Silent Beauty* making their way into educational spaces, for example. Post-release allows survivor-filmmakers to witness and feel the fruits of their labour – the completed documentary film and the reach and cultural significance of its impact on survivors, including participants, creatives like Moyi, and relatives who are represented in the documentary – directly or indirectly. López held a private theatre screening for her family, many of whom are survivors or have been impacted by the intergenerational abuse, creating opportunity for connection, instilling familial pride and catalysing healing, and to remind her family, particularly the children, that “we don’t have to carry the shame.”

Due to their significant reach potential, the release stage offers significant traumatic growth potential for survivor-filmmakers. Therapeutic impact experienced by survivors may circle back to the survivor-filmmaker, as if guided by an invisible thread that binds the survivor-filmmaker and survivor-viewer. This ‘thread’ can be thought of as survivors’ shared experiences of shame, fear, and resistance – their shared language, which autobiographical documentaries can ‘speak’ so effortlessly, afforded by a plethora of audio-visual representational strategies, techniques, and documentary codes and conventions. For example, Humphrey uses animation to represent her ‘inner-child’ and shame, while López uses a long-take to observe herself washing the dishes, representing the pervasiveness of traumatic memory.

The ability of autobiographical documentary representations (mediated by the application of representational strategies and techniques) to ‘access’ and represent this shared language of shame thus underpins the ability for autobiographical documentary films to function as collective healing artefacts; discussed further in the following section.

The significance of the release stage regarding wellbeing outcomes for survivor-filmmakers extends upon what Kerem (2023) assumes is possible for child sexual abuse survivor-filmmakers, who publicly distribute their documentaries (as highlighted in section 3.4.5):

The healing process that happens when producing a documentary does not end with the production of the film, however; it continues during the phase of distributing the film to audiences and conducting conversations with audience members after screening the movie (p. 178)

It also speaks to the value of audience reception, relationality, and the cultivation of community in the healing process. Through critique, feedback and open discussions with other survivors, survivor-filmmakers can negotiate and evolve their understandings of their abuse experiences and reconstruct their identities, as survivors, filmmakers or otherwise.

Kerem (2023) recognises ‘testimony’ as a therapeutic event, citing the work of Laub:

the realization and knowledge of the event only occurs once the person who has been traumatized tells the story. Giving testimony is a process that involves the listener. Therefore, the listener has a significant part in creating the knowledge...the truth is revealed through this process (p. 166)

Indeed, testimony occurs throughout the filmmaking process, with every stage requiring relational engagement of some kind – especially where there is ongoing involvement of other survivors and ongoing consent processes. However, as articulated above, the findings demonstrate how new ‘relational space’ is created upon the release and distribution. This affords ongoing therapeutic impact and the challenging of shame for survivor-filmmakers, where impact can move beyond what the survivor-filmmaker imagined possible; the documentaries become part of cultural landscapes forever.

8.4 Experiencing Vicarious Therapy: Survivor-viewers

Based on the data generated, I put forward ‘vicarious therapy’ as a soft concept: that is, abstract, fluid, context-dependent, and concerned with articulating experiences that can not be defined with absolute certainty. Accordingly, I intend that ‘vicarious therapy’ will be investigated, critiqued, and developed within future research, within and beyond the context of examining the wellbeing impacts of engaging with autobiographical documentaries about child abuse and healing.

8.4.1 Introducing ‘Vicarious Therapy’

The potential therapeutic wellbeing outcomes experienced by survivor-viewers (namely challenging shame, as the findings in chapter seven revealed), can be conceptualised as experiences of ‘vicarious therapy.’ I use the term vicarious therapy to refer to the witnessing of another survivor’s therapeutic experience(s), and the evocation of therapeutic impact(s) for the witness. In the context of this thesis, this is the survivor-filmmakers’ therapeutic experiences and that of the survivor-viewers’. Thus, vicarious therapy is a wellbeing outcome, contrasting ‘vicarious trauma,’ as defined in section 2.5.1. It may also be understood as a collective healing modality, because it pertains to therapeutic transference between survivors. This elaborates on the notion that autobiographical documentaries can function as collective healing artefacts.

Reviewing trauma literature, little has been written about the possibility of vicariously experiencing therapeutic outcomes through engaging with material about and/or accounts of traumatic experiences. Existing literature about trauma and healing is largely orientated around the experiences of those working in clinical, healthcare or helping roles. As such, vicarious therapy is not to be confused with ‘vicarious therapy pretraining’ (VTP), which is the process where therapy clients engage with a recording of another client undergoing therapy, who is demonstrating what it is to be a ‘good’ patient (Truax & Wargo, 1969). VTP helps prime the client’s expectations of and shapes their behaviours while attending group psychotherapy. It is not to be confused with ‘vicarious resilience,’ defined as “the positive impact on and personal growth of therapists resulting from exposure to their clients’ resilience” (Hernández-Wolfe, 2018, p. 1). The application of both terms is limited to contexts involving access to professional therapeutic supports and is therefore reliant on a therapeutic relationship between the survivor and the professional. They are thus inappropriate to apply in the context of independent autobiographical documentary filmmaking. Because autobiographical documentaries may function as collective healing artefacts (which would likely be restricted in professional therapeutic contexts), it is imperative to offer an alternative term that can be used outside of mainstream therapeutic contexts and practice.

Contrastingly, my use of the term ‘vicarious therapy’ may theoretically be applied across contexts and situations, in-person or otherwise, in a similar way that experiences of ‘vicarious trauma’ have been investigated. As aforementioned throughout this thesis, there is literature

surrounding experiences of vicarious trauma for researchers, wellbeing professionals, and those who are exposed to accounts and representations of trauma in their everyday lives. While I encourage scholars, wellbeing professionals, and creative practitioners to investigate the application of vicarious therapy elsewhere, this discussion is oriented around the affordances of autobiographical documentaries that represent experiences of child abuse and healing, demonstrating that engagement with the medium is optimally positioned to offer vicarious therapy. The following explores how vicarious therapy may be offered by survivor-filmmakers and experienced by survivor-viewers – and how this offering and experiencing are afforded through the application of documentary representational strategies.

8.4.2 Universal Insights

Vicarious therapy may be offered through representing perspectives and insights from wellbeing professionals; insights that have aided the survivor-filmmakers in their re/processing and challenging of shame.

Perspectives and insights may be specific to the survivor-filmmaker's situation, such as Arcabasso Smith's, which are represented during the therapy session scenes in *Relative*. They may be more generalised to the community of survivors in question, like van de Pas' inclusion of her discussions with grooming experts. Including such perspectives to offer vicarious therapy is not limited to representations of the survivor-filmmaker attending therapy sessions with a wellbeing professional, or limited to the confines of a clinical setting, as the term 'vicarious *therapy*' might suggest. What is imperative is that the insights gifted – the represented discourses about child abuse and healing – function to destigmatise experiences of child abuse and healing, as opposed to perpetuating myths and fallacies that reinforce stigma and shame. Representations are destigmatising as they validate survivor experiences, subvert victim-blaming rhetoric, which contributes to conceptualising child abuse and healing experiences through a systems lens (which identifies and acknowledges the intersecting forms of systemic oppression and violence that have informed experiences of abuse, and victim-blaming).

What makes vicarious therapy possible and effective for survivor-viewers to experience (through representing universal insights or otherwise) is the shared language of shame that survivors possess. This conceptualisation of survivors' 'shared language of shame' derives from data across all three findings chapters, in conjunction with the understanding that shame is often a central experience for abuse related trauma survivors, as articulated in chapter two.

While aspects of the survivor-viewers' identities and experiences may diverge significantly from the survivor-filmmakers', this shared language means that destigmatising discourses about child abuse and healing, such as discourses that challenge victim-blaming rhetoric, are somewhat legible and accessible across survivor experiences. For example, there is never any circumstance where a survivor is to blame for the child abuse they endured, irrespective of cultural and societal norms of the time. Such transferability gives survivor-viewers opportunities to reflect on how the insights, the survivor-filmmakers' responses to them, and the discourses represented, connect to or diverge from their own abuse and healing experiences, enabling them to obtain new meanings, understandings, and to re/process their experiences in ways that challenge shame.

Nevertheless, universal insights are not limited to deriving from wellbeing professionals, nor are they reliant on the expertise of professionals. Insights grounded in lived experiences can be just as valuable, if not more so, for survivors and their healing trajectory. In fact, some survivors may be cautious and suspicious of professionals' intentions and distrustful of their insights, no matter how 'universal' those insights are interpreted. Survivors may be resistant, in response to psychiatry's history of perpetuating and enabling abuse and coercive control of the most vulnerable (Szasz, 2009), abuse and control that still permeates contemporary psychiatric and psychological practices (Taylor, 2020). Thus, representing universal insights can (and should) be derived from other survivors, in collaboration with them.

8.4.3 Therapeutic Affective States

Vicarious therapy may be offered through evoking therapeutic affective states or responses for viewers; affective states which mirror the survivor-filmmakers' experiences of their healing and engagement with therapeutic strategies and modalities.

Offering vicarious therapy in this way is what López attempted, incorporating ocean imagery and sound throughout *Silent Beauty* to evoke calming affective states for viewers (to safeguard them from experiencing distress or traumatisation). The recurring motif of the ocean symbolises López's cultural connections to and therapeutic relationship with the sea – how it helped her manage distress and triggers, and meditate, due to the tranquillity it provides for her mind and body. However, it is the combination of ocean imagery, the sounds of waves, and the nostalgic soundscape that affords a calming, evocative potential for survivor-viewers.

This reflects how the interplay between visual and auditory elements allows filmmakers to offer a multisensory, immersive experience that may enhance the evocation of affect in viewers. López's use of ocean imagery as a mode of cultural memory also highlights how culturally significant symbolism can be utilised to speak to certain communities.

8.4.4 Autobiographical Representations of Abuse Related Trauma and Traumatic Growth

The accounts of healing and traumatic growth that autobiographical documentaries can represent may, in themselves, be experienced as 'vicarious therapy.' As the wellbeing professionals articulated, to witness another survivor's courage can be empowering in itself; courage in confronting their experiences of abuse, resistance and how that impacts their lives, and courage in the vulnerability it requires to document and publicly share their experiences through an autobiographical documentary. To simply *know* that there are other survivors moving forward can help mitigate the sense of isolation that survivors often experience, instilling hope. Autobiographical documentary representations of abuse and healing experiences offer hope, functioning as mirrors of possibility. They demonstrate possibilities of traumatic growth for survivors, without perpetuating the misconception that healing is contingent on reporting to authorities or convicting perpetrators – a misconception, as conventional retributive processes and justice systems continue to fail to meet the needs of survivors (Herman, 2023). Justice systems (examined in this thesis) were never designed for survivors and are unsafe to rely upon. The autobiographical documentaries centre healing justice by acknowledging power structures and centring the voices of survivors, reflecting tenets of an alternative vision of 'justice as healing' (Herman, 2023). This is immensely significant for the wellbeing outcomes of survivors, since survivors commonly experience hopelessness in response to the acts of abuse, and in response to resistance and victim-blaming.

8.5 Research Implications

The following explores the implications of the research findings, pertinent to healing from abuse related trauma through engagement with autobiographical filmmaking or viewing. Implications concern survivors, future survivor-filmmakers, documentary practitioners, wellbeing professionals, and trauma survivors, broadly speaking. Recommendations for future research at the intersection of healing abuse trauma, autobiographical documentary filmmaking, and representations of child abuse and healing follow this section.

8.5.1 Limitations of Filmmaking in Professional Therapeutic Contexts

Positioning autobiographical documentaries as collective healing artefacts for survivors, in conjunction with underscoring the therapeutic significance of the release stage, calls into question the potential wellbeing outcomes for survivors who engage with autobiographical documentary filmmaking in a therapeutic context with guided professional support. This is because in such contexts there is likely to be a range of ethical protocols, governed by the professional's ethical and/or contractual obligations, that would make publicly distributing a documentary extremely challenging. Such ethical dilemmas are raised by Johnson (2015), who discusses potential issues surrounding client-therapist privacy and confidentiality, as well as ownership of the audio-visual material. A wellbeing professional's ethical and/or contractual obligations will govern the extent to which the autobiographical documentary lives a life beyond the walls of a therapy room, restricting their public release and distribution.

This suggests one way in which the therapeutic impact potential of autobiographical documentary filmmaking for survivors is likely to diverge across production contexts. In a professionally guided therapeutic context, the therapeutic impact potential of the release on survivors and the survivor-filmmaker would be restricted, if not completely lost. Limiting the survivor-filmmaker's ownership of their documentary also risks perpetuating shame through upholding struggles for power and control. This struggle may be experienced by abuse survivors, outside of and within professional therapeutic contexts. Therapeutic supports, even when tailored to traumatic stress and the survivor, can be retraumatising (Purnell et al., 2024). In the context of representing abuse and healing experiences, independently producing an autobiographical documentary can thus afford therapeutic impact that may not be achievable if the completed documentary film is contained to a therapy room.

8.5.2 Vicarious Therapy: Broadening Wellbeing Professionals' Scope of Practice

Therapists and other wellbeing professionals may integrate 'vicarious therapy' into their theoretical frameworks that govern their scope of practice. This concerns which modalities they perceive to have therapeutic value and thus engage with. For many wellbeing professionals, particularly those bound to Eurocentric understandings of what constitutes 'therapy' or therapeutic impact, the concept of vicarious therapy may give life to new pathways of healing to engage with or explore. The concept is underpinned by the notion that we can, and often do, heal through community and in relationships, particularly in contexts of

healing child abuse related trauma. This exposes the need to incorporate collective healing practices within their therapeutic toolbox. Such practices can take many forms, including that of offering vicarious therapy to survivors through engagement with autobiographical documentary representations of child abuse and healing experiences. Adopting the concept into their framework of understanding may encourage experimentation with and/or incorporation of these accounts within their scope of practice.

8.5.3 Repositioning ‘Cinematherapy’ as an Affective Therapeutic Tool for Child Abuse Survivors

Introducing ‘vicarious therapy’ repositions ‘cinematherapy’ (Berg-Cross et al., 1990; as discussed in chapter three) as an affective therapeutic tool. Existing literature (Heston & Kottman, 1997; Bierman et al., 2003; Marsick, 2010; Gramaglia et al., 2011; Ballard, 2012; Egeci & Gençöz, 2017; as cited in Sacilotto et al., 2022) has argued this, but not yet in the context of viewing autobiographical documentaries. Existing literature (Sacilotto et al., 2022) suggests that cinematherapy should involve films that reflect a client’s traumatic experiences *obscurely* and *metaphorically*. This is to safeguard viewers from experiencing harm and retraumatisation. However, vicarious therapy diverges from this understanding, demonstrating the therapeutic impact potential of engaging with accounts that overtly speak to their abuse and healing experiences: they are raw, vulnerable, and exposing accounts of abuse and healing, created as gifts for survivors to evoke therapeutic impact, speaking to survivors’ shared language of shame. This implication extends the boundaries of what cinematherapy is and how it can be engaged with or carried out (by professionals or through self-guided viewing), positioning autobiographical documentary accounts of abuse and healing as healing resources for survivors.

8.5.4 Decolonising Healing: Survivors and Wellbeing Professionals

Integrating vicarious therapy into their frameworks of practice may encourage wellbeing professionals to undergo a broader paradigm shift that recognises the value of collective healing approaches – both within and beyond the context of working with abuse survivors who seek support for shame, fear and isolation.

Similarly for survivors, the concept of vicarious therapy, in conjunction with the notion that autobiographical documentaries function as collective healing artefacts, may introduce innovative therapeutic avenues of healing. Survivors may be encouraged to undergo a

decolonial paradigm shift in how healing is conceptualised and experienced. This may centre on the therapeutic value of community, connection, and storytelling, and on creating and viewing autobiographical documentaries – which does not necessarily require the guidance of a therapist to achieve therapeutic impact, as the application of ‘cinematherapy’ has historically been oriented around.

Recognising the therapeutic impact potential of these ‘alternative’ avenues of healing thus challenges the limiting narrative that healing trauma must involve professionally guided therapy or one-on-one therapeutic support. Survivors may be empowered upon being positioned as active agents in their healing trajectory and pursuit of traumatic growth.

Consequently, the thesis findings and the contributions to knowledge put forward support a broader global movement advocating for a shift towards anti-pathologising, trauma-informed (APTI) practice in the context of mental health and wellbeing. This involves recognising alternative methods of healing, including engagement with creative practices, as valid therapeutic modalities. Much like collective healing approaches, these ideas are not new, as critical psychiatrists have long argued for centring a holistic understanding of therapeutic interventions and practice. However, this movement is gaining traction, as suggested by several developments. The introduction of the *Indicative Trauma Impact Manual* (Taylor & Shrive, 2023), the first alternative to the Diagnostic Statistical Manual that provides professionals and the public with an anti-pathologising framework to understand experiences of human distress and trauma; which has informed the trauma theory used in this thesis, as outlined in chapter two. VictimFocus, the organisation behind the publication of the ITIM, is developing a free-to-access, global online directory of qualified and registered practitioners working through an APTI framework. The review by Moncrieff et al., (2023) which debunks the myth of depression being caused by a chemical imbalance and reinforces that there is no proven biological basis for ‘mental illnesses/disorders’. Finally, the recommendations put forward by the WHO and the United Nations; two of the most influential organisations regarding how governments address and make legislative decisions regarding the rights of humans. Their practical guidelines report, *Mental health, Human Rights and Legislation: Guidance and Practice* (2023), calls for a global shift towards the adoption of anti-pathologising frameworks to understand trauma that consider environmental factors and social determinants, including oppression, poverty, abuse and violence, as underlying factors of distress, trauma, and human suffering.

These developments point towards a growing community of organisations, wellbeing professionals, and thus a cultural paradigm shift, where an anti-pathologising, decolonial approach is being advocated for and adopted in the ‘treatment’ of trauma – which autobiographical documentaries, as collective healing artifacts, may contribute to.

8.5.5 Towards a Shame Sensitive, TVI Approach to Autobiographical Documentary Filmmaking

TVI frameworks and guidelines for documentary filmmaking are an emerging area of discourse for documentary practitioners. In an article for the International Documentary Association, Black filmmaker and Professor Natalie Bullock Brown, alongside Sonya Childress, a Black expert in social-action engagement in documentary film, call for a TVI approach to documentary filmmaking. Contributing to the decolonial shift taking place in documentary practice, Bullock Brown and Childress (2020, para. 17) argue:

This new class has sounded the call for a reimagining of the nonfiction filmmaking ethos, built on values of accountability, consent and respect for the agency of documented communities; and of a trust-based relationship between director and protagonist. Bearing the weight of a form rooted in Eurocentric ideology, this new class aims to take back nonfiction and use it as a vehicle for both personal expression, and as a tool to strengthen movements, build solidarity across disenfranchised communities, affirm the experiences and history of people in their communities, heal from trauma, and inspire joy and political action. Not unlike the filmmakers of the Third Cinema, this new class has its eye on liberation — from patriarchy, classism, nationalism, racism and capitalist exploitation (also cited in Aufderheide, 2024, p. 19)

Their call to action and the ongoing discourse surrounding ethical documentary filmmaking manifested itself in the formation of the DAWG. 2020. The DAWG comprises seven members, including Bullock Brown, Childress, and Aufderheide, who have a minimum of twenty years of experience in documentary practices (Aufderheide, 2024).

Between 2020-2022, DAWG interviewed and consulted members of the independent documentary filmmaking community, including filmmakers, participants, PBS staff, funders, and festival leaders – prioritising the voices of BIPOC, women, and minoritised documentary filmmakers, as well as the documentaries that feature these communities (2022). This research culminated in their report, *From Reflection to Release: A Framework for Values, Ethics and Accountability in Nonfiction Filmmaking* (DAWG, 2022). This is the most

contemporary, empirically informed, and TVI documentary filmmaking framework to exist, providing principles that “support equitable and just filmmaking in films made with, for and about marginalised, vulnerable people” (DAWG, 2022, p. 2).

Principles and values are as follows:

- Integrate anti-oppression practices into your work
- Be transparent in your relationships
- Acknowledge your positionality
- Respect the dignity and agency of the people in your film
- Prioritise the needs, wellbeing and experience of the people associated with your film
- Treat all potential audiences with dignity, care and concern (DAWG, 2022, p. 8-9)

As the members of DAWG highlight, “We believe this is only a first step toward a study field consensus around practices that can hold documentary filmmakers to account for ethical and just practices” (2022, p. 4). Indeed, documentary ethics should be an ongoing conversation and ever-evolving practice. There is not yet a framework or guidelines specific to creating *autobiographical* documentaries, or those representing discourses about child abuse and healing. Furthermore, the theory that the autobiographical filmmaking process functions as a platform of vulnerability for survivor-filmmakers highlights the need for an ethical framework or set of guidelines to manage the tension it provokes between evoking experiences of traumatic stress and traumatic growth for survivor-filmmakers.

Accordingly, and building on recommendations put forward by the DAWG (2022), I propose that a shame-sensitive approach to autobiographical documentary filmmaking (particularly when representing abuse, trauma, and healing) be investigated and developed, in which colonial ideology is decentred, and care towards shame frames the process.

Supporting the recommendation to consider ‘shame sensitivity’ when representing, re/processing, and healing from experiences of abuse and trauma, existing literature surrounding TVI approaches (particularly therapeutic practice) fails to adequately theorise and address the role and significance of shame when experiencing, managing and healing trauma (Dolezal & Gibson, 2022). For this reason, and because “shame and trauma are inextricably linked” (Theisen-Womersley, 2021, p. 211, as cited in Dolezal & Gibson, 2022, p. 4-5), TVI practices which strive to promote “shame-sensitivity” are beginning to be

suggested and advocated for (Dolezal & Gibson, 2022, p. 1). This reinforces the need to move towards shame-sensitive, TVI practices within autobiographical documentary filmmaking, particularly in the contexts of investigating and representing experiences of child abuse, and healing.

Drawing on the experiences of the four survivor-filmmakers, a shame-sensitive approach to autobiographical documentary filmmaking may involve the following, all of which may be considered on a case-by-case basis, given that shame will be experienced differently between survivors and evoked through different triggers:

- Re-conceptualising autobiographical documentary filmmaking as ‘exposure therapy,’ where re/processing becomes intertwined with the process of creating and disseminating the film, and triggers/stressor are inevitably experienced
- Honouring triggers and trauma response as they arise (for example, going “dark” as Arcabasso Smith did, or implementing safety protocols as van de Pas did)
- Implementing safety protocols and protective factors, for the self and others (including implementing an ongoing consent process, conducting regular check-ins with participants, having family/survivor only viewings throughout the process, cultivating play, and having reliable therapeutic strategies to engage in)
- Collaborating with other survivors (participants and creatives) and maintaining a small core creative crew, to cultivate survivorship
- Cultivating play to enhance creativity, and offer catharsis and respite
- Experimenting with the language of documentary and representational strategies, given its ability to speak to shame and other aspects of the survivor experience (including representing their engagement with therapeutic strategies, recontextualising archival footage to expose the abuse, creating a reenactment of traumatic memories, representing perpetrator accounts, or capturing “life as it is” through observational recording techniques (Vertov, 1984, p. 71)
- Offering and evoking experiences of ‘vicarious therapy’ for survivor-viewers

It is imperative to highlight that adopting a shame-sensitive approach should pertain not only to the autobiographical documentarian and their crew, but also to the institutions and stakeholders who seek to produce and/or distribute personal accounts about abuse and healing. It is my hope that the findings and implications discussed within this thesis contribute to the discourse surrounding the need for ethical accountability from institutions

and support the development of guidelines that address the need for systemic change within institutions. This has occurred in the past, as Aufderheide & Jaszi (2018) exposed how “Documentarians’ fair use best practices codes have changed broadcaster standards, insurance practices, and the kinds of films documentary filmmakers make” (as cited in Aufderheide, 2024, p. 15).

8.6 Future Research Avenues

8.6.1 Investigating Documentary Ethics Advisors

Conducting research with documentary ethics advisors may be beneficial for future survivor-filmmakers and autobiographical documentarians. Advisory support and mentorship may come from other documentarians who can speak from experience, and research should be conducted with them. Given the shifts and calls for TVI frameworks within documentary practices, it is reasonable to assume that formal documentary ethics advisory roles will become commonplace. Furthermore, TVI documentary ethics advisors are emerging, such as DAWG member and leading expert in TVI documentary practices, Kameelah Mu’Min Oseguera. This indicates scope to investigate risk minimisation and management for survivor-filmmakers and survivor-participants.

Research that involves investigating the nature and scope of these roles may generate insights about: the advisor’s potential scope of impact upon an autobiographical documentary and the filmmaking process; how complex ethical dilemmas may/not be navigated, and the nuances of ethical decision-making; how trauma-informed, shame-sensitive practices may be implemented; and how such support differs between the communities that are collaborated with. Moreover, understandings about wellbeing impacts upon those involved may be generated. The research may inform the development of frameworks and specific guidelines or protective factors, to safeguard survivor-filmmakers/creatives, survivor-participants, and survivor-viewers.

Researching the experiences of advisors may be conducted in conjunction with research into the experiences of the respective filmmakers, creative collaborators, participants and viewers, so there is scope for discrepancies and divergences between accounts to become fully realised. This would allow the voices of trauma survivors and other vulnerable communities to remain centred in the research.

8.6.2 Investigating Survivor-filmmakers/Creatives and Conducting Practice-led Research

As this thesis highlights, the impact potential of re/processing traumatic memories through autobiographical documentary filmmaking, and viewing, is only in its infancy of being investigated and understood; particularly through an APTI lens. There are thus several research avenues of to consider going forward, to contribute to the expansion of this academic landscape.

There is scope to investigate the potential long-term wellbeing impacts upon survivor-filmmakers. Due to the interviewed survivor-filmmakers being at diverging stages of their filmmaking processes, and the contemporary status of the films, this thesis is limited in its understanding of what long-term wellbeing impacts are possible for the survivor-filmmakers. Longitudinal research studies in which survivor-filmmakers are followed over time may be conducted in response to this limitation, including follow-up interviews with the interviewed survivor-filmmakers.

Future survivor-filmmakers, survivor-creatives, and documentarians could engage in creative practice-led research to experiment with representational strategies and filmmaking techniques. Investigations may involve strategies that are novel or have yet to be experimented with to re/process trauma and shame, or strategies that possess therapeutic impact potential (as demonstrated in this thesis or elsewhere). This may uncover new and serendipitous ways of re/processing and contribute to understandings about how therapeutic impact can be harnessed through creative practice, and for whom.

For example, survivor-filmmakers and survivor-creatives may experiment with and research the impacts of engaging with the following strategies, which have demonstrated the ability to afford therapeutic impact and facilitate experiences of traumatic growth:

- Reenactments of traumatic memory, particularly where the child victim is juxtaposed with the perpetrator
- Animation to represent, connect with, and re-parent the inner-child and adult self – which may also function to re/process somatic memory
- Vicarious therapy. This may involve documenting and representing engagement with wellbeing professionals and other survivors throughout the filmmaking process, to offer survivor-viewers universal insights. It may also involve documenting and

representing engagement with therapeutic strategies, to evoke therapeutic affective states for survivors

There is also scope to explore experiences in relation to intersectionality to understand how intersections among ethnicity, gender, sexual orientation, and class influence therapeutic impacts and experienced vulnerability.

8.6.3 Investigating Survivor-participants

The short-term and long-term impacts for survivor-participants, family members, and family units should also be investigated in future research. Conducting research with survivor-participants (beyond the survivor-filmmaker) and family members/units could help inform the TVI practices of future survivor-filmmakers to reduce risk factors and harm. It could also provide survivor-participants with the opportunity to have a voice; a voice that participants are not often afforded in documentary impact research or when participating in the production process. There is indication in the scholarship surrounding the social impact of documentary that participants are often not focused on when assessing impact or collaborated with during the filmmaking process in ways that share power. For example, creative practitioner and PhD candidate Benjamin Green (2023) examines their ongoing research alongside other research in the field and proposes that documentary filmmaking practices could:

...re-align the focus and consideration of its impact to include participants, not just audiences, by engaging with methods of co-production and active collaboration. In doing so, practitioners can begin to engage with, and challenge, the established notion of an inherent imbalance of power within the participant/practitioner relationship (Nash, 2012), with the aim of moving towards a more meaningful collaborative engagement (p. 1)

I substantiate Green's argument and call to action. The findings begin to reveal and raise questions about the potential impacts (such as challenging or evoking shame) for survivor-participants, family members, and family units who are involved or associated with the production and distribution processes. The findings of this study also begin to reveal how survivor-filmmakers are attempting to work in TVI ways where such power is shared. However, the relationship between the intentions of the survivor-filmmakers and the experiences of survivor-participants and/or family members remains unknown. There is thus

much potential to conduct research investigating how survivor-participants are impacted and the relationship between these impacts and the strategic communications of the survivor-filmmaker and their creative team.

8.6.4 Investigating Survivor-viewers, and Conducting Audience Reception Studies

ARS with survivor-viewers should be conducted to better grasp the wellbeing impacts of viewing autobiographical documentaries about child abuse and healing. Due to ethical and financial limitations, ARS could not be conducted for this research project. However, this thesis demonstrates the therapeutic potential of viewing such documentaries, indicating scope for investigating survivor-viewer responses. Findings also suggest that the risks of harm for survivor-viewer participants may be reconciled or outweighed by the potential benefits of participating in research, as WBP4 experienced in a multitude of ways.

ARS could include surveys, interviews, and focus groups in which survivor-viewers reflect on their viewing experiences and the impacts experienced. Insights generated may inform the practice of autobiographical documentary filmmakers, survivor-filmmakers, and survivor-creatives, seeking to therapeutically impact survivor-viewers and reduce the risk of harm. This could involve the refinement and implementation of certain narrative structures, representational strategies, and documentary codes and conventions. Generated insights can also be used to build on and refine the soft concept of ‘vicarious therapy’ as a representational strategy.

Long-term impacts of viewing autobiographical documentaries about abuse and healing could be investigated through longitudinal studies, allowing for a more nuanced understanding of the wellbeing impacts upon survivor-viewers (within and outside of professionally guided therapeutic contexts).

Creative arts therapists, and those who work in a therapeutic capacity with survivors, may utilise the insights to inform whether and how they might use cinematherapy or autobiographical documentary filmmaking as therapeutic modalities.

8.6.5 Creative Arts Therapists and Wellbeing Professionals

Creative arts therapists and wellbeing professionals could investigate the therapeutic impact value of cinematherapy for survivors. There is scope to explore the use of autobiographical documentaries about child abuse and healing as therapeutic healing resources, and how they

may afford experiences of vicarious therapy. The role of the wellbeing professional in determining the impact on survivors could be investigated, including how they may facilitate re/processing, the evocation of vicarious therapy experiences, and generally mitigate harm that may arise for the survivor. To better understand nuances between survivor experiences, investigations may be conducted to understand what trauma responses and coping mechanisms that the viewing process may help survivors with.

Creative arts therapists and wellbeing professionals could investigate constraints to filmmaking and distribution, imposed by ethical and professional boundaries. This could involve exploring how wellbeing outcomes might be evoked or restricted for survivors within the bounds of professionally guided therapeutic contexts, including the extent to which ethical or professional boundaries, and the therapeutic techniques/modalities utilised by the professional, may constrict, evoke, or enhance wellbeing outcomes. Given the potential for experiencing traumatic growth and the challenging of shame through the relational space afforded by autobiographical documentary filmmaking, attention should be directed towards investigating what it requires to create autobiographical documentaries alongside survivors, where the documentary's life force exists outside the therapy walls and has a life of its own. Additionally, the extent to which a professional's role in the filmmaking process could function as an ethics advisory role could be investigated. This may involve investigating the scope for opportunities for interprofessional collaboration between wellbeing professionals and documentary ethics advisors.

8.7 Conclusion

Chapter eight presented three main interpretations of the findings across the three domains of analysis. The interpretations articulate the profound therapeutic impact potential for survivors who engage with autobiographical documentaries about child abuse and healing, particularly for the survivor-filmmaker.

Autobiographical documentary filmmaking functions as a platform of vulnerability for survivor-filmmakers, creating an ongoing tension between experiences of traumatic growth and traumatic stress. The filmmaking process is a double-edged sword. Autobiographical documentaries, both in their production and distribution, function as collective healing artefacts, where healing is experienced within community and solidarity with other survivors. 'Vicarious therapy' articulates how survivor-viewers may experience therapeutic impact,

vicariously, through the survivor-filmmakers' autobiographical representations. 'Vicarious therapy' can thus be thought of as a representational strategy, where universal insights and the evocation of affect(s) may be offered by survivor-filmmakers, and interpreted, witnessed and felt by survivor-viewers. Such wellbeing outcomes for survivors are afforded by the collaborative nature of filmmaking, the impact and reach potential of publicly accessible documentaries, and the relational space afforded throughout the filmmaking and release processes.

Autobiographical documentary filmmaking is one avenue where such therapeutic power may be harnessed. The filmmaking process, however, is multifaceted and potentially harmful, particularly when considering the intersectionality of identities, the relinquishment of control upon release, and how healing can occur in relation to the therapeutic impact on survivors. Considering the work of the DAWG (2022), shame-sensitive and trauma-informed approaches to autobiographical documentary filmmaking could be explored, particularly where experiences of child abuse, trauma, and healing are being represented.

Future research could explore wellbeing impacts upon survivor-filmmakers and survivor-viewers, particularly regarding the challenging of shame, and tensions between traumatic stress and growth. Investigations may enhance understanding of how wellbeing outcomes may diverge across identities and differ within and beyond professionally guided therapeutic contexts.

Chapter Nine: Conclusion

This thesis has explored the possible wellbeing outcomes of engaging with autobiographical documentaries about child abuse and recovery – for survivor-filmmakers and survivor-viewers. The extent to which such wellbeing outcomes converge or diverge with autobiographical documentary affordances and/or engagement with representational strategies was also investigated.

Chapter nine concludes the thesis by highlighting the novelty of the study and design, summarising the main findings and interpretations put forward, outlining the implications and future research possibilities, and responding to limitations.

9.1 Novelty of the Research Study and Design

9.1.1 Providing Access to Autobiographical Documentary Filmmaker Accounts

The research is novel as it is one of the only studies to seek out and draw on multiple accounts from survivor-filmmakers. This is significant because it is rare to have access to filmmaker accounts, let alone autobiographical documentary filmmaker accounts in the contexts of representing child abuse and healing. This is reflected in the lack of empirical evidence informing research about the ethical implications of documentaries, as textual analyses dominate research about documentary ethics (Nash, 2011). Compounding this rarity, the accounts were gathered at diverging stages of the survivor-filmmakers' creative processes. *Groomed*, *Relative*, *Silent Beauty* and *Dandelions* are contemporary texts, which are only beginning to be researched beyond this thesis. Thus, experiential nuances regarding the impact potential of filmmaking were able to be considered, while providing a platform for future researchers to springboard their research of these films.

The application of a tripartite methodological design has allowed for a comprehensive examination of three domains of analysis: the texts, their production, and their potential reception as perceived by wellbeing professionals, two of whom self-disclosed as survivors, providing further opportunity for survivor representation.

Survivor-filmmakers, or anyone who considers representing their experiences of child abuse and recovery through autobiographical documentary film, may use the findings as a tool of comparison and introspection to understand what might be possible in their own context. These possibilities are not only about the technological, aesthetic, and discursive functions of

the texts, but also concern potential wellbeing outcomes – both therapeutic and non-therapeutic – that may be evoked through engagement with aspects of the filmmaking process.

9.1.2 Amplifying Survivor Voices and Empowering Survivors

This thesis explores and amplifies the voices of child abuse survivors, including survivors of family harm, child sexual abuse, and the transmission of intergenerational abuse and trauma. Survivor visibility, including positioning survivors as more than capable of being involved in research, is what I am most proud of – and what is of the utmost importance when investigating the lived experiences of survivors. Child abuse survivors remain an underrepresented community within research studies, often left out of research concerning themselves due to being too vulnerable or risky to work with. This is particularly the case in contexts where novice researchers are conducting the studies, because exploring experiences of trauma raises ethical concerns that researchers may be unprepared for or that ethics boards have limited capacity to navigate and advise on. However, I maintain that researchers should not perceive vulnerability as a “flashing red light ordering researchers to stop, but rather as a cautionary signal, calling for proper safeguards” (Kipnis, 2001, as cited in Alexander et al., 2018, p. G-4).

Existing research where survivor voices are amplified tends to frame trauma and the experiences of trauma survivors through bio-medical models. This is problematic as it contributes to victim-blaming culture yet remains a dominant theory within and outside of academic and therapeutic contexts. This thesis, however, is underpinned by a TVI theoretical framework and an anti-pathologising approach to understanding trauma, reducing the risk of retraumatising, harming or causing unnecessary distress to the survivor-participants – while reducing the risk of the thesis perpetuating deficit-based understandings of the self.

Enhancing the academic visibility of survivors in the construction of understandings of their own experiences, in a way that is ‘strengths based’ rather than ‘deficit-based,’ may offer empowerment to survivors who encounter this thesis. Survivors may feel empowered by understanding that their voices matter and are needed to inform research.

Survivors may experience empowerment by gaining newfound insights about their ability to experience traumatic growth through traditional or alternative healing approaches, including autobiographical documentary filmmaking or viewing. There is ample opportunity for

survivors to identify their experiences or aspects of their identity in the stories of those represented in this thesis. Such outcomes are particularly valuable for survivors who have maintained their silence due to stigma and fear, been subjected to resistance, victim-blaming, and shame, and who have experienced retraumatisation upon accessing or attempting to access supports.

9.1.3 Validating the Survivor-researcher Positionality and Autoethnographical Approaches

Another novel aspect of the thesis – and one that further amplifies survivor representation in academia – is my positionality as a survivor-researcher. I have not sought to ‘objectively’ contribute to knowledge through this thesis. Rather, I am a “presence” in the research (Bochner, 2016, personal communication). I have sought to embrace and offer radical transparency about my identity, which is of the utmost importance to consider when determining the rigour of the research.

My survivor-researcher positionality and the autoethnographic approach taken were advantageous to conducting the research, allowing me to carry out the project while cultivating a sense of safety for the survivors involved and myself. I drew on my lived experiences of child abuse, trauma, healing, resistance, and shame to mitigate perpetuating myths and stigmatising discourses that victim-blame survivors and protect abuse perpetrators. Such lived experience equipped me to identify and respond to power imbalances between myself and the participants. My lived experiences informed the interviews, allowing me to engage sensitively and empathetically with the participants and to carry out a TVI approach.

Being a survivor has allowed me to maintain interpretative authenticity: I have been able to interpret and represent the data – the interview transcripts and the texts themselves – through a survivor lens. There is a depth of understanding I offer that would be lost on a researcher who is not a survivor, no matter how experienced or knowledgeable they are. Survivors speak a different language, it seems. My depth of understanding seemingly offered the survivor-filmmakers a sense of commonality, cultivating a space for them to authentically share or gift their stories and trust me to hold and represent their experiences with respect and sensitivity.

Indeed, survivor-researchers should tread with caution, but this does not mean that they should not tread at all. This thesis and my experiences position survivors as not only more than capable of being involved as *participants*, but also as more than capable of being the

researcher who explores experiences or accounts that reflect their own lived experiences of abuse.

9.1.4 Hope for Future Survivor-researchers: Calling for a TVI shift in Higher Education

Researchers who position the development of knowledge as an ‘objective’ pursuit may be critical of how I have exposed and honoured my survivor identity and biases, and critical of my engagement with autoethnography. However, this thesis is not for them. It is for the community of researchers, autoethnographers, and most importantly the community of survivors, who speak a similar language to me – where shame has been a central experience following abuse, where victim-blaming, institutional or otherwise, has impacted them in some way, potentially even deterred them away from academic spaces or therapeutic spaces, because there is a prevalent discourse that purports ‘we do not belong here.’

This discourse, and the general lack of institutional support that accompanies challenging the status quo – the prevailing culture of abuse and resistance in academic spaces – have become clear to me through conducting this research. As my autoethnographic reflections revealed, some retraumatisation has been experienced because of this; not because of the research interviews and my engagement with discourses about child abuse and healing. Consequently, I propose that higher education institutions and ethics review boards could explore adopting TVI and culturally responsive frameworks in research, teaching, and supervision practices.

Even when a TVI shift begins to take place – which it inevitably will, as it is beginning to occur across primary and secondary school education contexts, and researchers are beginning to explore what this might look like in higher education (McChesney, 2022) – survivors and survivor-researchers will still need to safeguard themselves to minimise the risk of harm and retraumatisation; a harsh reality that I have been faced with, and one that I have an ethical obligation to acknowledge and respond to. It is my hope that my recommendations surrounding self-preservation and protective factors may offer some hope to researchers and survivors who wish to carry out research that is deeply personal, honours the self, and centres survivors while being a survivor. It is my hope that my account contributes to building safer pathways, where experiences of shame, caused or exacerbated by institutional resistance and abuse, can be moved through and where shame resilience may be developed.

In instances where other survivor-researchers have experienced similar injustices, I hope that my reflections offer validation and reassurance that there is nothing ‘wrong’ with the

survivor. Identifying themselves in my experiences may help other survivor-researchers to move through experiences of imposter syndrome, and direct criticism towards academic institutions for functioning in ways that sustain violence, abuse, and victim-blaming culture.

9.2 Main Findings and Interpretations

Investigations have revealed various avenues and opportunities for therapeutic impact through autobiographical documentary filmmaking and viewing. Three domains of analysis have been examined.

The text domain, where the autobiographical documentary films *Groomed*, *Relative*, *Silent Beauty*, and stills from *Dandelions*, were analysed to understand their discursive function, what aspects of the ‘survivor experience’ are represented, and how such representations are informed by certain representational strategies, documentary codes and conventions, and technological affordances. Analysis revealed representations of discourses pertaining to traumatic memory, resistance, blame and shame, and hope and healing justice, which are interconnected and inform one another. A range of documentary codes and conventions, representational strategies, and audio-visual filmmaking and editing techniques employed by the survivor-filmmakers have afforded such representations.

The production domain, where Gwen van de Pas (*Groomed*), Tracey Arcabasso Smith (*Relative*), Jasmín Mara López (*Silent Beauty*), and Ginene Humphrey (*Dandelions*) were interviewed to understand their experiences, has given life to a new community of practitioner: survivor-filmmakers. Findings revealed several significant wellbeing impacts, and the aspects of autobiographical documentary filmmaking which afforded such outcomes. Wellbeing outcomes that indicate traumatic growth include therapeutically impacting other survivors, experiencing survivorship, re/processing trauma, and challenging shame. Experiencing distress, harm or re/traumatisation, and the navigation of triggers and stressors was identified as a contending experience, creating an ongoing tension between evoking experiences of traumatic growth and traumatic stress. Wellbeing outcomes are afforded by engagement with and the application of certain representational strategies, audio-visual and editing techniques, and strategies to manage and mitigate harm.

The reception domain, where six wellbeing professionals were interviewed (five of whom watched all or some of the three released films) to ascertain how survivor-viewers may respond to and be impacted, illuminated the therapeutic potential of viewing autobiographical

documentaries that represent child abuse and healing for certain survivors, within and outside of professional contexts.

Three themes were generated to summarise the potential wellbeing impacts for survivor-viewers and the documentary affordances that underpin these impacts: experiencing a sense of survivorship; witnessing and feeling survivors; speaking a shared language of shame; and possibilities of healing and traumatic growth.

9.2.1 Platform of Vulnerability

Autobiographical documentary filmmaking functions as a platform of vulnerability, affording survivor-filmmakers' opportunities to practise and experience vulnerability throughout the process and post-release. Such vulnerability can lead to traumatic stress. However, it is what affords traumatic growth, particularly the challenging of shame, which is central to the experiences of survivors. Additionally, it is not a level playing field for all survivor-filmmakers who seek to experience traumatic growth and practise vulnerability.

Such therapeutic impact, and the ongoing tension between experiences of traumatic stress and growth, is underpinned by the relational space that the collaborative filmmaking and release processes affords. While engagement with the filmmaking process requires practising vulnerability, there is one part that demands it more than any other: the release. There is some level of internalised safety for the Survivor-filmmaker pre-release, because the film is still under their control – control, which is relinquished once distribution takes place, as the film can not be retracted once out in the world. This is where life-threatening danger and ongoing distress may lie for the survivor-filmmaker – but it is simultaneously where life-changing survivorship, healing, and the ongoing challenging of shame may be experienced; the experience is a double-edged sword.

9.2.2 Collective Healing Artefacts

Autobiographical documentaries can function as collective healing artefacts, offering opportunities for traumatic growth and healing through survivorship (connection) and community. Collective healing approaches contrast with mainstream individualistic, Eurocentric healing practices. Collective healing refers to therapeutic approaches that acknowledge systemic and collective dimensions of trauma and emphasise the role of community and meaningful connections in the healing process. Indigenous and non-Western communities have long advocated for the therapeutic power of collective healing practices

and storytelling, which have been displaced and ruptured through colonial violence. Healing within community, through connection, survivorship, and storytelling, is ultimately what the creation, dissemination, and consumption of autobiographical documentaries can offer survivors. Both production and dissemination offer relational space for survivor-filmmakers, allowing for connection and challenging shame. The release of the documentaries can be exceptionally powerful and transformative for survivor-filmmakers, as they witness the reach and realise the cultural significance of breaking their silence through their autobiographical documentaries. Thus, the therapeutic impact experienced by survivor-viewers may circulate back to survivor-filmmakers, creating an ongoing loop of challenging shame through shared experiences of abuse, trauma, shame, and healing.

Affording the ability for autobiographical documentary films to function as collective healing artefacts – and affording experiences of vicarious therapy – is how autobiographical documentary representations can transcend cultural boundaries and speak survivors' shared language of shame; their shared experiences of abuse, trauma, victim-blaming, resistance, and shame. The ability to authentically represent aspects of the survivor experience through a range of audio-visual techniques and representational strategies not only affords re/processing for survivor-filmmakers but also the ability for survivor-viewers to witness and feel survivors. This occurs through the evocation of memory and affect, contributing to therapeutic outcomes including experiencing a sense of survivorship, validation, re/processing, and traumatic growth.

9.2.3 Vicarious Therapy

Vicarious therapy refers to the potential therapeutic wellbeing outcomes experienced by survivor-viewers upon witnessing and/or experiencing the effect of another survivor's therapeutic experience. This concept contrasts with 'vicarious trauma' and can be understood as a collective healing modality, as it pertains to the therapeutic transference between survivors, afforded by engagement with autobiographical documentary. Survivor-filmmakers may offer vicarious therapy through representing perspectives and insights from wellbeing professionals or other survivors, which help destigmatise experiences of child abuse and healing. These insights validate survivor experiences, subvert victim-blaming rhetoric, and contribute to conceptualising experiences of child abuse and healing through a systems lens, where external, socio-political factors contributing to trauma and abuse are acknowledged. Vicarious therapy can be offered by evoking therapeutic affective states for viewers through

the application of audio-visual representational strategies, in acknowledgment of their ability to speak survivors' shared language of shame.

9.2.4 Towards Shame-Sensitive Autobiographical Documentary Filmmaking Practices

The research findings, predominantly the significance of shame for survivor-filmmakers, and the ongoing tension between evoking traumatic growth and stress, underscore the need for shame-sensitive, TVI approaches to autobiographical documentary filmmaking, particularly in contexts of representing child abuse, trauma, and healing. The work of the DAWG has made significant steps towards establishing such frameworks, arguing that “the process is the product” (2022, p. 1) – as is the case for survivor-filmmakers. Extending on this sentiment, I propose that re/processing child abuse and trauma becomes intertwined with the filmmaking process. Building on the guidelines that the DAWG (2022) put forward, I propose that there is a need for survivor-filmmakers, documentarians broadly, and industry stakeholders to implement shame-sensitivity in their practices, considering how shame may be evoked or challenged throughout.

9.3 Implications and Future Research Avenues

The research findings emphasise the therapeutic impact and harm potential of alternative, creative-based healing approaches, demonstrating how autobiographical filmmaking and viewing can evoke traumatic growth and stress for abuse survivors.

The findings raise questions about how potential wellbeing impacts may diverge across contexts, particularly regarding the limitations of therapeutic impact when filmmaking occurs within professional therapeutic settings. This is due to ethical and confidentiality concerns, which may constrain the possibilities for release and distribution – and thus potentially obscure the documentary's ability to function as a collective healing artefact.

The findings breathe new life into cinematherapy, positioning autobiographical documentaries about child abuse and healing as therapeutic resources for therapists and/or other wellbeing professionals to potentially utilise with survivors. Supporting this is the introduced concept of ‘vicarious therapy,’ which expands the bounds of cinematherapy to include engagement with overt representations of abuse and healing; a divergence from how cinematherapy has traditionally been utilised in therapeutic practice. The findings suggest a need for therapists to broaden and decolonise their practice to include community-based and collective healing approaches when working with survivors, particularly because shame

requires community and connection to challenge. Cinematherapy, through the evocation of vicarious therapy, may provide an avenue to do this.

These implications suggest the need to investigate the divergences in wellbeing outcomes for both survivor-filmmakers and survivor-viewers between independent filmmaking contexts and professionally guided therapeutic spaces. They suggest the need to investigate how wellbeing professionals may utilise autobiographical documentaries to administer cinematherapy, and how autobiographical documentary filmmaking may be utilised as a healing modality alongside professionals.

The findings underscore the value of community, survivorship, and engagement with autobiographical documentary storytelling (as survivor-filmmakers or survivor-viewers) and other collective approaches to heal and re/process abuse related trauma. This challenges the notion that professional therapy, particularly when the therapist takes an individualistic approach, is the healing pathway survivors should take, and instead positions survivors as active agents in their healing journey, whether that involves professional guidance. However, there is scope for developing understandings about the limitations, long term-wellbeing impacts on survivor-filmmakers, and how the tension between traumatic growth and traumatic stress may be managed or responded to in ways that consider and respond to shame; a central experience for survivors, with the potential to be challenged and evoked through both filmmaking and viewing processes. This is where longitudinal studies with survivor-filmmakers and ARS with survivor cohorts would be valuable research avenues.

The findings suggest the need to adopt shame-sensitivity within autobiographical documentary practices. As with any ethical guidelines in the contexts of documentary ethics and TVI practices, there is ongoing scope for development, refinement, and investigation into how guidelines and recommendations might transcend socio-cultural contexts. This is particularly given the diverging ways vulnerability may be experienced and evoked across socio-cultural contexts and identities (Yazeed, 2023; 2021). This is where research with existing and future survivor-filmmakers, creative practice-led research to uncover new therapeutic techniques and strategies, and with documentary ethics advisors would be invaluable for developing understandings of how particular communities of survivor-filmmakers, survivor-participants, and even survivor-viewers may be best protected from distress, harm, and retraumatisation.

9.3.1 Responding to Research Limitations

As with all research, this thesis has its limitations, providing fertile ground for future research endeavours to materialise. Although nuanced, the four survivor-filmmakers' experiences of abuse are centred around child sexual abuse (touching on other forms of abuse). This adds to the dominance of sexual abuse representations when compared to other forms of abuse, and raises questions about other forms of abuse and the effectiveness of autobiographical documentary filmmaking as a healing modality. Additionally, utilising four autobiographical documentaries as case studies produced in Western contexts limits the representation of survivor identities and the ability to identify nuances between experiences, thus obscuring the identified wellbeing impacts.

In response to the limited scope of child abuse representations, and the respective survivor-filmmaker interview accounts, similar studies with other survivor-filmmakers could be replicated or conducted to build upon and challenge the conclusions I have put forward. The perspectives of all survivors are valuable, especially given that this is an emerging area of scholarship. However, it would be particularly beneficial to amplify the perspectives of survivors who come from and create their documentaries in non-Western spaces. Having cross-cultural perspectives would contribute to building a diversified understanding of the experiences of survivor-filmmakers. Light could be shed on their nuanced relationships with vulnerability and shame, and on how certain aspects of identity and social circumstances impact these relationships, and thus the autobiographical documentary filmmaking process and the wellbeing outcomes experienced.

Similarly, the scope of the wellbeing professional participants is limited, and there is considerable opportunity to gather perspectives from those outside Aotearoa and Western contexts, as well as from those who use specific approaches, modalities, and frameworks for understanding wellbeing and trauma. For example, researchers could engage with professionals who work from an anti-pathologising standpoint, and healers who take holistic approaches to healing abuse related trauma.

The four survivor-filmmakers were at diverging stages of their creative filmmaking process when the interviews were conducted, and the documentaries are of contemporary relevance as they were released between 2021-2024, while *Dandelions* is yet to premiere. Such contemporary relevance is a strength of the thesis. However, it means that investigating and understanding the long-term wellbeing impacts upon survivor-filmmakers has been limited.

To understand the long-term impacts, follow-up studies with the survivor-filmmakers in this thesis may be conducted, and longitudinal studies with future autobiographical documentary filmmakers who represent discourses about abuse and healing. The experiences of survivor-filmmakers who are years or decades beyond the release may be researched to better understand the potential long-term wellbeing impacts. Participants in this study did not include any survivor-participants or survivor-creatives of the autobiographical documentaries studied. Survivor-participants and survivor-creatives may be investigated to cultivate a deeper understanding of how they have been impacted and how their experiences diverge from, or affect, the wellbeing outcomes of survivor-filmmakers.

Another glaring limitation of this thesis is the exclusion of an ARS with survivors who have watched the autobiographical documentary texts in question. Instead, I interviewed wellbeing professionals to understand their thoughts as experts who have worked with or will work with survivors (and who may be survivors themselves, as two disclosed). This is obviously not a replacement for survivor perspectives, but an alternative avenue for providing insights about the potential impacts for survivor-viewers. Accordingly, there is a need to conduct ARCs with survivors, to understand how viewing autobiographical documentaries about child abuse and healing can enhance and hinder their healing trajectory and ability to move towards traumatic growth. There is a need to direct attention towards the healing ‘stage,’ aspect of trauma, or trauma responses that survivors may be contending with, and how the filmmaking and viewing processes impact specific aspects of healing.

9.3.2 Final Thoughts: Key Thesis Takeaways

Pursuing any of the outlined areas of investigation would contribute to understandings about wellbeing outcomes, and how they diverge or align with affordances and engagement with representational strategies (for survivor-filmmakers and survivor-viewers). Research would contribute to a niche but burgeoning academic landscape at the intersection between autobiographical documentary theory, psychological theory, and healing from abuse related trauma – which this thesis occupies and exposes. To summarise the key takeaways from the thesis:

Autobiographical documentary filmmaking affords significant therapeutic impact potential for survivor-filmmakers/viewers, by way of challenging shame, through: engagement with vulnerability; cultivating survivorship through collaboration; experimenting with representational strategies, which can speak the language of shame and afford opportunities

for re/processing, and connection; the evocation of vicarious therapy for survivor-viewers; and the films' ability to function as a collective healing artefact.

As child abuse survivors, we are forced to exist and navigate trauma in a world where we are victim-blamed, disempowered, gaslit, and shamed. However, as López reminds us, “we don’t have to carry the shame.” This thesis gives life to autobiographical documentary filmmaking and viewing as a creative-based therapeutic pathway for survivors of child abuse to challenge and let go of shame that never should have been ours to carry.

Chapter Ten: References

- Aadnanes, M., & Gulbrandsen, L. M. (2018). Young people and young adults' experiences with child abuse and maltreatment: Meaning making, conceptualizations, and dealing with violence. *Qualitative Social Work*, 17(4), 594-610.
<https://doi.org/10.1177/1473325016683245>
- Abuse in Care Royal Commission of Inquiry. (2024). *Whanaketia – through pain and trauma, from darkness to light*. <https://www.abuseincare.org.nz/reports/whanaketia>
- Aiston, S. J., & Fo, C. K. (2021). The silence/ing of academic women. *Gender and Education*, 33(2), 138-155, <https://doi.org/10.1080/09540253.2020.1716955>
- Ajilian Abbasi, M., Saeidi, M., Khademi, G., Hoseini, B. L., & Emami Moghadam, Z. (2015). Child maltreatment in the world: A review article. *International Journal of Pediatrics*, 3(1.1), 353-365. <https://doi.org/10.22038/ijp.2015.3753>
- Akoorie, K. (2022, August 3). 'Horrificing': Laws allowing consent as a court defence for sex with a minor need reform. New Zealand Herald.
<https://www.nzherald.co.nz/nz/horrifying-laws-allowing-consent-as-a-court-defence-for-sex-with-a-minor-need-reform/4Y6DOFVSK3BXZUT5FGJ4DZTVDY/>
- Alessi, E. J., & Kahn, S. (2022). Toward a trauma-informed qualitative research approach: Guidelines for ensuring the safety and promoting the resilience of research participants. *Qualitative Research in Psychology*, 20(1), 121-154.
<https://doi.org/10.1080/14780887.2022.2107967>
- Alexander, S., Pillay, R., & Smith, B. (2018). A systematic review of the experiences of vulnerable people participating in research on sensitive topics. *International Journal of Nursing Studies*, 88, 85-96. <https://doi.org/10.1016/j.ijnurstu.2018.08.013>
- American Counseling Association. (2013). *Fact Sheet #9: Vicarious trauma*.
<https://www.scribd.com/document/330608502/fact-sheet-9-vicarious-trauma>
- American Psychological Association. (2003). *Statement on Diagnosis and Treatment of Mental Disorders* (Release no 03-39, September 25, 2003).
<https://mindfreedom.org/kb/act/2003/mf-hunger-strike/apa-statement-on-diagnosis-and-treatment-of-mental-disorders/>
- American Psychological Association. (2024). *Trauma*.
<https://www.apa.org/topics/trauma#:~:text=Any%20disturbing%20experience%20that%20results,and%20other%20aspects%20of%20functioning>
- Amstadter, A. B., & Vernon, L. L. (2008). Emotional reactions during and after trauma: A comparison of trauma types. *Journal of Aggression, Maltreatment & Trauma*, 16(4), 391-408. <https://doi.org/10.1080/10926770801926492>
- Anderst, L. (2017). The self as evidence and collaborative identity in contemporary autobiographical documentary. *a/b: Auto/Biography Studies*, 32(2), 255-257.
<https://doi.org/10.1080/08989575.2017.1288030>

- Andrews, B. (1998). Shame and childhood abuse. In P. Gilbert & B. Andrews (Eds.), *Shame: Interpersonal behavior, psychopathology, and culture* (pp. 176-190). Oxford University Press.
- Angeli, S. (2021). 'A polyphonic tale': Arendt, Cavarero and storytelling in Sarah Polley's *Stories We Tell* (2012). *Empedocles: European Journal for the Philosophy of Communication*, 12(1), 75-89. https://doi.org/10.1386/ejpc_00029_1
- Arcabasso Smith, T. (Dir.). (2022). *Relative* [Documentary]. Field of Vision, The We Collective.
- Archard, D. (1998). Can child abuse be defined? In M. King (Ed.), *Moral agendas for children's welfare* (pp. 57-68). <https://www.taylorfrancis.com/chapters/edit/10.4324/9780203004517-5/child-abuse-defined-david-archard>
- Arthur, P. (1993). Jargons of authenticity (three American moments). In M. Renov (Ed.), *Theorizing Documentary* (pp. 108-134). Routledge.
- Assmann, A. (2006). Memory, individual and collective. In R. Goodin & C. Tilly (Eds.), *The Oxford handbook of contextual political analysis* (pp. 210-244). <https://doi.org/10.1093/oxfordhb/9780199270439.003.0011>
- Aufderheide, P. (2024). Ethics in documentary film production: Asserting and changing norms. *Journal of Film and Video*, 76(1), 15-3. <https://doi.org/10.5406/19346018.76.1.03>
- Aufderheide, P., Jaszi, P., & Chandra, M. (2009). *Honest truths: Documentary filmmakers on ethical challenges in their work*. Center for Social Media. <https://cmsimpact.org/resource/honest-truths-documentary-filmmakers-on-ethical-challenges-in-their-work/>
- Barnes, A. M., & McCreanor, T. (2023). "Feeding people's beliefs": Mass media representations of Māori and criminality. *The Routledge International Handbook on Decolonizing Justice* (pp. 22-32). Routledge. <https://doi.org/10.4324/9781003176619-4>
- Barnouw, E. (1993). *Documentary: A history of the non-fiction film* (2nd ed). Oxford University Press.
- Baron, J. (2012). The archive effect: Archival footage as an experience of reception. *Projections*, 6(2), 102-120. <https://doi.org/10.3167/proj.2012.060207>
- Baron, J. (2014). *The archive effect: Found footage and the audiovisual experience of history*. Routledge.
- Bazil, M. (2022). *Family, archive, and the posttraumatic imaginary: An analysis of the role of archival material in the personal documentaries Stories We Tell, The Imam and I, and Grandpa Ernest Speaks*. (Master Thesis, University of Cape Town). <http://hdl.handle.net/11427/37860>

- Beard, G. (2021, May 6). *Transcript of Gwyneth Beard for Abuse in State Care Children's Residential Care Hearing*. Abuse in Care Royal Commission of Inquiry. New Zealand. <https://www.abuseincare.org.nz/our-progress/library/v/241/statement-of-gwyneth-beard-for-the-state-childrens-residential-care-hearing>
- Beddoe, L. (2014, April 15-17). 'Racism, 'bad mothers' and child abuse in news media: A role for social work advocacy'. 4th European Conference for Social Work Research. Bolzano, Italy. <http://hdl.handle.net/2292/22455>
- Benjet, C., Bromet, E., Karam, E. G., Kessler, R. C., McLaughlin, K. A., Ruscio, A. M., Shahly, V., Stein, D. J., Petukhova, M., Hill, E., Alonso, J., Atwoli, L., Bunting, B., Bruffaerts, R., Caldas-de-Almeida, J. M., de Girolamo, G., Florescu, S., Gureje, O., Huang, Y., ... Koenen, K. C. (2015). The epidemiology of traumatic event exposure worldwide: results from the World Mental Health Survey Consortium. *Psychological Medicine*, 46(2), 327-343. <https://doi.org/10.1017/S0033291715001981>
- Berg-Cross, L., Jennings, P., & Baruch, R. (1990). Cinematherapy: Theory and application. *Psychotherapy in Private Practice*, 8(1), 135-156. https://www.tandfonline.com/doi/abs/10.1300/J294v08n01_15
- Berger, R. (2013). Now I see it, now I don't: Researcher's position and reflexivity in qualitative research. *Qualitative Research*, 15(2), 219-234. <https://doi.org/10.1177/1468794112468475>
- Berzenski, S. R., & Yates, T. M. (2022). The development of empathy in child maltreatment contexts. *Child Abuse & Neglect*, 133, 105827, 1-19. <https://doi.org/10.1016/j.chiabu.2022.105827>
- Black, C., Frederico, M., & Bamblett, M. (2019). Healing through connection: An Aboriginal community designed, developed and delivered cultural healing program for Aboriginal survivors of institutional child sexual abuse. *The British Journal of Social Work*, 49(4), 1059-1080. <https://doi.org/10.1093/bjsw/bcz059>
- Bochner, A. P. (2016, April 8). *The rise of autoethnography: Stretching boundaries, fashioning identities, healing wounds*. GCA Keynote Presentation. <https://www.youtube.com/watch?v=X3EJfPN9sIg>
- Bochner, A. P. (2020) Autoethnography as a way of life: Listening to tinnitus teach. *Journal of Autoethnography*, 1(1), 81-92. <https://doi.org/10.1525/joae.2020.1.1.81>
- Bochner, A. P., & Ellis, C. (2022). Why autoethnography? *Social Work and Social Sciences Review*, 23(2), 8-18. <https://doi.org/10.1921/swssr.v23i2.2027>
- Bonner, F. (2013). Recording reality: Documentary film and television. In S. Hall, J. Evans & S. Nixon (Eds.), *Representation* (2nd ed., pp. 60-99). Sage.
- Borum Chattoo, C., & Jenkins, W. (2019). From reel life to real social change: The role of contemporary social-issue documentary in U.S. public policy. *Media, Culture & Society* 41(8), 1107-1124. <https://doi.org/10.1177/0163443718823145>

- Boshier, P. (2024). *Children in care: Complaints to the Ombudsman 2019-2023*. Office of the Ombudsman 2024. <https://www.ombudsman.parliament.nz/resources/children-care-complaints-ombudsman-2019-2023>
- Braun, V., & Clarke, V. (2013). *Successful qualitative research: A practical guide for beginners*. Sage.
- Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative Research in Sport, Exercise & Health*, 11(4), 589-597. <https://doi.org/10.1080/2159676X.2019.1628806>
- Braun, V., & Clarke, V. (2020). Can I use TA? Should I use TA? Should I not use TA? Comparing reflexive thematic analysis and other pattern-based qualitative analytic approaches. *Counselling and Psychotherapy Research*, 21(1), 37-47. <https://doi.org/10.1002/capr.12360>
- Braun, V., & Clarke, V. (2022a). *Thematic analysis: A practical guide*. Sage
- Braun, V., & Clarke, V. (2022b). Toward good practice in thematic analysis: Avoiding common problems and be(com)ing a knowing researcher. *International Journal of Transgender Health*, 24(1), 1-6. <https://doi.org/10.1080/26895269.2022.2129597>
- Bravo-Moreno, A. (2022). Demystifying the academy: Resistance, ethics and abuse of power. *Power and Education*, 14(2), 140-156. <https://doi.org/10.1177/17577438211068283>
- Brinkmann, S., & Kvale, S. (2015). *InterViews: Learning the craft of qualitative research interviewing*. (3rd ed.) Sage.
- Brown, B. (2006). Shame resilience theory: A grounded theory study on women and shame. *Families in Society*, 87(1), 43-52. <https://doi.org/10.1606/1044-3894.3483>
- Brown, B. (2007, April 18). *Shame and empathy by Dr. Brené Brown* [Video]. YouTube. <https://www.youtube.com/watch?v=qQiFfA7KfF0>
- Brown, B. (2020). *The gifts of imperfection: 10th anniversary edition* (2nd ed.). Vermilion.
- Brown, B. (2021). *Atlas of the heart: Mapping meaningful connection and the language of human experience*. Vermilion.
- Brown, S., & Eberle, M. (2017). A closer look at play. In T. Marks-Tarlow, D. J. Siegel, & M. F. Solomon (Eds.), *Play and creativity in psychotherapy* (pp. 21-38). WW Norton & Company.
- Brown, S., & Vaughan, C. (2009). *Play: How it shapes the brain, opens the imagination, and invigorates the soul*. Penguin.
- Bruss, E. (1980). Eye for I: Making and unmaking autobiography in film. In J. Olney (Ed.), *Autobiography: Essays theoretical and critical* (pp. 296-320). Princeton University Press.
- Bruzzi, S. (2006). *New Documentary* (2nd ed.). Routledge.

- Brzuzy, S., Ault, A., & Segal, E. A. (1997). Conducting qualitative interviews with women survivors of trauma. *Affilia: Feminist Inquiry in Social Work*, 12(1), 76-83.
<https://doi.org/10.1177/088610999701200105>
- Buczynski, R. (2020). *Transcript for Module 4: How to ease the pain of trauma-induced shame*. [Advances in the treatment of trauma course]. National Institute for the Clinical Application of Behavioral Medicine. <https://eaph.ie/wp-content/uploads/2020/11/Trauma-Induced-Shame-Transcript.pdf>
- Budden, A. (2009). The role of shame in posttraumatic stress disorder: A proposal for a socio-emotional model for DSM-V. *Social Science and Medicine*, 69(7), 1032-1039.
<https://doi.org/10.1016/j.socscimed.2009.07.032>
- Bullock Brown, N., & Childress, S. (2020, July 2). The documentary future: A call for accountability. International Documentary Association.
<https://www.documentary.org/feature/documentary-future-call-accountability>
- Burgess-Proctor, A. (2015). Methodological and ethical issues in feminist research with abused women: Reflections on participants' vulnerability and empowerment. *Women's Studies International Journal*, 48(1), 124-134.
<https://doi.org/10.1016/j.wsif.2014.10.014>
- Burstow, B. (2003). Toward a radical understanding of trauma and trauma work. *Violence Against Women*, 9(11), 1293-1317. <https://doi.org/10.1177/1077801203255555>
- Callaghan, J. E. M., Fellin, L. C., Mavrou, S., Alexander, J., & Sixsmith, J. (2017). The management of disclosure in children's accounts of domestic violence: Practices of telling and not telling. *Journal of Child and Family Studies*, 26(12), 3370-3387.
<https://doi.org/10.1007/s10826-017-0832-3>
- Campbell, R., Adams, A. E., Wasco, S. M., Ahrens, C. E., & Sefl, T. (2010). "What has it been like for you to talk with me today?": The impact of participating in interview research on rape survivors. *Violence Against Women*, 16(1), 60-83.
<https://doi.org/10.1177/1077801209353576>
- Caouette, J. (Dir). (2003). *Tarnation* [Documentary]. Jonathan Caouette.
- Caruth, C. (1996). *Unclaimed experience: Trauma, narrative, and history*. Johns Hopkins University Press.
- Child Matters. (2019). *How Can I Tell? Recognising Child Abuse* (8th Edition, ISBN 978-0-473-12405-2). <https://www.childmatters.org.nz/downloads/2019-HCIT-PDF.pdf>
- Child Matters. (2023). *What is Child Abuse?*
<https://www.childmatters.org.nz/awareness/what-is-child-abuse/>
- Christie, N. (1986). The Ideal Victim. In E. A. Fattah, (Ed.), *From crime policy to victim policy* (pp. 17-30). Palgrave Macmillan https://doi.org/10.1007/978-1-349-08305-3_2
- Citron, M. (1999). Fleeing from documentary: Autobiographical film/video and the "Ethics of Responsibility". In D. Waldman & J. Walker (Eds.), *Feminism and documentary*

- (pp. 271-286).
http://womenfilmeditors.princeton.edu/wpcontent/uploads/2019/10/Michelle_Citron_Fleeing_from_Documentary.pdf
- Citron, M. (Dir.). (1980). *Daughter Rite* [Documentary]. Iris Films.
- Clark, V. E. (2021). Victim-blaming discourse underpinning police responses to domestic violence: A critical social work perspective. *Social Work & Policy Studies: Social Practice and Theory*, 4(1), Student edition 2021, 1-15.
<https://openjournals.library.sydney.edu.au/index.php/SWPS/article/view/14959?s=09>
- Clarke, S. (2024, May 24). *U.S. documentary filmmakers and execs shake off the post-boom gloom & ponder life after the golden age — Cannes*. Deadline.
<https://deadline.com/2024/05/documentary-industry-ponders-life-after-the-golden-age-imagine-cinetic-submarine-cannes-1235928460/>
- Cohen, J. L. (2012). *Film and soul: A theoretical exploration of the use of video and other film-based therapy to help transform identity in therapeutic practice*. [Doctoral thesis, Pacifica Graduate Institute]. Pacifica Graduate Institute.
<https://catalog.my.pacifica.edu/cgi-bin/koha/opac-detail.pl?biblionumber=38648>
- Cohen, J. L. (2023). *Film/video-based therapy and trauma: Research and practice* (Advances in mental health research series). Routledge.
- Cohen, J. L., & Johnson, J. L. (2015). *Video and filmmaking as psychotherapy: Research and practice* (Advances in mental health research series). Routledge.
- Cohen, J. L., & Orr, P. P. (2015). Film/video-based therapy and editing as process from depth psychological perspective. In J. L. Cohen & J. L. Johnson (Eds.), *Video and filmmaking as psychotherapy* (pp. 29-42). Routledge.
- Cole, S. G. (2022, May 3). *Relative review: Giving survivors' a voice*. POV Magazine.
<https://povmagazine.com/relative-review-giving-survivors-a-voice/>
- Coleman, E. (2024). The work of documentary relationships. *European Journal of Cultural Studies*, 27(5), 1056-1073. <https://doi.org/10.1177/13675494231208501>
- Corrigan, T. (2011). *The essay film: From Montaigne, after Marker*. Oxford University Press.
<https://doi.org/10.1111/j.1467-8705.2011.02009.x>
- Coulson, N. S., Bullock, E., & Rodham, K. (2017). Exploring the therapeutic affordances of self-harm online support communities: An online survey of members. *Journal of Medical Internet Research-Mental Health*, 4(4), e44.
<https://doi.org/10.2196/mental.8084>
- Craven, S., Brown, S., & Gilchrist, E. (2006). Sexual grooming of children: Review of literature and theoretical considerations. *Journal of Sexual Aggression*, 12(3), 287-299. <https://doi.org/10.1080/13552600601069414>
- Cucinelli, G., René-Véronneau, É., & Oldford, B. (2018). Interactive documentaries and the connected viewer experience: Conversations with Katerina Cizek, Brett Gaylor, Jeff

- Soyk, and Florian Thalhofer. *First Monday*, 23(5).
<https://doi.org/10.5210/fm.v22i5.6182>
- Cunha, M., Matos, M., Faria, D., & Zagalo, S. (2012). Shame memories and psychopathology in adolescence: The mediator effect of shame. *International Journal of Psychology and Psychological Therapy*, 12(2), 203-218.
<https://www.ijpsy.com/volumen12/num2/327/shame-memories-and-psychopathologyin-adolescence-EN.pdf>
- D'Aloia, A. (2012). Film in depth. Water and immersivity in the contemporary film experience. *Acta Universitatis Sapientiae, Film and Media Studies*, (5), 87-106.
<https://www.cceol.com/search/article-detail?id=105988>
- D'Amore, C., Martin, S. L., Wood, K., & Brooks, C. (2018). Themes of healing and posttraumatic growth in women survivors' narratives of intimate partner violence. *Journal of Interpersonal Violence*, 36(5-6), NP2697-NP2724.
<https://doi.org/10.1177/0886260518767909>
- Davis, K. C., Masters, N. T., Casey, E., Kajumulo, K. F., Norris, J., & George, W. H. (2018). How childhood maltreatment profiles of male victims predict adult perpetration and psychosocial functioning. *Journal of Interpersonal Violence*, 33(6), 915-937.
<https://doi.org/10.1177/0886260515613345>
- De Rosa, M., & Burgess, M. (2014). *Learning from documentary audiences: A market research study*. Hot Docs. <https://hotdocs.ca/industry/film-funds/resources>
- Deckert, A. (2020). Indigeneity matters: Portrayal of women offenders in New Zealand newspapers. *Crime, Media, Culture: An International Journal*, 16(3), 337-357.
<https://doi.org/10.1177/1741659019873771>
- del Barco, M. (2019, February 19). *The documentary is in – and enjoying an 'undeniable golden age'*. NPR. <https://www.npr.org/2019/02/19/696036323/the-documentary-is-in-and-enjoying-anundeniable-golden-age>
- Delker, B. C., Salton, R., & McLean, K. C. (2019). Giving voice to silence: Empowerment and disempowerment in the developmental shift from trauma 'victim' to 'survivor-advocate'. *Journal of Trauma & Dissociation*, 21(2), 1-22.
<https://doi.org/10.1080/15299732.2019.1678212>
- Dempster-Rivett, K. (2022). *Making the invisible visible: Exploring the complex pathways between childhood experiences of maltreatment and the perpetration of family harm* [Doctoral thesis, The University of Waikato]. Research Commons at the University of Waikato.
<https://researchcommons.waikato.ac.nz/bitstream/handle/10289/14918/thesis.pdf?sequence=4&isAllowed=y>
- Denne, E., St. George, S., & Stolzenberg, S. N. (2023a). Myths and misunderstandings about child sexual abuse in criminal investigations. *Journal of Interpersonal Violence*, 38(1-2), 1893-1919. <https://doi.org/10.1177/08862605221093679>

- Denne, E., St. George, S., & Stolzenberg, S. N. (2023b). Developmental considerations in how defense attorneys employ child sexual abuse and rape myths when questioning alleged victims of child sexual abuse. *Journal of Interpersonal Violence*, 38(23-24), 11914-11934. <https://doi.org/10.1177/08862605231189512>
- Denzin, N. K., & Lincoln, Y. S. (2000). Introduction: The discipline and practice of qualitative research. In N. K. Denzin, & Y. S. Lincoln (Eds.), *The Sage handbook of qualitative research* (2nd ed., pp. 1-28). Sage.
- Denzin, N. K., & Lincoln, Y. S. (2013). Locating the field. In N. K. Denzin, & Y. S. Lincoln (Eds.), *The landscape of qualitative research* (4th ed.). Sage.
- DeYoung, P. A. (2021). *Understanding and treating chronic shame: Healing right brain relational trauma* (2nd ed.). Routledge. <https://doi.org/10.4324/9780367814328>
- Dick, K. (Dir.). (2012). *The Invisible War* [Documentary]. Chain Camera Pictures.
- Documentary Accountability Working Group. (2022). *From reflection to release: Framework for values, ethics, and accountability in nonfiction filmmaking*. <https://www.docaccountability.org/framework>
- Dodemaide, P., Joubert, L., Merolli, M., & Hill, N. (2019). Exploring the therapeutic and nontherapeutic affordances of social media use by young adults with lived experience of self-harm or suicidal ideation: A scoping review. *Cyberpsychology, Behavior, and Social Networking*, 22(10), 622-633. <https://doi.org/10.1089/cyber.2018.0678>
- Dodemaide, P., Merolli, M., & Joubert, L. (2025). Therapeutic social media guidelines for young adults: A Delphi study. *The British Journal of Social Work*, 55(5), 1-24. <https://doi.org/10.1093/bjsw/bcaf050>
- Dodemaide, P., Merolli, M., Hill, N., & Joubert, L. (2021). Therapeutic affordances of social media and associated quality of life outcomes in young adults. *Social Science Computer Review*, 41(1), 44-63. <https://doi.org/10.1177/08944393211032940>
- Dolezal, L., & Gibson, M. (2022). Beyond a trauma-informed approach and towards shame-sensitive practice. *Humanities & Social Sciences Communications*, 9, 214. <https://doi.org/10.1057/s41599-022-01227-z>
- Douglas, J. (2023). Research from the heart: Friendship and compassion as personal research values. In M. Dever (Ed.), *New feminist research ethics* (pp. 1-17). Routledge.
- Dowmunt, T. (2013). Autobiographical documentary—the ‘seer and the seen.’ *Studies in Documentary Film*, 7(3), 263-277. https://doi.org/10.1386/sdf.7.3.263_1
- Dragiewicz, M., Woodlock, D., Easton, H. (2023). “I’ll be Okay”: Survivors’ perspectives on participation in domestic violence research. *Journal of Family Violence*, 38, 1139-1150. <https://doi.org/10.1007/s10896-023-00518-6>
- Draucker, C. B. (1999). The emotional impact of sexual violence research on participants. The emotional impact of sexual violence research on participants. *Archives of Psychiatric Nursing*, 13(4), 161-169. [https://doi.org/10.1016/S0883-9417\(99\)80002-8](https://doi.org/10.1016/S0883-9417(99)80002-8)

- du Gay, P., Hall, S., Janes, L., Mackay, H., & Negus, K. (1997). *Doing cultural studies: The story of the Sony Walkman*. Sage.
- du Gay, P., Hall, S., Janes, L., Madsen, A. K., Mackay, H., & Negus, K. (2013). *Doing cultural studies: The story of the Sony Walkman* (2nd ed.). Sage.
- DuMont, J., & Stermac, L. (1996). Research with women who have been sexually assaulted: Examining informed consent. *Canadian Journal of Human Sexuality*, 5, 185-191. <https://go.gale.com/ps/i.do?id=GALE%7CA30201345&sid=googleScholar&v=2.1&it=r&linkaccess=abs&issn=11884517&p=HRCA&sw=w&userGroupName=anon%7E84233df8&aty=open-web-entry>
- Eagleman, D. (2011). *Incognito: The secret lives of the brain*. Vintage.
- Edelman, N. L. (2023). Trauma and resilience informed research principles and practice: A framework to improve the inclusion and experience of disadvantaged populations in health and social care research. *Journal of Health Services Research & Policy*, 28(1), 66-75. <https://doi.org/10.1177/13558196221124740>
- Edwards, M., Mitchell, L., Abe, C., Cooper, E., Johansson, J., & Ridgway, M. (2022). 'I am not a gentleman academic': Telling our truths of micro-coercive control and gaslighting in business schools using 'Faction'. *Gender, Work and Organization*, 31(5), 1999-2018. <https://doi.org/10.1111/gwao.12905>
- Eelmaa, S., & Murumaa-Mengel, M. (2022). Who is worthy of help? Constructing the stereotype of the "ideal victim" of child sexual abuse. *Advance*. <https://doi.org/10.31124/advance.14378762.v1>
- Ellis, C., & Bochner, A. P. (2000). Autoethnography, personal narrative, reflexivity: Researcher as subject. In N. Denzin & Y. Lincoln (Eds.), *Handbook of qualitative research* (pp. 733-768). Sage.
- Engel, G. L. (1977). The need for a new medical model: A challenge for biomedicine. *Science*, 196, 129-136. <https://doi.org/10.1126/science.847460>
- Every-Palmer, S., Grant, M. L., Thabrew, H., Hansby, O., Lawrence, M., Jenkins, M., & Romans, S. (2024). Not heading in the right direction: Five hundred psychiatrists' views on resourcing, demand, and workforce across New Zealand mental health services. *Australian & New Zealand Journal of Psychiatry*, 58(1), 82-91. <https://doi.org/10.1177/00048674231170572>
- Fairclough, N. (1992a). Linguistic and intertextual analysis within discourse analysis. *Discourse and Society*, 3(2), 193-217. <http://doi.org/10.1177/0957926592003002004>
- Fairclough, N. (1992b). *Discourse and social change*. Blackwell.
- Fairclough, N. (1998). *Critical discourse analysis: The critical study of language* (3rd ed.). Longman.
- Fairclough, N. (2001). *Language and power* (2nd ed.). Longman.

- Fairclough, N., & Wodak, R. (1997). Critical discourse analysis. In T. A. van Dijk (Ed.), *Discourse as social interaction: Discourse studies: A multidisciplinary introduction* (Volume 2, pp. 258-284). Sage.
- Fanslow, J. L., Kelly, P., & Ministry of Health. (2016). *Family violence assessment and intervention guideline: Child abuse and intimate partner violence* (2nd ed.). Ministry of Health. <https://www.tewhātuora.govt.nz/health-services-and-programmes/family-violence-and-sexual-violence/health-professional-resources>
- Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The adverse childhood experiences (ACE) study. *American Journal of Preventive Medicine*, 14(4), 245-258. [https://doi.org/10.1016/S0749-3797\(98\)00017-8](https://doi.org/10.1016/S0749-3797(98)00017-8)
- Felman, S., & Laub, D. (1992). *Testimony: Crises of witnessing in literature, psychoanalysis, and history*. Routledge.
- Fiennes, S. (Dir.). (2006). *The Pervert's Guide to Cinema*. [Documentary]. Mischief Films.
- Finlay, L. (2016). Probing between: Reflexive-relational approaches to human science research. In C. Fischer, L. Laubscher & R. Brooke (Eds.), *The qualitative vision: An invitation to the human science approach* (pp. 71-90). Duquesne University Press.
- Fishbane, M. (2007). Wired to connect: Neuroscience, relationships, and therapy. *Family Process*, 46(3), 395-412. <https://doi.org/10.1111/j.1545-5300.2007.00219.x>
- Fisher, J. (2017). *Healing the fragmented selves of trauma survivors: Overcoming internal self-alienation*. Routledge. <https://doi.org/10.4324/9781315886169>
- Flood, M., Brown, C., Dembele, L., & Mills, K. (2022). *Who uses domestic, family, and sexual violence, how, and why? The State of Knowledge Report on Violence Perpetration*. Queensland University of Technology. <https://research.qut.edu.au/centre-for-justice/wp-content/uploads/sites/304/2023/01/Who-uses-domestic-family-and-sexual-violence-how-and-why-The-State-of-Knowledge-Report-on-Violence-Perpetration-2023.pdf>
- Flynn, A., Cama, E., Powell, A., & Scott, A. J. (2023). Victim-blaming and image-based sexual abuse. *Journal of Criminology*, 56(1), 7-25. <https://doi.org/10.1177/26338076221135327>
- Flynn, A., Cama, E., Scott, A. J. (2022). *Preventing image-based abuse in Australia: The role of bystanders* (Report to the Criminology Research Advisory Council Grant: CRG 02/18-19). Australian Institute of Criminology. <https://www.aic.gov.au/crg/reports/crg-0218-19>
- ForReel. (2022, May 5). *Hot Docs 2022: Discussion with Tracey Arcabasso Smith, Director of "Relative"* [Thomas Stoneham-Judge interviews Tracey Arcabasso Smith upon the

- release of *Relative* at the 2022 HotDocs Film Festival]. YouTube.
<https://www.youtube.com/watch?v=Nivs8IS1EH0>
- Fortune, T., Fyffe, J., & Barradell, S. (2024). Reimagining the university of our dreams: Heterotopic havens for wounded academics. *Higher Education Research & Development*, 43(1), 48-58. <https://doi.org/10.1080/07294360.2023.2228213>
- Gelles, R. J. (1975). The social construction of child abuse. *American Journal of Orthopsychiatry*, 45(3), 363-371. <https://doi.org/10.1111/j.1939-0025.1975.tb02547.x>
- Gelles, R. J. (1985). Family violence. *Annual Review of Sociology*, 11(1), 347-367. <https://doi.org/10.1146/annurev.so.11.080185.002023>
- Gergen, K. J. (1992). Introduction. In S. McNamee & K. J. Gergen (Eds.), *Therapy as social construction* (pp. 1-6). Sage.
- Gilbert, P. (2019). Distinguishing shame, humiliation and guilt: An evolutionary functional analysis and compassion focused interventions. In C. H. Mayer & E. Vanderheiden (Eds.), *The bright side of shame*. Springer. https://doi.org/10.1007/978-3-030-13409-9_27
- Gilbert, P., & McGuire, M. T. (1998). Shame, status and social roles: Psychobiology and evolution. In: P. Gilbert & B. Andrews (Eds.), *Shame: Interpersonal behavior, psychopathology and culture* (pp. 99-125). Oxford University Press.
- Giles, J. R., Cureen, H. M., & Adamson, C. E. (2005). The social sanctioning of partner abuse: Perpetuating the message that partner abuse is acceptable in New Zealand. *Social Policy Journal of New Zealand*, 26(97), 107-116. <https://www.msd.govt.nz/documents/about-msd-and-our-work/publications-resources/journals-and-magazines/social-policy-journal/spj26/26-pages97-116.pdf>
- Goode, E. (1999, June 13). *Study on child sex abuse provokes a political furor*. The New York Times. <https://www.nytimes.com/1999/06/13/us/study-on-child-sex-abuse-provokes-a-political-furor.html>
- Government of The Netherlands. (2024). *What is child abuse?* <https://www.government.nl/topics/child-abuse/what-is-child-abuse>
- Grant, S., & Rowe, M. (2011). Running the risk: Police officer discretion and family violence in New Zealand. *Policing and Society*, 21(1), 49-66. <https://doi.org/10.1080/10439463.2010.540662>
- Green, B. (2023). Understanding collaborative documentary filmmaking practice as a methodology for exploring participant perspectives of place in areas of low social mobility. *Brazilian Creative Industries Journal*, 3(2), 6-20. <https://doi.org/10.25112/bcij.v3i2.3543>
- Greene, C. A., Haisley, L., Wallace, C. & Ford, J. D. (2020). Intergenerational effects of childhood maltreatment: A systematic review of the parenting practices of adult survivors of childhood abuse, neglect, and violence. *Clinical Psychology Review*, 80, 101891. <https://doi.org/10.1016/j.cpr.2020.101891>

- Grierson, J. (1933). The documentary producer. *Cinema Quarterly*, 2(1), 7-9.
<https://ia800307.us.archive.org/13/items/cinema02gdro/cinema02gdro.pdf>
- Griffin, M. G., Resick, P. A., Waldrop, A. E., Mechanic, M. B. (2003). Participation in trauma research: Is there evidence of harm? *Journal of Traumatic Stress*, 16(3), 221-227. <https://doi.org/10.1023/A:1023735821900>
- Groomed: The movie. (n.d.). *The film*. https://groomedthemovie.com/#the_film
- Hacking, I. (1991). The making and molding of child abuse. *Critical Inquiry*, 17(2), 253-288.
<https://doi.org/10.1086/448583>
- Hall, R. (2024, October 8). *Family court judges use victim-blaming language in domestic abuse cases, finds AI project*. The Guardian.
<https://www.theguardian.com/law/2024/oct/08/family-court-judges-victim-blaming-language-domestic-abuse-cases-ai-project>
- Hall, S. (1997). The work of representation. In S. Hall, J. Evans & S. Nixon (Eds.), *Representation: Cultural representations and signifying practices* (pp. 13-64). Sage.
- Hall, S. (2013). The work of representation. In S. Hall, J. Evans & S. Nixon (Eds.), *Representation: Cultural representations and signifying practices* (2nd ed., pp.13-64). Sage.
- Hanisch, C. (1970). The personal is political. In S. Firestone (Ed.), *Notes from the Second Year: Women's Liberation: Major writings of the radical feminists* (pp. 76-78).
<https://repository.duke.edu/dc/wlmpc/wlmms01039>
- Hanisch, C. (2006). *The Personal is Political. The Women's Liberation Movement classic with a new explanatory introduction*. <https://carolhanisch.org/CHwritings/PIP.html>
- Hargrave, P., Donaldson, O., Hamana, M., Miller, J., & Uhlmann, A. (2024). *Experiences of victim-blaming and its impact on help-seeking, crime reporting, and recovery*. Manaaki Tāngata Victim Support. [https://cdn.prod.website-files.com/64cabeab4a57a9fde42d0952/66a62a2c71ccd2ba7ca2e6b3_VS%20Victim%20Blaming_Key%20Findings%20Report_2024%20\(1\).pdf](https://cdn.prod.website-files.com/64cabeab4a57a9fde42d0952/66a62a2c71ccd2ba7ca2e6b3_VS%20Victim%20Blaming_Key%20Findings%20Report_2024%20(1).pdf)
- Herman, J. L. (2011a). *Trauma and recovery: The aftermath of violence – from domestic abuse to political terror*. (2nd ed.). BasicBooks.
- Herman, J. L. (2011b). Posttraumatic stress disorder as a shame disorder. In R. L. Dearing & J. P. Tangney (Eds.), *Shame in the therapy hour* (pp. 261-275). American Psychological Association. <https://doi.org/10.1037/12326-011>
- Herman, J. L. (2012). Shattered shame states and their repair. In J. Yellin & K. White (Eds.), *Shattered states: Disorganised attachment and its repair* (pp. 157-170). Karnac Books.
- Herman, J. L. (2015). *Trauma and recovery: The aftermath of violence, from domestic abuse to political terror*. (3rd ed.). Basic Books.

- Herman, J. L. (2022). *Trauma and recovery: The aftermath of violence, from domestic abuse to political terror*. (4th ed.). Basic Books.
- Herman, J. L. (2023). *Truth and repair: How trauma survivors envision justice*. Basic Books.
- Hernández-Wolfe, P. (2018). Vicarious resilience: A comprehensive review. *Revista de Estudios Sociales*, 66(1), 9-17. <https://doi.org/10.7440/res66.2018.02>
- Hirsch, M. (1996). Past lives: Postmemories in exile. *Poetics Today*, 17(4), 659-685. <https://doi.org/10.2307/1773218>
- Hirsch, M. (2008). The generation of postmemory. *Poetics Today*, 19(1), 103-128. <https://doi.org/10.1215/03335372-2007-019>
- Ho, W. Y (2022). Influence of play on positive psychological development in emerging adulthood: A serial mediation model. *Frontiers in Psychology*, 13, 1057557. <https://doi.org/10.3389/fpsyg.2022.1057557>
- Holmes, M. (2015). Researching emotional reflexivity. *Emotion Review*, 7(1), 61-66. <https://doi.org/10.1177/1754073914544478>
- Honess Roe, A. (2013). *Animated documentary*. Palgrave.
- Honess Roe, A. (2015). Animated documentary. In D. Marcus & S. Kara. *Contemporary documentary* (pp. 42-56). <https://doi.org/10.4324/9781315725499>
- Honess Roe, A. (2021). Evocative animated documentaries, imagination and knowledge. *Studies in Documentary Film*, 15(2), 127-139. <https://doi.org/10.1080/17503280.2021.1923143>
- Hongisto, I. (2015). *Soul of the documentary: Framing, expression, ethics*. Amsterdam University Press. <http://www.jstor.org/stable/j.ctt18z4gzx>
- Horton, A. (2021, March 17). *Groomed: How a filmmaker learned to confront a childhood of abuse*. The Guardian. <https://www.theguardian.com/tv-and-radio/2021/mar/16/groomed-gwen-van-de-pas-documentary>
- Horton, D., & Wohl, R. R. (1956). Mass communication and para-social interaction. *Psychiatry: Interpersonal and Biological Processes*, 19(3), 215-229. <https://doi.org/10.1080/00332747.1956.11023049>
- Hot Docs. (2018). *Documentary audience research 2018*. <https://hotdocs.ca/industry/film-funds/resources>
- Howitt, D. (1995). *Paedophiles and sexual offences against children*. John Wiley and Sons.
- Huang, N., Yang, F., Liu, X., Bai, Y., Guo, J., & Riem, M. M. E. (2023). The prevalences, changes, and related factors of child maltreatment during the COVID-19 pandemic: A systematic review. *Child Abuse & Neglect*, 135, 105992, 1-19. <https://doi.org/10.1016/j.chiabu.2022.105992>
- Humphrey, G. (2014, February 11). *Ginene Dandelion Humphrey*. Pozible. <https://www.pozible.com/project/178070/updates>

- Humphrey, G. (2015, April 29). *2015 FUNDRAISING TRAILER for 'DANDELIONS' A Documentary Feature Film* [Video]. YouTube. [2015 FUNDRAISING TRAILER for 'DANDELIONS' A Documentary Feature Film - YouTube](https://www.youtube.com/watch?v=2015_FUNDRAISING_TRAILER_for_DANDELIONS_A_Documentary_Feature_Film)
- Huth, A & Huth, C. (2025). Curating documentaries: Insights into festival programming and selection. *Studies in Documentary Film*, 1-16. <https://doi.org/10.1080/17503280.2025.2473081>
- International Movie Database. (2024). *Dandelions*. <https://www.imdb.com/title/tt16975684/>
- Iordache, C., Raats, T., & Mombaerts, S. (2022). The Netflix original documentary, explained: Global investment patterns in documentary films and series. *Studies in Documentary Film*, 17(2), 1-21. <https://doi.org/10.1080/17503280.2022.2109099>
- Iseke, J. (2013). Indigenous storytelling as research. *International Review of Qualitative Research*, 6(4), 559-577. <https://doi.org/10.1525/irqr.2013.6.4.559>
- Jackson, M. (1987). The Māori and the criminal justice system: A new perspective: He Whaipanga Hou. Part 1 & Part 2. *Department of Justice, Policy and Research Division*. <https://library.nzfvc.org.nz/cgi-bin/koha/opac-detail.pl?biblionumber=8406>
- Johnson, J. L. (2015). Vision, story, medicine: Therapeutic filmmaking and first nations communities. In J. L. Cohen & J. L. Johnson (Eds.), *Video and filmmaking as psychotherapy* (pp. 55-65). Routledge.
- Johnson, L. E., & Benight, C. C. (2003). Effects of trauma-focused research on recent domestic violence survivors. *Journal of Traumatic Stress*, 16(6), 567-571. <https://doi.org/10.1023/B:JOTS.00000004080.50361.f3>
- Johnstone, L. (2006). The limits of biomedical models of distress. In D. B. Double, (Ed.), *Critical Psychiatry*. Palgrave. https://doi.org/10.1057/9780230599192_5
- Katz, J. S., & Katz, J. M. (1988). Ethics and the perception of ethics in autobiographical film. In L. Gross., J. S. Katz & J. Ruby. (Eds.). *Image ethics: The moral rights of subjects in photographs, film, and television*. Oxford University Press.
- Keenan, D. (2000). 'Hine's Once Were Warriors Hell' - the reporting and racialising of child abuse. *Social Work Review*, 12(4), 5-8. <https://newzealandwars.co.nz/wp-content/uploads/2013/10/Hines.pdf>
- Kenix, L. J. (2011) The traitor and the hedonist: The mythology of motherhood in two New Zealand child abuse cases. *Media International Australia*, 139(1), 42-52. <https://doi.org/10.1177/1329878X11113900107>
- Kennedy, S., Bewley, S., Chevous, J., Perôt, C., Vigneri, M., & Bacchus, L. J. (2022). A systematic review that evaluates the extent and quality of involving childhood abuse survivors in shaping, conducting and disseminating research in the UK. *Research for All*, 6(1), 1-25. <https://doi.org/10.14324/RFA.06.1.03>

- Kerem, Y. (2023). Producing a documentary as a therapeutic process for victims of childhood sexual abuse. In J. L. Cohen (Ed.), *Film/video-based therapy and trauma: Research and practice* (pp. 162-179). Routledge.
- Kerr, F. (2016, July 30). *Faces of innocents: High rates of child abuse among Māori can be traced back to colonisation, academic says*. Stuff.
<https://www.stuff.co.nz/national/faces-ofinnocents/82586709/faces-of-innocents-high-rates-of-child-abuse-among-maori-canbe-traced-back-to-colonisation-academic-says>
- Kippert, A. (2023, April 12). *Is neglect considered abuse?* Domestic Shelters.
<https://www.domesticshelters.org/articles/identifying-abuse/is-neglect-considered-abuse>
- Klinic Community Health Centre. (2013). *Trauma-informed: The trauma toolkit* (2nd ed.).
https://med-fom-learningcircle.sites.olt.ubc.ca/files/2013/10/Trauma-informed_Toolkit.pdf
- Koch, J. J. I. (2023). The truth of reenactments: reliving, reconstructing, and contesting history in documentaries on genocide. *Studies in Documentary Film*, 17(3), 320-337.
<https://doi.org/10.1080/17503280.2023.2244131>
- Koopman, W. J., Watling, C. J., & LaDonna, K. A. (2020). Autoethnography as a strategy for engaging in reflexivity. *Global Qualitative Nursing Research*, 7, 1-9.
<https://doi.org/10.1177/2333393620970508>
- Lahey, B. B., Tiemeer, H., & Krueger, R. F. (2022). Seven reasons why binary diagnostic categories should be replaced with empirically sounder and less stigmatizing dimensions. *JCPP Advances*, 2(4), e12108.
<https://doi.org/10.1002/jcv2.12108>
- Lalonde, D., Baker, L., Nonomura, R., & Tabibi, J. (2020). Trauma-and-violence-informed interview strategies in work with survivors of gender-based violence. *Learning Network Issue 32*, 1-9. Centre for Research & Education on Violence Against Women & Children. https://www.gbvllearningnetwork.ca/our-work/issuebased_newsletters/issue-32/
- Lambie, I. (2018). *Every 4 minutes: A discussion paper on preventing family violence in New Zealand*. Office of the Prime Minister's Chief Science Advisor.
https://www.dpmc.govt.nz/sites/default/files/2022-04/PMCSA-18-02_Every-4-minutes-A-discussion-paper-on-preventing-family-violence-in-New-Zealand-Lambie-report-8.11.18-x43nf4.pdf
- Lane, J. (2002). *The autobiographical documentary in America*. University of Wisconsin Press. <https://doi.org/10.2307/jj.36106175>
- Lateef, R., Alaggia, R., Collin-Vézina, D., & McElvaney, R. (2023). The legacy of shame following childhood sexual abuse disclosures. *Journal of Child Sexual Abuse*, 32(2), 184-203. <https://doi.org/10.1080/10538712.2022.2159910>

- Law Commission. (2015, December). *The justice response to victims of sexual violence: Criminal trials and alternative processes*. Report 136. <https://www.lawcom.govt.nz/assets/Publications/Reports/NZLC-R136.pdf>
- Leeb, R. T., Paulozzi, L. J., Melanson, C., Simon, T. R., & Arias, I. (2008). *Child maltreatment surveillance: Uniform definitions for public health and recommended data elements* (Version 1.0). Center for Disease Control and Prevention, National Center for Injury Prevention and Control. <https://stacks.cdc.gov/view/cdc/11493>
- Lefebvre, M. (2007). *Landscape and film*. Routledge. <https://doi.org/10.4324/9780203959404>
- Lense, R. (2023, March 28). *Human flourishing in unprecedented times: Understanding flourishing and its real-world applications for our well-being*. Psychology Today. <https://www.psychologytoday.com/nz/blog/the-art-effect/202303/human-flourishing-in-unprecedented-times>
- Leonetti, C. (2022, March 2). *How the Family Court rewards abusive behaviour rather than recognising it*. Newsroom. <https://www.auckland.ac.nz/en/news/2022/03/02/how-the-family-court-rewards-abusive-behaviour.html>
- Leonetti, C. (2024, February 16). *What do we mean when we say 'family violence'?* Newsroom. <https://newsroom.co.nz/2024/02/16/what-do-we-mean-when-we-say-family-violence/>
- Lindsay, J. (2023). Documentary film as interreligious dialogue: A cognitive perspective. *Religions*, 14(3), 293. <https://doi.org/10.3390/rel14030293>
- Longfield, A. (2015). *Protecting children from harm: A critical assessment of child sexual abuse in the family network in England and priorities for action*. United Kingdom Children's Commissioner. <https://www.childrenscommissioner.gov.uk/resource/protecting-children-from-harm/>
- López, C. E. L. (2023). Affected stories, sensed memories, and documented voids. *Baltic Screen Media Review*, 11(1), 8-25. <https://doi.org/10.2478/bsmr-2023-0002>
- López, J. M. (Dir.). (2022). *Silent Beauty* [Documentary]. Corazón Oscuro, Black Public Media, ITVS, Chicken & Egg Pictures.
- Lovett, J., Coy, M., & Kelly, L. (2018). *Deflection, denial and disbelief: Social and political discourses about child sexual abuse and their influence on institutional responses: A rapid evidence assessment*. Independent Inquiry into Child Sexual Abuse. <https://repository.londonmet.ac.uk/1498/1/Social%20And%20Political%20Discourses%20About%20Child%20Sexual%20Abuse%20And%20Their%20Influence%20On%20Institutional%20Responses%20%28summary%20Report%29.pdf>
- Lucey, H., Melody, J., & Walkerdine, V. (2003). Uneasy hybrids: Psychosocial aspects of becoming educationally successful for working-class young women. *Gender and Education*, 15(3), 285-299. <https://doi.org/10.1080/09540250303865>
- MacDougall, D. (1993). When less is less: The long take in documentary. *Film Quarterly*, 46(2), 36-46. <https://www.jstor.org/stable/1213006>

- Matheson, D. (2005). *Media discourses: Analysing media texts*. Maidenhead. https://natlib-primo.hosted.exlibrisgroup.com/permalink/f/1s57t7d/NLNZ_ALMA21241256000002836
- Matos, M., & Pinto-Gouveia, J. (2010). Shame as a traumatic memory. *Clinical Psychology & Psychotherapy*, 17(4), 299-312. <https://doi.org/10.1002/cpp.659>
- Matthews, L. E. (2025). *Survival memories: How artistic representation and naming incest could challenge taboos, influence public discourse and ideologies, and contribute to social change through the history and tenacity of textiles* [Doctoral thesis, Federation University Australia]. Federation University Online. <http://researchonline.federation.edu.au/vital/access/HandleResolver/1959.17/209376>
- Maydell, E. (2018). 'It just seemed like your normal domestic violence': Ethnic stereotypes in print media coverage of child abuse in New Zealand. *Media, Culture & Society*, 40(5), 707-724. <https://doi.org/10.1177/0163443717737610>
- McCann, I. L., & Pearlman, L. A. (1990). Vicarious traumatization: A framework for understanding the psychological effects of working with victims. *Journal of Traumatic Stress*, 3(1), 131-149. <https://onlinelibrary.wiley.com/doi/pdf/10.1002/jts.2490030110>
- McChesney, K. (2022). A rationale for trauma-informed postgraduate supervision. *Teaching in Higher Education*, 29(5), 1338-1360. <https://doi.org/10.1080/13562517.2022.2145469>
- McCreanor, T., Rankine, J., Moewaka Barnes, A., Borell, B., Nairn, R., & McManus, A. L. (2014). The association of crime stories and Māori in Aotearoa New Zealand print media. *Sites: A Journal of Social Anthropology and Cultural Studies*, 11(1), 121-144. <https://doi.org/10.11157/sites-vol1iss2id240>
- McElvaney, R., Lateef, R., Collin-Vézina, D., Alaggia, R., & Simpson, M. (2022). Bringing shame out of the shadows: Identifying shame in child sexual abuse disclosure processes and implications for psychotherapy. *Journal of Interpersonal Violence*, 37(19-20), NP18738-NP18760. <https://doi.org/10.1177/08862605211037435>
- McIlveen, P. (2008). Autoethnography as a method for reflexive research and practice in vocational psychology. *Australian Journal of Career Development*, 17(2), 13-20. <https://doi.org/10.1177/103841620801700204>
- McLaren, K. (2013). *The art of empathy: A complete guide to life's most essential skill*. Sounds True.
- Meek, A. (2013). Postcolonial trauma: Child abuse, genocide, and journalism in New Zealand. In B. Hokowhitu & V. Devadas (Eds.), *The fourth eye: Māori media in Aotearoa/New Zealand* (pp. 25-41). University of Minnesota Press. <https://doi.org/10.5749/minnesota/9780816681037.003.0002>
- Mehra, B. (2002). Bias in qualitative research: Voices from an online classroom. *The Qualitative Report*, 7(1), 1-19. <https://doi.org/10.46743/2160-3715/2002.1986>

- Meier C., & Lourens, M. (2021). *We need to talk: The long wait for mental health care*. Stuff NZ. <https://interactives.stuff.co.nz/we-need-talk-the-long-wait-for-mental-health-care/>
- Merolli, M., Gray K., Martin-Sanchez, F., Mantopoulos, S., & Hogg, M. (2015). Using social media while waiting in pain: A clinical 12-week longitudinal pilot study. *Journal of Medical Internet Research-Research Protocols*, 4(3), e101. <https://doi.org/10.2196/resprot.4621>
- Merolli, M., Gray, K., & Martin-Sanchez, F. (2014). Therapeutic affordances of social media: Emergent themes from a global online survey of people with chronic pain. *Journal of Medical Internet Research*, 16(12), e284. <https://doi.org/10.2196/jmir.3494>
- Metzl, J. (2010). *The protest psychosis: How schizophrenia became a black disease*. Beacon Press.
- Michell, D. E. (2020). Recovering from doing research as a survivor-researcher. *The Qualitative Report*, 25(5), 1377-1392. <https://doi.org/10.46743/2160-3715/2020.4048>
- Ministry of Education. (2023). *Child protection*. <https://www.education.govt.nz/early-childhood/child-wellbeing-and-participation/child-protection/>
- Ministry of Health. (2002). *Family violence intervention guidelines: Child and partner abuse*. <https://thinkhauorawebiste.blob.core.windows.net/websitepublished/CCP/Resources/Common%20Forms/Family%20Violence%20Intervention%20Guidelines.pdf>
- Ministry of Justice. (2022). *New Zealand crime and victims survey: Survey findings – Cycle 4 report* (Descriptive statistics June 2022. Results drawn from Cycle 4 (2020/21) of the New Zealand Crime and Victims Survey). <https://www.justice.govt.nz/assets/Cycle-4-Core-Report-v0.20-20220628.pdf>
- Ministry of Social Development. (2023). *Recognising and responding to child abuse in New Zealand*. <https://www.msd.govt.nz/about-msd-and-our-work/publications/resources/research/recognising-child-neglect/>
- Moewaka Barnes, A., & McCreanor, T. (2023). Feeding people beliefs. In C. Cunneen, A. Deckert., A. Porter., J. Tauri & R. Webb (Eds.), *The Routledge international handbook on decolonizing justice* (pp. 45-60). Routledge. <https://doi.org/10.4324/9781003176619-4>
- Moncrieff, J., Cooper, R. E., Stockmann, T., Amendola, S., Hengartner, M. P., & Horowitz, M. A. (2023). The serotonin theory of depression: A systematic umbrella review of the evidence. *Molecular Psychiatry*, 28(8), 3243-3256. <https://doi.org/10.1038/s41380-022-01661-0>
- Moody, G., Cannings-John, R., Hood, K., Kemp, A., & Robling, M. (2018). Establishing the international prevalence of self-reported child maltreatment: A systematic review by maltreatment type and gender. *BMC Public Health*, 18, 1164. <https://doi.org/10.1186/s12889-018-6044-y>

- Morfoot, A. (2021, September 16). *The post-COVID festival circuit: The future is hybrid*. International Documentary Association. <https://www.documentary.org/feature/post-covid-festival-circuit-future-hybrid#>
- Mosinski, B. (2015). Video art and activism: Applications in art therapy. In J. L. Cohen & J. L. Johnson (Eds.), *Video and filmmaking as psychotherapy* (pp. 133-145). Routledge.
- Mulder, R. T., Bastiampillai, T., Jorm, A., & Allison, S. (2022). New Zealand's mental health crisis, He Ara Oranga and the future. *The New Zealand Medical Journal*, 135(1548), 89-95. <https://nzmj.org.nz/media/pages/journal/vol-135-no-1548/new-zealands-mental-health-crisis-he-ara-oranga-and-the-future/3ffb564fa4-1696472923/new-zealands-mental-health-crisis-he-ara-oranga-and-the-future.pdf>
- Mulya, T. W. (2018). Contesting the dominant discourse of child sexual abuse: Sexual subjects, agency, and ethics. *Sexuality & Culture*, 22, 740-757. <https://doi.org/10.1007/s12119-018-9506-6>
- Nagy, P., & Neff, G. (2015). Imagined affordance: Reconstructing a keyword for communication theory. *Social Media & Society*, 1-9. <https://doi.org/10.1177/2056305115603385>
- Nash, K. (2011). Documentary-for-the-other: Relationships, ethics and (observational) documentary. *Journal of Mass Media Ethics*, 26(3), 224-239. <https://doi.org/10.1080/08900523.2011.581971>
- Nash, K., & Corner, J. (2016). Strategic impact documentary: Contexts of production and social intervention. *European Journal of Communication*, 31(3), 227-242. <https://doi.org/10.1177/0267323116635831>
- Nash, K., Hight, C., & Summerhayes, C. (2014). Introduction. In *New documentary ecologies: Emerging platforms, practices and discourses* (pp. 1-2). Palgrave Macmillan.
- National Society for the Prevention of Cruelty to Children. (2025, August 8). *Emotional Abuse*. <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/emotional-abuse/#1>
- Negrão, C., Bonanno, G. A., Noll, J. G., Putnam, F. W., & Trickett, P. K. (2005). Shame, humiliation, and childhood sexual abuse: Distinct contributions and emotional coherence. *Child Maltreatment*, 10(4), 350-363. <https://doi.org/10.1177/1077559505279366>
- New Zealand Government. (2021a). *Te Aorerekura: The national strategy to eliminate family violence and sexual violence*. The Board for the Elimination of Family Violence and Sexual Violence Te Kāwanatanga o Aotearoa. <https://tepunaaonui.govt.nz/assets/National-strategy/Finals-translations-alt-formats/Te-Aorerekura-National-Strategy-final.pdf>
- New Zealand Government. (2021b). *Child abuse*. <https://www.govt.nz/browse/law-crime-and-justice/abuse-harassment-domestic-violence/child-abuse/>

- New Zealand Police. (2022). *Police 2020/21 annual report*.
<https://www.police.govt.nz/sites/default/files/publications/annual-report-2021-2022.pdf>
- New Zealand Police. (2023). *About abuse*. <https://www.police.govt.nz/advice-services/personal-community-safety/school-portal/resources/successful-relationships/about-abuse>
- New Zealand Police. (2024, August 30). *Police announce phased plan to reduce service to mental health demand*. <https://www.police.govt.nz/news/release/police-announce-phased-plan-reduce-service-mental-health-demand>
- Newbold, G., & Cross, J. (2008). Domestic violence and pro-arrest policy. *Social Policy Journal of New Zealand*, (33), 1-14. <https://www.msd.govt.nz/about-msd-and-our-work/publications-resources/journals-and-magazines/social-policy-journal/spj33/33-domestic-violence-and-pro-arrest-policy-p1-14.html>
- Nichols, B. (1991). *Representing reality: Issues and concepts in documentary*. Indiana University Press.
- Nichols, B. (2001). *Introduction to documentary* (1st ed.). Indiana University Press.
- Nichols, B. (2006). *What to do about documentary distortion? Toward a code of ethics*.
<https://www.documentary.org/feature/what-do-about-documentary-distortion-towardcode-ethics>
- Nichols, B. (2008). *Documentary reenactment and the fantasmatic subject*. *Critical Inquiry*, 35(1), 72-89. <https://doi.org/10.1086/595629>
- Nichols, B. (2010). *Introduction to documentary* (2nd ed.). Indiana University Press.
- Nichols, B. (2013). Irony, cruelty, evil (and a wink) in The Act of Killing. *Film Quarterly*, 67(2), 25-29. <https://doi.org/10.1525/fq.2014.67.2.25>
- Nichols, B. (2017). *Introduction to documentary* (3rd ed.). Indiana University Press.
- Nobilo, H. (2016). Why should we care? The abuse and neglect of children in New Zealand. *Brainwave Review*, 24. Brainwave Trust Aotearoa. <https://library.nzfvc.org.nz/cgi-bin/koha/opac-detail.pl?biblionumber=5426>
- Nonomura, R., Giesbrecht, C., Jivraj, T., Lapp, A., Bax, K., Jenney, A., Scott, K., Straatman, A & Baker, L. (2020). *Toward a trauma-and-violence-informed research ethics module: Considerations and recommendations*. Centre for Research & Education on Violence Against Women & Children, Western University, London, Ontario.
<http://kh-cdc.ca/en/resources/reports/Grey-Report---English.pdf>
- O'Connor, C., Brown, G., Debono, J., Suty, L., & Joffe, H. (2025). How trauma is represented on social media: Analysis of #trauma content on TikTok. *Psychological trauma: Theory, Research, Practice, and Policy*, 17(1), S132-S138.
<https://doi.org/10.1037/tra0001792>

- OECD. (2013). *Families and children: Intimate partner violence* (SF3.4).
https://webfs.oecd.org/els-com/Family_Database/SF-3-4-Intimate-Partner-Violence.pdf
- Oranga Tamariki Act 1989/Children's and Young People's Well-being Act 1989.
<https://www.legislation.govt.nz/act/public/1989/0024/latest/LMS223404.html#LMS223404>
- Oranga Tamariki Insights Team. (2025). *Understanding reports of concern: Insight into the increase in reports of concern in 2024 and exploring future demand*. Oranga Tamariki. <https://www.orangatamariki.govt.nz/assets/Uploads/About-us/Research/Latest-research/Understanding-the-increase-in-reports-of-concern/Reports-of-concern-2024-increase-and-future-demand.pdf>
- Oranga Tamariki. (2020). *Child protection policy*.
<https://www.orangatamariki.govt.nz/assets/Uploads/Working-with-children/Childrens-act-requirements/Child-Protection-Policy-2020.pdf>
- Peace, K. A., Porter, S., & ten Brinke, L. (2008). Are memories for sexually traumatic events “special”? A within-subjects investigation of trauma and memory in a clinical sample. *Memory*, 16(1), 10-21. <https://doi.org/10.1080/09658210701363583>
- Pierson, M. (2009). Avant-Garde re-enactment: “World Mirror Cinema, Decasia”, and “The Heart of the World”. *Cinema Journal*, 49(1), 1-19.
<https://www.jstor.org/stable/25619742>
- Plantinga, C. (1997). *Rhetoric and representation in nonfiction film*. Cambridge University Press.
- Plantinga, C., & Tan, E. S. (2007). Is an overarching theory of affect in film viewing possible? *Journal of Moving Image Studies*, 4(1).
<https://hdl.handle.net/11245/1.285372>
- Polley, S. (Dir.). (2012). *Stories We Tell* [Documentary]. National Film Board of Canada.
- Poole, M. (2019). Affordances (and potential pitfalls) of documentary as research: The creative process of Australian screenwriter Jan Sardi. *The International Journal of Creative Media Research*, 2(2). <https://doi.org/10.33008/IJCMR.2019.18>
- Pressley, S., & Spinazzola, J. (2020). *Coping strategies for complex trauma survivors contending with the coronavirus*. The Foundation Trust.
<https://www.fvb.ca/assets/files/pdf/Complex-Trauma-Resource-9-Joseph-Spinazzola.pdf>
- Proudman, C. (2025). *He said she said: Truth, trauma and the struggle for justice in family court*. Orion Publishing Co.
- Purnell, L., Chiu, K., Bhutani, G. E., Grey, N., El-Leithy, S., & Meiser-Stedman, R. (2024). Clinicians' perspectives on retraumatisation during trauma-focused interventions for

- post-traumatic stress disorder: A survey of UK mental health professionals. *Journal of Anxiety Disorders*, 106, 102913. <https://doi.org/10.1016/j.janxdis.2024.102913>
- Raitt, F. E., & Zeedyk, M. S. (2003). False memory syndrome: Undermining the credibility of complainants in sexual offences. *International Journal of Law and Psychiatry*, 26(5), 453-471. [https://doi.org/10.1016/S0160-2527\(03\)00081-5](https://doi.org/10.1016/S0160-2527(03)00081-5)
- Randell, I. (2021). *That's a lie: Sexual violence misconceptions, accusations of lying, and other tactics in the cross-examination of child and adolescent sexual violence complainants*. Chief Victims Advisor to Government. Ministry of Justice. https://ndhadeliver.natlib.govt.nz/delivery/DeliveryManagerServlet?dps_pid=IE80145900
- Reid, J. A. (2018). The imprint of childhood abuse on trauma-related shame in adulthood. *Dignity: A Journal of Analysis of Exploitation and Violence*, 3(1), article 4, (1-20). <https://doi.org/10.23860/dignity.2018.03.01.04>
- Reynaert, M. (2015). Sexual abuse of children as a form of power abuse and abuse of the body. *Acta Theologica*, 35(1), 189-200. <http://doi.org/10.4314/actat.v35i1.11>
- Rietveld, E., & Kiverstein, J. (2014). A rich landscape of affordances. *Ecological Psychology*, 26(4), 325-352. <https://doi.org/10.1080/10407413.2014.958035>
- Robinson, M., Ross, J., Fletcher, S., Burns, C. R., Lagdon, S., & Armour, C. (2021). The mediating role of distress tolerance in the relationship between childhood maltreatment and mental health outcomes among university students. *Journal of Interpersonal Violence*, 36(15-16), 7249-7273. <https://doi.org/10.1177/0886260519835002>
- Rose, G. (2016). *Visual methodologies: An introduction to researching with visual materials* (4th ed.). Sage.
- Ross, N., Brown, C., & Johnstone, M. (2023). Beyond medicalized approaches to violence and trauma: Empowering social work practice. *Journal of Social Work*, 23(3), 567-585. <https://doi.org/10.1177/14680173221144557>
- Rothschild, B. (2006). *Help for the helper: The psychophysiology of compassion fatigue and vicarious trauma*. WW Norton & Company.
- Rubin, D. C. (2011). The coherence of memories for trauma: Evidence from posttraumatic stress disorder. *Consciousness and Cognition*, 20(3), 857-865. <https://doi.org/10.1016/j.concog.2010.03.018>
- Saakvitne, K. W., & Pearlman, L. A. (1995). *Transforming the pain: A workbook on vicarious traumatization*. WW Norton & Company.
- Sacilotto, E., Salvato, G., Villa, F., Salvi, F., & Bottini, G. (2022). Through the looking glass: A scoping review of cinema and video therapy. *Frontiers in Psychology*, 12, article 732246, 1-12. <https://doi.org/10.3389/fpsyg.2021.732246>

- Safeguarding Children. (2023). *Child abuse and neglect*.
<https://safeguardingchildren.org.nz/child-abuse-and-neglect/>
- Safety of Children in Care Team. (2024). *Safety of Children in Care: Annual report*. (July 2022 to June 2023). Oranga Tamariki.
https://www.orangatamariki.govt.nz/assets/Uploads/About-us/Performance-and-monitoring/safety-of-children-in-care/2022-23/J000093_SOCIC-Report-2023_v4.pdf
- Saputra, E. A. (2024). Impactful storytelling and social advocacy in documentary filmmaking: Studies of documentary impact methods. In M. N. Tunio., J. M. Chica Garcia., A. M. Zakaria & Y. M. L. Hatem (Eds.), *Sustainability in creative industries: Innovations in fashion and visual media – Volume 3. Advances in science, technology & innovation: IEREK interdisciplinary series for sustainable development* (pp.165-173). Springer. https://doi.org/10.1007/978-3-031-52726-5_15
- Schott, G., & Barbour, K. (2019). Filmic resonance and dispersed authorship in Sigur Rós’s transmedial Valtari Mystery Film Experiment. In C. Vernallis, H. Rogers & L. Perrott (Eds.), *Transmedia directors: Artistry, industry and new audiovisual aesthetics* (pp. 221-238). Bloomsbury.
- Schroder, H. S., Tovey, J., Forer, R., Schultz, W., Kneeland, E. T., & Moser, J. S. (2025). Where do “chemical imbalance” beliefs come from? Evaluating the impact of different sources. *Frontiers in Psychology*, 15, 1469913.
<https://doi.org/10.3389/fpsyg.2024.1469913>
- Schwartz, R. C., & Blankenship, D. M. (2014). Racial disparities in psychotic disorder diagnosis: A review of empirical literature. *World Journal of Psychiatry* 4(4), 133-140. <https://doi.org/10.5498/wjp.v4.i4.133>
- Scott, J. G., Malacova, E., Mathews, B., Haslam, D. M., Pacella, R., Higgins, D. J., Meinck, F., Dunne, M. P., Finkelhor, D., Erskine, H. E., Lawrence, D. M., & Thomas, H. J. (2023). The association between child maltreatment and mental disorders in the Australian Child Maltreatment Study. *The Medical journal of Australia*, 218(Suppl 6), S26–S33. <https://doi.org/10.5694/mja2.51870>
- Shadravan, S. M., & Bath, E. (2019). Invoking history and structural competency to minimize racial bias. *Journal of the American Academy of Psychiatry and the Law Online*, 47(1), 2-6. <https://jaapl.org/content/47/1/2/tab-article-info>
- Sheridan, G., & Carr, A. (2020). Survivors’ lived experiences of posttraumatic growth after institutional childhood abuse: An interpretative phenomenological analysis. *Child Abuse & Neglect*, 103, 104430, 1-13. <https://doi.org/10.1016/j.chiabu.2020.104430>
- Shoebotham A., Coulson, N. S. (2016). Therapeutic affordances of online support group use in women with endometriosis. *Journal of Medical Internet Research*, 18(5), e109.
<https://doi.org/10.2196/jmir.5548>
- Shorey, R. C., Cornelius, T. L., & Bell, K. (2011). Reactions to participating in dating violence research: Are our questions distressing participants? *Journal of*

- Interpersonal Violence*, 26(14), 2890-907.
<https://doi.org/10.1177/0886260510390956>
- Shubert, C. (2015, September 22). *Round-down: On women writers and the fallout from 'Confession' in the digital age*. Round Up, The Ploughshares Blog.
<https://blog.pshares.org/round-down-on-women-writers-and-the-fallout-fromconfession-in-the-digital-age/>
- Skylight Trust. (2022). *Post traumatic stress coping: What can I do?*
https://www.skylight.org.nz/search/results?topic_ids%5B%5D=28
- Sotirovic, V. P., Lipinsky, A., Struzińska, K & Ranea-Triviño, B. (2024). You can knock on the doors and windows of the university, but nobody will care: How universities benefit from network silence around gender-based violence. *Social Sciences*, 13(4), 1-18. <https://doi.org/10.3390/socsci13040199>
- Spencer, R. (2015, September 15). *The first-person essays boom: Top editors on why confessional writing matters*. The Guardian.
<https://www.theguardian.com/media/2015/sep/15/first-person-essay-confessionalwriting-editors-writers>
- St. George, S., Denne, E., & Stolzenberg, S. N. (2022). Blaming children: How rape myths manifest in defense attorneys' questions to children testifying about child sexual abuse. *Journal of Interpersonal Violence*, 37(17-18), 16623-16646.
<https://doi.org/10.1177/08862605211023485>
- Stevens, A. D. (2021, March 18). "It's so pervasive": "Groomed" filmmaker on confronting the sickening commonalities of sexual abuse. Salon.
<https://www.salon.com/2021/03/18/groomed-child-sexual-abuse-grooming-discovery-plus-gwen-van-de-pas/>
- Stewart, E. (2024, November 13). *Abuse in care: Māori survivors on what a national apology means to them*. Radio New Zealand.
<https://www.rnz.co.nz/news/abuseincare/533487/abuse-in-care-maori-survivors-on-what-a-national-apology-means-to-them>
- Stidham, A. W., Draucker, C. B., Martsolf, D. S., Mullen, L. P. (2012). Altruism in survivors of sexual violence: The typology of helping others. *Journal of the American Psychiatric Nurses Association*, 18(3), 146-155.
<https://doi.org/10.1177/10783903124405>
- Szasz, T. (2009). *Antipsychiatry: Quackery squared*. Syracuse University Press.
- Tait, P. (2016). Introduction: Analysing emotion and theorising affect. *Humanities*, 5(3).
<https://doi.org/10.3390/h5030070>
- Taylor, A., Zajac, R., Takarangi, M. K. T., & Garry, M. (2021). Evidence from the trauma-film paradigm that traumatic and nontraumatic memories are statistically equivalent on coherence. *Clinical Psychological Science*, 10(3), 417-429.
<https://doi.org/10.1177/21677026211053312>

- Taylor, J. (2020). *Why women are blamed for everything*. VictimFocus.
- Taylor, J. (2022). *Sexy but psycho: Uncovering the psychiatric labelling of women and girls*. VictimFocus.
- Taylor, J., & Shrive, J. (2023). *Indicative trauma impact manual*. VictimFocus.
- Te Whatu Ora. (2023). *Family violence definitions*. <https://www.tewhatauora.govt.nz/our-health-system/preventative-healthwellness/family-violence-and-sexual-violence/establishing-a-violence-intervention-programme-vip/family-violence-definitions/>
- Tedeschi, R., & Calhoun, L. G. (1995). *Trauma & transformation: Growing in the aftermath of suffering*. Sage. <https://doi.org/10.4135/9781483326931>
- Tedeschi, R., & Triplett, K. N. (2012). Spiritual intelligence and posttraumatic growth. In C. R. Figley (Ed.), *Encyclopedia of trauma*. Sage.
- Teicher, M. H., Gordon, J. B. & Nemeroff, C.B. (2022). Recognizing the importance of childhood maltreatment as a critical factor in psychiatric diagnoses, treatment, research, prevention, and education. *Molecular Psychiatry*, 27, 1331-1338. <https://doi.org/10.1038/s41380-021-01367-9>
- Teichler, H. (2024). Transoceanic memory (studies): Oceans as mode, method and material. *Memory Studies Review*, 1(1), 76-92. <https://doi.org/10.1163/29498902-20240006>
- Templeton, D. M. (1993). Sexual assault: Effects of the research process on all the participants. *Canadian Family Physician*, 39, 248-258. <https://pubmed.ncbi.nlm.nih.gov/8495113/>
- The Fledgling Fund. (2009). *Assessing creative media's social impact*. <https://www.thefledglingfund.org/impact-resources/assessing-social-impact/>
- Thompson, J. B. (1990). *Ideology in modern culture: Critical social theory in the era of mass communication*. Polity Press.
- Thoresen, S., Aakvaag, H. F., Strøm, I. F., Wentzel-Larsen, T., & Birkeland, M. S. (2018). Loneliness as a mediator of the relationship between shame and health problems in young people exposed to childhood violence. *Social Science & Medicine*, 211, 183-189. <https://doi.org/10.1016/j.socscimed.2018.06.002>
- Thorne, S., Stephens, J., & Truant, T. (2015). Building qualitative study design using nursing's disciplinary epistemology. *Journal of Advanced Nursing*, 72(2), 451-460. <https://doi.org/10.1111/jan.12822>
- Timimi, S. (2014). No more psychiatric labels: Why formal psychiatric diagnostic systems should be abolished. *International Journal of Clinical and Health Psychology*, 14, 208-215. <https://doi.org/10.1016/j.ijchp.2014.03.004>
- Timimi, S. (2021). *Insane medicine: How the mental health industry creates damaging treatment traps and how you can escape them*. Amazon.

- Truax, C. B., & Wargo, D. G. (1969). Effects of vicarious therapy pretraining and alternate sessions on outcome in group psychotherapy with outpatients. *Journal of Consulting and Clinical Psychology*, 33(4), 440-447. <https://doi.org/10.1037/h0027818>
- Tuval-Mashiach, R., & Patton, B. W. (2015). Digital video production: Healing for the YouTube generation of veterans. In J. L. Cohen & J. L. Johnson (Eds.), *Video and filmmaking as psychotherapy: Research and practice* (pp. 146-162). (Advances in mental health research series). Routledge.
- Tuval-Mashiach, R., Patton, B. W., & Drebing, C. (2018). “When you make a movie, and you see your story there, you can hold it”: Qualitative exploration of collaborative filmmaking as a therapeutic tool for veterans. *Frontiers in Psychology*, 9, article 1954. <https://doi.org/10.3389/fpsyg.2018.01954>
- UNICEF. (2017). *Building the future: Children and the sustainable development goals in rich countries* (Innocenti Report Card 14). Innocenti – Global Office of Research and Foresight. <https://www.unicef.org/reports/building-future>
- UNICEF. (2020). *Worlds of influence: Understanding what shapes child well-being in rich countries* (Innocenti Report Card 16). Innocenti – Global Office of Research and Foresight. <https://www.unicef.org/innocenti/reports/worlds-of-influence>
- UNICEF. (2025). *Child well-being in an unpredictable world* (Innocenti Report Card 19). Innocenti – Global Office of Research and Foresight. <https://www.unicef.org/innocenti/reports/child-well-being-unpredictable-world>
- Valéry, P., & Guenther, C. (1954). Poetry and abstract thought. *The Kenyon Review*, 16(2), 208-233. <http://www.jstor.org/stable/4333487>
- Vallejo, A., Taillibert, C. (2023). Finding allies in pandemic times: Documentary film festivals and streaming platforms. In M. de Valck & A. Damiens (Eds.), *Rethinking film festivals in the pandemic era and after* (pp. 101-128). https://doi.org/10.1007/978-3-031-14171-3_6
- van Dam, C. (2006). *The socially skilled child molester: Differentiating the guilty from the falsely accused*. Haworth Press.
- van de Pas, G. (Dir.). (2021). *Groomed* [Documentary]. Yellow Dot Films.
- van der Kolk, B. A. (1994). The body keeps the score: Memory and the evolving psychobiology of posttraumatic stress. *Harvard Review of Psychiatry*, 1(5), 253–265. <https://doi.org/10.3109/10673229409017088>
- van der Kolk, B. A. (2014). *The body keeps the score: Brain, mind and body in the healing of trauma*. Viking.
- Van der Merwe, A., & Hunt, X. (2019). Secondary trauma among trauma researchers: Lessons from the field. *Psychological Trauma: Theory, Research, Practice, and Policy*, 11(1), 10-18. <https://doi.org/10.1037/tra0000414>

- van der Westhuizen, M., Walker-Williams, H. J., & Fouché, A. (2023). Meaning making mechanisms in women survivors of childhood sexual abuse: A scoping review. *Trauma, Violence, & Abuse*, 24(3), 1363-1386. <https://doi.org/10.1177/15248380211066100>
- van Dijk, T. (2006). Discourse, context and cognition. *Discourse Studies*, 8(1), 159-177. <http://doi.org/10.1177/1461445606059565>
- van Zoonen, L. (1994). *Feminist media studies*. Sage.
- Vertov, D. (1984). Kino-Eye. In A. Michelson (Ed.), *The writings of Dziga Vertov*. University of California Press.
- Visage, A. N. (2021). *Sites of power: Documentary ethics and representation of child abuse* [Master's thesis, The University of Waikato]. Research Commons at the University of Waikato. <https://hdl.handle.net/10289/14578>
- Vourlias, C. (2022, April 1). *Fremantle's Mandy Chang warns against a 'corporate age' of documentary as streamers fuel docmaking boom*. Variety. <https://variety.com/2022/film/global/fremantle-mandy-chang-documentary-streamers-cphdox-1235220861/>
- Walden, V. G. (2019). Animation and memory. In N. Dobson, A. Honess Roe, A. Ratelle & C. Ruddell (Eds.), *The animation studies reader* (pp. 81-90). Bloomsbury Academic.
- Walker, J. (1997). The traumatic paradox: Documentary films, historical fictions, and cataclysmic past events. *Signs*, 22(4), 803-825. <http://www.jstor.org/stable/3175221>
- Walker, J. (2003). The traumatic paradox: Autobiographical documentary and the psychology of memory. In K. Hodgkin & S. Radstone (Eds.), *Memory, history, nation* (pp. 104-119). Routledge.
- Walton, G. M., & Cohen, G. L. (2007). A question of belonging: Race, social fit, and achievement. *Journal of Personality and Social Psychology*, 92(1), 82-96. <https://doi.org/10.1037/0022-3514.92.1.82>
- Watkins, M., & Shulman, H. (2008). *Toward psychologies of liberation*. Palgrave.
- Watts, J. (2024). The epistemic injustice of borderline personality disorder. *BJPsych International*, 21(4), 78-82. <https://doi.org/10.1192/bji.2024.16>
- Wells, B. (2011). Frame of reference: Toward a definition of animation. *Animation Practice, Process & Production*, 1(1), 11-32. https://doi.org/10.1386/ap3.1.1.11_1
- Wells, P. (1998). *Understanding Animation*. Routledge. <https://doi.org/10.4324/9781315004044>
- Whiteman, D. (2004). Out of the theaters and into the streets: A coalition model of the political impact of documentary film and video. *Political Communication*, 21(1), 51-69. <https://doi.org/10.1080/10584600490273263-1585>

- Whyte Moran, A. (2024, September 6). *Justice not revenge: Telegraph's misogynistic headline undermines survivors' courage*. The Femcast.
<https://thefemcast.com/2024/09/06/justice-not-revenge-telegraphs-misogynistic-headline-undermines-survivors-courage/>
- Williamson, E., Gregory, A., Abrahams, H., Aghtaie, N., Walker, S. J., & Hester, M. (2020). Secondary trauma: Emotional safety in sensitive research. *Journal of Academic Ethics*, 18, 55-70. <https://doi.org/10.1007/s10805-019-09348-y>
- Wilmont, S. (Dir.). (2017). *The Distant Barking of Dogs* [Documentary]. Final Cut For Reel.
- Woods, S., Chambers, T. N. G., & Eizadirad, A. (2022). Emotional vulnerability in researchers conducting trauma-triggering research. *Journal of Higher Education Policy and Leadership Studies*, 3(3), 71-88. <https://dx.doi.org/10.52547/johepal.3.3.71>
- Woolard, A., Paciente, R., Munro, E., Wickens, N., Wells, G., Ta, D., Mandzufas, J., & Lombardi, K. (2024). #TraumaTok-TikTok videos relating to trauma: Content analysis. *JMIR Formative Research*, 8(1), e49761. <https://doi.org/10.2196/49761>
- World Health Organisation, & United Nations (2023). *Mental health, human rights and legislation: Guidance and practice*. Office of the High Commissioner for Human Rights. <https://www.who.int/publications/i/item/9789240080737>
- World Health Organisation. (1999). *Report of the Consultation on Child Abuse Prevention* (29-31 March 1999, WHO, Geneva). Violence and Injury Prevention Team & Global Forum for Health Research. <https://iris.who.int/handle/10665/65900>
- World Health Organisation. (2022). *Child maltreatment*. <https://www.who.int/news-room/fact-sheets/detail/child-maltreatment>
- Yarnell, E., & Abascal, K. (2009). Dandelion (*Taraxacum officinale* and *T. mongolicum*). *Integrative Medicine: A Clinician's Journal*, 8(2), 35-38.
https://www.imjournal.com/resources/web_pdfs/0409_yarnell.pdf
- Yazeed, C. (2021, December 12). *The dangers of courage culture and why Brené Brown isn't for Black folk*. <https://drcareyyazeed.com/the-dangers-of-courage-culture-and-why-brene-brown-isnt-for-black-folk/>
- Yazeed, C. (2023, April 5). *Back women and vulnerability: What Brené Brown got wrong*. <https://drcareyyazeed.com/black-women-and-vulnerability-what-brene-brown-got-wrong/>