# DIGITAL STORYTELLING FOR HEALTH PROMOTION A NOVEL APPROACH TO ENHANCE WELL-BEING AND COMMUNICATION

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## Feedback Request

#### What feedback I'm seeking from the audience?

Best practices or insights about the overall design of this study.

What are effective ways to assess changes in empathy, emotional resilience, and patient-provider connection?

How can I best integrate the quantitative and qualitative components to strengthen my findings?

Are the outcomes I'm targeting realistic for this study timeframe, or should some be longer-term goals?

# Introduction PROBLEM STATEMENT

**Digital Storytelling** (DST) is a multimedia approach integrating personal narratives with digital media.

The Health Challenge: Growing need for technology-driven health interventions. The current focus is mainly on specific disease states, not general health promotion.

**Gap**: Limited research on DST as a formal education tool in health curricula.

**Why DST**? A promising approach for this challenge is to engage emotions, advocacy, build empathy, and promote active listening and learning.



## Background STUDY OBJECTIVES

**Primary Aim** - Explore DEST integration into health education to enhance communication skills, empathy, and patient engagement.

**Key Questions**: How does DST affect healthcare communication skills and empathy development? What impact does DST have on patient empowerment and health management confidence? What are the essential elements for successful DST implementation across diverse healthcare contexts?



#### **Specific objectives:**

- 1. Develop DST curriculum aligned with health promotion strategies
- 2.Evaluate impact on knowledge retention, emotional well-being, and self-efficacy.
- 3.Assess the feasibility and effectiveness as a scalable educational model.

# PROPOSED METHODS

- Participants: Storytellers, storyteller facilitators, research team
- Intervention: DST modules within existing health communication curriculum
- **Tools**: structure template, multimedia tools, and platform

#### **Evaluation:**

- Mixed-methods approach
- Pre/post survey, qualitative interviews
- Secondary data, narrative content analysis



### EXPECTED OUTCOMES & METRICS

#### **Primary Measures**

- Communication skills enhancement
- Emotional resilience improvement
- Perceived self-efficacy in health management

#### **Secondary Measures**

- Knowledge retention rates
- Patient engagement levels
- Curriculum feasibility indicators

### IMPLICATIONS

## Challenges & Considerations

Technology accessibility and digital literacy variations.

- Standardizing narrative templates while maintaining authenticity.
- Time constraints within existing curricula.

Measuring long-term impact on patient-provider relationships.

## Conclusion NEXT STEPS

Current status: Research design

finalization

Immediate next steps:

Extended participant research (Spring 2026)

Curriculum development (Summer 2026)

Pilot testing (Fall 2026)

Lessons Learned/Edits to design Fall 2026/Spring 2027

Full implementation (Fall 2027)

Expected preliminary results:

Winter 2028/Spring 2028

