



Graphic Narratives, Trauma and Social Justice

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ABSTRACT In this paper, we explore the relevance of graphic novels to understanding and responding to the complex nature of traumatic experiences. We argue that graphic narratives of trauma, which combine visual images and written text, significantly differ from biomedical and legal accounts by presenting the nuances of traumatic experiences that escape the conventions of written testimony. Building on the literature that integrates social justice concerns with visual methods and graphic medicine, we contend that graphic narratives effectively convey the complexities of traumatic experiences, including embodied experiences that are not always apparent, intelligible, or representable in written form, leading to greater social recognition of the dynamics and consequences of trauma. To illustrate this claim, we analyze Una's *Becoming Unbecoming* (2015), a graphic novel that explores themes relating to trauma and social justice. Una relies on the graphic medium to explore the interconnections between personal and collective experiences of gender-based violence, and to show how physical embodied experience is central to her own experience of trauma. Graphic narratives like *Becoming Unbecoming* also offer a space for addressing the emotional, physical and financial costs of survivorship that usually are not available in legal written testimonies, potentially leading to better justice outcomes for trauma survivors in terms of social intelligibility and recognition, and access to social resources for healing.

KEYWORDS graphic medicine; graphic narratives; Una; trauma; social justice; visual methods

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Introduction

Qualitative researchers have identified visual methods as powerful tools that can productively represent the complex lives of a diverse range of individuals and social groups (Hill & Azzarito, 2012; Lorenz, 2010; Rose, 2014). Participatory visual methods such as photo-voice and photo-elicitation have been particularly popular as collaborative methods that decenter the research process by producing knowledge about the lived experiences of marginalized subjects from their own perspectives (Castleden, Garvin & Huu-ay-aht First Nations, 2008; Power, 2014). Rapid developments in digital technologies have expanded the variety of visual tools available to researchers in collaborative projects with under-represented and marginalized populations. Digital storytelling and personal mapping approaches, for example, are newer visual methods that disrupt conventional modes of knowledge production, and deepen understandings of the complex operations of social inequalities and struggles for social justice (Hidalgo, 2015; Nanackchand & Berman, 2012; Ulmer, 2017). No matter which visual approaches are used, scholars argue for their value as modes of communication that enable vulnerable groups to articulate difficult and complex personal experiences in ways that text-based approaches often frustrate, opening possibilities for enhanced social recognition and claims for justice (Lorenz & Chilingirian, 2011; Ogston-Tuck, Baume, Clarke & Heng, 2016).

In this paper, we contribute to the growing literature on social justice and visual methods through a focus on graphic narratives, a relatively new form of visual qualitative methodology. Graphic narratives, which are sometimes referred to as comics or sequential art, present written text and visual imagery within a series of juxtaposed panels to convey a story (McCloud, 1994). This interplay of visual imagery and text enables authors to produce narratives that communicate a range of experiences that are not always socially discernible and intelligible (Squier, 2015; Williams, 2015). We explore the potential of graphic narratives to convey the complexity of trauma as a particular type of social experience. Our interest in trauma centers on the psychological distress or injury that is disproportionately experienced by low-income individuals, people of color, LGBTQ individuals and women due to their social marginalization. We argue that graphic narratives are tools that effectively communicate what are often unrepresentable and unspeakable traumatic experiences.

Graphic narrative depictions of trauma move beyond traditional legal and clinical frameworks that provide limited understandings of trauma, and therefore hamper possibilities for justice for those who have experienced it. Legal approaches, for instance, require traumatized subjects to provide “valid” and “measurable” evidence of trauma upon which judgments about justice are made. These evaluations of trauma are informed by formal textual testimony, as well as technical and specialized forms of knowledge, that are unable to capture the nuance and complexity of traumatic experience (Brown,

2008). Legal frameworks also focus on moral binaries or clear-cut distinctions – right/wrong or good/bad – that cannot accommodate complex, situated and experiential forms of knowledge. Consequently, these institutional frameworks simplify the realities of trauma, and silence personal experiences (Brown, 2008, p. 130), thereby creating a barrier to social recognition and justice (Crawley & van Rijswick, 2012).

By intertwining written text and visual imagery, graphic narratives effectively accommodate the nuances of traumatic experiences that written testimony alone cannot fully capture. For example, much social justice work that focuses on trauma demonstrates that individual and collective traumatic experiences are shaped by various interconnected forms of violence and oppression. Graphic narratives, which incorporate multiple modes of communication, provide more robust platforms for articulating these experiential complexities. They also offer a space for conveying the emotional, physical and financial costs of survivorship that is usually not available in legal written testimonies (Cvetkovich, 2008). Scholars and social justice activists argue that symbolic and physical violence is systematically perpetuated by legal and other administrative systems as they fail to understand these aspects of trauma, resulting in inadequate responses and allocations of resources (INCITE, 2006; Spade, 2013, 2015). In this respect, graphic narratives that communicate traumatic experiences in their fullness and complexity call into question the justice system's notion of a "fair" distribution of social rewards and burdens by highlighting the disproportionate physical, emotional and financial costs of survivorship, potentially leading to better justice outcomes for trauma survivors in terms of social intelligibility and recognition and access to social resources for healing.

In sum, we argue that representations of trauma in the space of graphic narratives provide openings for more complicated understandings of trauma, which in turn offer possibilities for justice that extend beyond what can be achieved within institutionalized legal and biomedical frameworks. These openings and possibilities are even more realizable and compelling when graphic narratives on trauma are presented as memoirs that attest to the lived experience of trauma (Gilmore, 2011), because they highlight the limits associated with text-based representations of testimony. We demonstrate these claims through an analysis of Una's *Becoming Unbecoming* (2015), a graphic narrative related to the traumatic issue of sexual assault and gender-based violence.

Our argument unfolds in three sections. First, we draw on work in the burgeoning field of graphic medicine (e.g., Czerwiec et al., 2015) that employs graphic narratives to convey the complexities of health experiences, and to provide individuals the tools to make sense of their own health experiences, which can then be communicated to doctors and other health professionals. Graphic medicine provides alternative ways to understand health and medical experiences that are not readily perceptible to most

people. This practice is particularly helpful in the context of trauma, when symptoms like anxiety often manifest through embodied sensations that are difficult to describe. Graphic medicine literature shows how graphic narratives can communicate complex health experiences, thereby disrupting clinical and legal representations that tend to simplify experiences like trauma. Second, we explore how trauma is framed in legal and biomedical contexts. We address existing institutional approaches for responding to trauma and the limitations of these approaches for achieving justice. Third, we analyze the graphic narrative *Becoming Unbecoming* by Una (2015), which focuses on both the personal experience of sexual violence and the collective experience of gender-based violence to illustrate how the two are connected. Embodiment, or the physical embodied experience of trauma, is central to Una's experience of trauma, and to her combination of written and visual representations of that experience. She frequently references her somatic experience of trauma to demonstrate how that experience shapes the complexities of her everyday life, producing a complex and alternate form of testimony. Una aims to make clear the nuance and complexity of trauma that is often missing from formal legal testimony, opening the possibility for social recognition, healing and justice. Her graphic narrative demonstrates that comics and graphic novels are powerful visual approaches to social analysis; it artfully and effectively articulates the traumatic experiences of socially and politically marginalized individuals, including women, people of color and the disabled, that are often overlooked. This graphic narrative also represents a significant departure from the individualization of trauma characteristic of legal and clinical approaches by demonstrating how the collective is embedded in individual experiences.

Seeing and Representing through Graphic Medicine

Scholarly and popular interest in graphic narratives is growing, and has recently extended into the realm of health and medical scholarship and practice; a growing number of health researchers, professionals and patients have turned to comics and graphic novels to understand and communicate the complexity of health experiences (e.g., Chast, 2014; Dahl, 2009; Donovan, 2014; Fies, 2006; Forney, 2012; Leavitt, 2012; Small, 2009). Health-related graphic narratives, broadly described as Graphic Medicine, are receiving widespread scholarly attention because of the ways they mobilize images and other visual codes to convey the nuances and intricacies of health and medical experiences (Cohn, 2014; Groensteen, 2007; McCloud, 1994). *Graphic Medicine Manifesto*, for instance, offers a comprehensive overview of the productive uses of comics in medical education and pedagogy, their relevance to personal accounts and experiences of illness and the deployment of comics as a strategy for social change (Czerwiec et al., 2015)

Cartoonist and physician Ian Williams, who coined the term “graphic medicine,” addresses the important visual contributions made by sequential art in representing illness when he argues that this “graphic medium facilitates a complex visual layering of subjective and objective experiences, bridging the gap between clinical facts and personal experiences” (Williams, 2014, p. 64). He demonstrates how graphic narratives on health, or graphic pathographies, deploy visual elements to create nuanced and accessible explanations of health and medical issues that contest accounts characteristically produced by medical knowledge. Relatedly, he argues that sequential art is an avenue through which individuals can claim representational control over their health and medical experiences. Written as memoirs, graphic narratives enable a person who has experienced a challenging health issue to reflect on identity, and destabilize the ways in which illness comes to define one’s identity. Williams (2015, p. 119) writes, “making autobiographical comics is a type of symbolic creativity that helps form identity – a way to reconstruct the world, placing fragments of testimony into meaningful narrative and physically reconstructing the damaged body.”

Williams contends that the act of representing the body is significant for people who are experiencing different forms of illness that manifest in different ways. He identifies three embodied expressions of illness that comics help to convey: manifest, concealed and invisible. Manifest illnesses are clearly visible as scars and other physical signs on the body. Concealed illnesses are not readily apparent to the casual observer. Symptoms present occasionally, and often create psychological stress for the affected person. Invisible illnesses, like mental illness, leave no physically discernible symptoms or signs on the surface of the body. Like concealed and invisible illnesses, trauma produces psychological and physical symptoms that may not be readily apparent. To represent the complexity of concealed and invisible illnesses, graphic medicine authors must rely on a variety of graphic and textual strategies to make the illness and its effects apparent, including the narrative techniques of metaphor and exaggeration. Authors likewise may emphasize imagery and physical space to convey a mood or the feeling of isolation. As we demonstrate below, in *Becoming Unbecoming* (2015) Una successfully relies on these strategies to convey to the reader the complex and overwhelming experiences of trauma.

Representations of health experiences in sequential art contrast sharply with other visual media and technologies traditionally used by health professionals in medical practice and public health initiatives to depict health, illness and disease (Osther, 2013; Serlin, 2011). These techniques include imaging technologies like mammograms, sonograms and x-rays (Weir, 2006; Woliver, 2002), as well as health brochures and pamphlets produced for clinics and public health offices that depict a narrow understanding of health and medical experiences. In contrast to the visual representations mediated by medical practitioners, patient portrayals of health related issues in comics and

graphic narratives radically recast the narrative of health and disease. The most important change in the narrative concerns the ability of patients to self-represent the immediate, lived experience of health and illness (Charon, 2008).

The issue of self-representation has been central to the study and production of graphic medicine narratives (Czerwicz et al., 2015), because many graphic narratives are written in autobiographical form. The opportunity to speak for oneself about personal health and medical experiences includes the ability to “communicate immediate visceral understanding” (Green & Myers, 2010, p. 574), which is more achievable using sequential art that extends representational repertoires beyond written text and words alone. The visual/textual interface creates a hybrid form amenable to portraying an author’s personal health story, including the complex processes and experiences that shape their body, history and memory. In the space of the graphic narrative, an author constructs knowledge of the self.

When an individual represents their experience of a particular health issue, a proximate relationship between the author and reader is established. The author speaks directly to the reader about their intimate experiences. The absence of an intermediary in the relationship minimizes the potential that readers will misunderstand an author’s experience of a particular health issue, which is especially significant for concealed and invisible illnesses that may be poorly understood or go unrecognized, contributing to significant psychological and physical suffering. For a person experiencing mental illness, for instance, the ability to speak for oneself about health and medical concerns is a political act. In the space of a graphic narrative, individuals can address and disrupt normative yet misleading ideas about mental illness. Autobiographical graphic medicine narratives allow individuals with firsthand experience to depathologize and reinterpret what it means to live with a particular illness, providing them a sense of agency and empowerment (Myers, 2015). This is an important step towards realizing social justice by rendering these experiences socially intelligible and recognizable.

For those experiencing illness, the ability to counter normative and pathologizing discourses of biomedicine using the tools of graphic medicine is significant. Other social groups that are perpetually misrepresented or rendered invisible by dominant discourses, like those who have experienced trauma, may also find graphic narratives useful in challenging totalizing discourses. Trauma does not always present in ways that fit clinical diagnoses, which creates confusion and potentially compromises the physical and mental health of the person who has experienced a traumatic event. The graphic medium can be used to disrupt such a narrow and totalizing biomedical framing. In the section that follows we elaborate on the ways in which trauma tends to be framed in legal and biomedical contexts. We then address existing approaches for responding to trauma, particularly in relation

to sexual assault, and the limitations of these approaches for achieving social recognition and justice.

Traumatic Complexities and Limitations to Justice

Biomedicine identifies trauma as intense emotional reactions to catastrophic stressors, harms caused by something external to the individual. This understanding of trauma focuses on how individuals assimilate different forms of injury or harm caused by external stressors, and how emotional and behavioral outcomes take shape following a traumatic incident. It also frames trauma as reactions that individuals have in the aftermath of situations believed to be beyond the realm of normal human experience (Scaer, 2007; van der Kolk, 2014). Symptoms of trauma include re-experiencing the original traumatic event(s) through flashbacks or nightmares, avoiding situations associated with the original trauma and experiencing heightened arousal after the traumatic event, such as hyper vigilance, anger and sleep difficulties.

The legal system has difficulty recognizing the emotional and psychic manifestations of mental illnesses, some of which are rooted in trauma. Personal injury litigation has operated on a strict definition of bodily harm, contending that bodily injury can only be claimed when physical manifestations of trauma are apparent on the body. Shen (2013) discusses cases in which courts dismissed the emotional stress of trauma and PTSD because of the lack of visible bodily injury. This tendency to differentiate between physical and emotional harm and to insist on physical evidence can have significant consequences for victims. Without legal recognition of emotional harm, victims may feel that they are culpable for their experiences.

Trauma studies scholars identify other limitations of biomedical and legal framings of trauma that negatively affect survivors (e.g., Joseph, 2013). In medicine and law, trauma is approached primarily as an individual experience, ignoring the ways in which traumatic events often affect many people (Cvetkovich, 2008; Gilmore, 2011). The widespread and normalized nature of gender-based violence and sexual assault exemplify how women's collective experience is often isolated into individualized traumatic events. Trauma studies scholars maintain that this division between individual and collective experience renders invisible the structural conditions and social events that give rise to collectively experienced violent acts. Feminist arguments about rape culture aim to connect individual and collective experiences of sexual violence, which helps to minimize survivors' feelings of shame and guilt. Graphic narratives, such as *Maus* (Spiegelman, 1986), *Lighter Than my Shadow* (Green, 2013), *A Child's Life* (Gloeckner, 2000), and *The Courage to be Me* (Burrowes, 2014), have been at the forefront of linking individual and collective trauma as outcomes of broader social conditions and events (Caruth, 1996; Craps, 2013).

Legal understandings of trauma are limited beyond their definitions of trauma, bodily harm and victims. For example, trauma cases often do not make it to court, due in part to problematic processes related to reporting and investigating claims, which exacerbates the harm experienced by trauma survivors. A recent report on sexual assaults found that 79% of investigated cases did not end up in courts in Canada (Rizvic, 2018). YWCA Canada claims that 460,000 sexual assaults occur in Canada every year, but very few of these crimes are engaged by the criminal justice system (Johnson, 2012). Their data show that of every 1,000 sexual assaults, 33 are reported to the police, 29 are recorded as a crime, 12 have charges presented, six are prosecuted, three lead to conviction and 997 assailants walk free. The personal shame of experiencing assault can explain why so many women do not make initial reports. This hesitancy is exacerbated by low conviction rates in cases that are reported. Underreporting has significant ramifications for the social recognition of victims and their access to social, health and legal services, including compensations, funded-counseling and other healthcare services (Craig, 2018).

When cases do end up in courtrooms, sexual assault prosecutions rely on written and oral testimonies as evidence, which are often inadequate tools for conveying the complexity of trauma (Buelens, Durant & Eaglestone, 2014; Caruth, 1996; Craps, 2013; LaCapra, 2014). Craig (2018) contends that when survivors of sexual assault bring claims to the legal system, they are required to construct victim impact statements, an extremely limited opportunity to describe their experiences. Therefore, Miller (2013) and Balfour, Du Mont and White (2018) argue that victim impact statements frustrate procedural fairness, contribute to post traumatic distress, aggravate emotional distresses like shame and self-blame, silence survivors and render their experiences socially unreadable (Craig, 2018). Survivors consequently experience going to trial as an additionally abusive, humiliating and discriminatory trauma. This situation is especially traumatic for women with mental disabilities (Benedt & Grant, 2007), and racialized and indigenous women (Razack, 2002).

In the next section, we address how graphic narratives can overcome some of these legal limitations, with a particular focus on the incommunicability of trauma via written text. We analyze Una's *Becoming Unbecoming* (2015) to illustrate these claims. Like other graphic narratives on trauma, it demonstrates that a combination of visual and textual narrative provides a more robust hybrid platform for documenting, describing and recognizing the experience of trauma as a foundation for claims to social justice.

Witnessing and Embodiment in Graphic Narratives

Comics scholar Hillary Chute (2010, p. 2) claims that “today’s most riveting feminist cultural production is the form of accessible yet edgy graphic

narratives,” including *Persepolis* (Satrapi, 2007), *Fun Home* (Bechdel, 2007) and *Hark! A Vagrant* (Beaton, 2011). These graphic narratives compellingly communicate and make sense of the challenges women face in relation to traumatic experiences. Questions concerning the body and embodiment are at the heart of these autobiographic narratives on trauma. Women artists suggest the graphic form is productive because it helps to capture the nuances of an embodied experience that are often invisible and hard to articulate through words alone.

Una, an anonymous Yorkshire author, is especially sensitive to the invisibility of traumatic experience. Her graphic memoir *Becoming Unbecoming* (2015) explores her story as a victim of several sexual assaults in the 1970s. Una positions her story in relation to the contemporaneous search for the Yorkshire Ripper, a serial killer who murdered 13 local women and attempted to murder seven more. By interweaving these stories, Una considers her own embodied experience of trauma in the larger social context of gendered violence, demonstrating the link between her own painful experiences and those of other sexual assault victims. *Becoming Unbecoming*, therefore, troubles the dominant distinction made between individual and collective experiences of trauma.



Figure 1. (Source: Una, 2015, p. 7)

A critical focus of *Becoming Unbecoming* is rendering accessible the confusion and pain of trauma, and the effects of experiences of sexual assault on a victim’s sense of self and personal development from an early age. On the very first page, Una presents a haunting graphic of her younger self carrying a heavy, empty speech balloon over her shoulder as she climbs a steep hill (Figure 1). The absence of words in the balloon foreshadows the cumulative effects of unspoken trauma, the victim-blaming culture that is

associated with it and the possibilities of justice that are never realized. The emptiness of the speech balloon conveys both the personal and social silences related to trauma. Revisiting her early childhood later in the book, Una acknowledges how these isolating experiences affect many young girls: “too many girls have to fight in silence” (2015, p. 169).

Una’s body is another prominent feature in this opening illustration, which ties her experiences of sexual assault as a youth to the murders and attempted murders of other women in Yorkshire. She depicts her small frame moving slowly through the pages of her narrative, constantly encumbered with the weighty word balloon. She struggles forward, through her assaults and a wider world of sexual violence. Her body bows down under the weight of repeated personal and systemic gendered injustices.

Una relies on the graphic medium to articulate how these injustices contrast to positive experiences in her youth. She references the pop culture and music that figured prominently in everyday life in 1970s Yorkshire, specifically the artists that inspired her to learn to play the guitar. However, by identifying it as “a strange musical era” (2015, p. 11), she references the climate of sexism that informed her favorite rock music and television programs like *Top of the Pops*, in which male stars performed music while scantily clad, buxom women silently smiled and posed in the background. Una conveys the sense of confusion she feels as she comes to understand this sexism and gendered expectations for women. Although one of her favorite musicians advocated for her to *Walk Tall* with confidence, her own experiences suggested she should instead “lower my gaze” (2015, p. 14). Pop culture may have presented a world of possibilities, but Una realizes the limitations society placed on her as a girl.



Figure 2. (Source: Una, 2015, p. 1)

Throughout the narrative, Una stresses that her experience is not unique. She acknowledges that no female is truly “safe,” regardless of whether or not she is a “good girl,” and that rape culture leads to profound physical and emotional trauma, changing a person permanently. She achieves the latter by showing herself going through a full metamorphosis. In two illustrations, she has an insect’s body, which contrasts sharply with earlier representations of her youthful self, innocently playing with paper doll cutouts. Figure 2, for instance, depicts Una transformed into a hybrid human-insect, with antennae and translucent wings that help her navigate a world that continually alters her. Repeated visual depictions of personal metamorphosis capture invisibilized traumatic experiences that leave a lasting effect, and may be difficult to articulate in words.

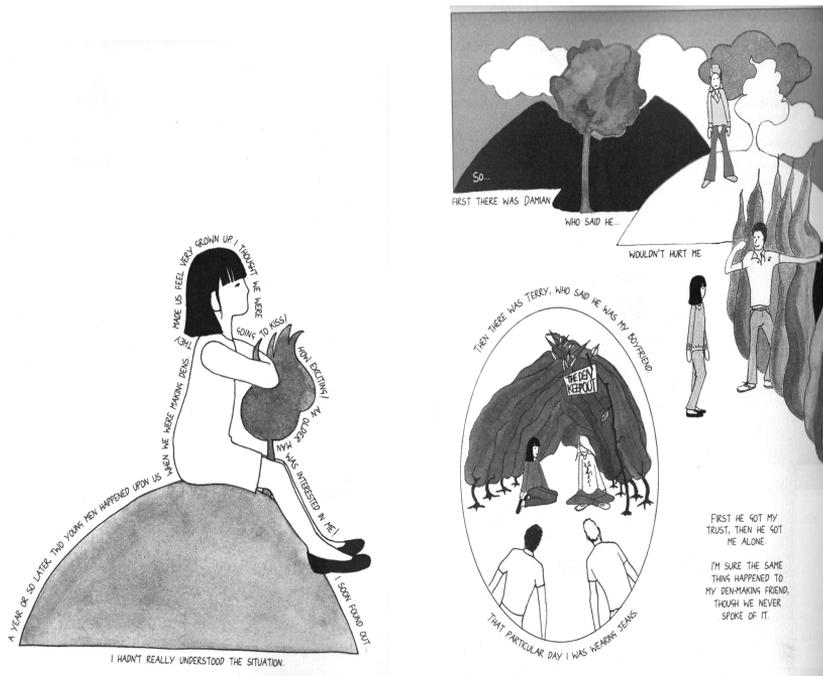


Figure 3. (Source: Una, 2015, pp. 34-35)

Una is able to speak directly to readers of the complex reality of her experiences and perspectives, implicating them in the narrative (Squier, 2015). The lack of an interpretive intermediary positions the reader as a confidante and witness to unfiltered events and the emotions they invoke. Una skillfully draws the reader into the pain and confusion experienced by her younger self. For instance, in a two-page spread she recalls her earliest experiences with sexual assault (Figure 3). The first page depicts a young

Una seated in profile as if observing the page that follows, her arms folded, leaning against a small opaque tree. She is seated on what appears to be a small hill, many times smaller than the steep one shown on the first page of the book. The small hill represents struggles that are not yet insurmountable. She is at the starting point of her struggles, which become larger over time. Words follow the contours of the hill, Una's body and the tree, communicating the thoughts running through her mind prior to the assault: "I hadn't really understood the situation" (2015, p. 34).

On the opposing page, Una depicts two scenes, moments before the assaults occur. In one scene we see young Una about to walk alone into a field with an older boy. She recalls that he said he wouldn't hurt her. In the other, Una and her childhood friend sit smiling under a canopy of trees that is fashioned into a den. A sign announces "The Den. Keep Out," but it will offer no protection from two older boys who are approaching. Both scenes emphasize her naivety and youth. Readers are witnesses to Una's apprehension and anxiety about events that will leave a lasting effect on her sense of self. Adjacent to the second scene, Una recalls how one of the boys was able to get her trust and separate her from her friend. She confides, "I'm sure the same thing happened to my den-making friend, though we never spoke of it" (2015, p. 35). Here, she references the ways in which trauma creates an isolating effect that frustrates women's ability to share their experiences, even with those close to them.



Figure 4. (Source: Una, 2015, p. 120)

Una suggests that the struggle to articulate experiences of trauma extends beyond interpersonal relationships to the ways in which administrative and legal systems deal with trauma. She notes that even when assault is brought to court, justice does not necessarily take place. She specifically asks, “Where is justice?” (2015, p. 120), criticizing the lack of legal interventions into acts of violence against women (Figure 4). Her critique addresses more than the justice system’s failure to redress harms: “We can’t blame the justice system for the things it thinks and does, if it just thinks and does the same things as everyone else” (2015 p. 165).

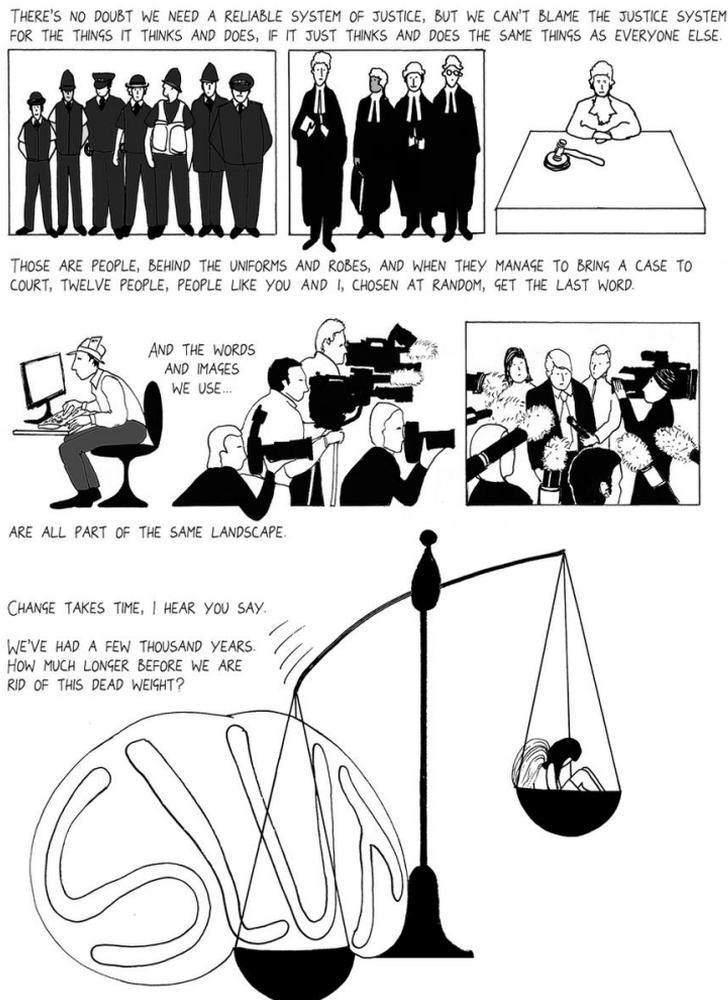


Figure 5. (Source: Una, 2015, p. 165)

In Figure 5, Una points to the systemic failure of many institutions to respond to instances of trauma. Below a group of policemen and barristers, she draws a reporter writing feverishly at a computer, alongside news cameramen that surround an attorney who is giving a briefing. She depicts the disparate individuals and institutions that are complicit in perpetuating the inequities of the justice system, and identifies how they are shaped by the same society that perpetuates sexism: “the words and images we use are all a part of the same landscape” (2015, p. 165). Lawyers, police, the courts and popular media cannot impart justice when they convey to women that they must be passive, modest objects. Una highlights the impossible feat women like her face in responding to this message and changing the culture of shame. She depicts this impossibility using a scale, one side weighed down by the word “Slut,” the other holding Una, slumped over, her wings bent down. Justice has not been served; she is defeated.

Una’s narrative provides many visually stimulating yet heartbreaking depictions of her daily struggles living in the aftermath of sexual violence. We have drawn on only a small selection of them to support our arguments. Our goal in analyzing them is to demonstrate how graphic narratives are a unique hybrid narrative form that relies on both visual imagery and text to convey the complexities of trauma and the opportunities to achieve justice for victims of trauma.

Conclusion

Becoming Unbecoming (2015) offers a starting point for considering the ways in which graphic narratives can be utilized as visual methodologies that represent the complexity of trauma and traumatic experiences. It demonstrates how the hybrid form of written text and visual imagery can convey complex aspects of trauma that escape the conventions of biomedicine and law. Graphic narratives are especially compelling as alternatives to text-based representations of testimony. They present opportunities for a more complicated understanding of trauma, which in turn enhances possibilities for achieving social intelligibility, recognition and justice for survivors.

Una’s work also demonstrates the ways in which explanations of trauma can extend beyond the limits of biomedical and institutional frameworks. Graphic representations of trauma provide a space for articulating the ways in which individual and collective experiences of violence and repression are interconnected, and for the self-representation of those experiences, which helps to avoid the simplification of trauma to fit into existing institutional practices (Giddens, 2015; Gomez Romero & Dahlman, 2012), and to convey experiences, sensations and perceptions, like confusion and isolation, that are difficult to describe and perceive. She effectively uses the format of the graphic narrative to emphasize the centrality of the body to collective and

individual instances of trauma, and the structural conditions and social events that link individual experiences of sexual assault to prevailing conditions of sexism and widespread violence against women that produce collective experiences of trauma.

Becoming Unbecoming also calls attention to the limits of the legal system in helping survivors achieve justice. Legal systems are constrained by dominant evidentiary, reporting and investigating practices and moral binaries that are employed to understand and evaluate events like sexual assault. It also is restricted by its reliance on broader sociopolitical framings of gender and gender expectations to understand and adjudicate acts of sexual violence. Justice cannot be achieved for trauma survivors when these limitations accrue to render traumatic experiences socially unreadable and unrecognizable. Una's work demonstrates the potential of graphic narrative as a space through which individuals may counter institutionalized approaches that present a barrier to achieving justice. In contrast to legal and clinical approaches to trauma that focus solely on textual testimony and therefore limit insight into the complex, multifaceted nature and experience of trauma, Una's effective combination of visual and textual representation provides a platform for communicating more complex and inter-relational understandings of trauma than is possible with through text alone, offering social justice possibilities beyond legal and clinical institutions, and shifting the institutional emphasis away from physical, valid and measurable "proof" of trauma to one of social recognition and justice at various social scales.

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References

- Beaton, K. (2011). *Hark! A vagrant*. Montreal, QC: Drawn and Quarterly.
- Bechdel, A. (2007). *Fun home: A family tragicomic*. New York: Mariner Books.
- Benedet, J., & Grant, I. (2007). Hearing the sexual assault complaints of women with mental disabilities: Consent, capacity and mistaken belief. *McGill Law Journal*, 52(2), 243-289.
- Balfour, G., Du Mont, J., & White, D. (2018). 'To this day she continues to struggle with the terror imposed on her': Rape narratives in victim impact statements. *Women & Criminal Justice*, 28(1), 43-62.
- Brown, W. (2008). *Regulating aversion: Tolerance in the age of identity and empire*. Princeton, NJ: Princeton University Press.

- Buelens, G., Durant, S., & Eaglestone, R. (2014). *The future of trauma theory: Contemporary literary and cultural criticism*. London: Routledge.
- Burrowes, N. (2014). *The courage to be me: A Story of courage, self-compassion and hope after sexual abuse*. London: NB Research Ltd.
- Caruth, C. (1996). *Unclaimed experience: Trauma, narrative, and history*. Baltimore, MD: Johns Hopkins University Press.
- Castleden, H., Garvin, T., & Huu-ay-aht First Nation. (2008). Modifying photovoice for community-based participatory indigenous research. *Social Science & Medicine*, 66, 1393-1405.
- Charon, R. (2008). *Narrative medicine: Honoring the stories of illness*. New York: Oxford University Press.
- Chast, R. (2014). *Can't we talk about something more pleasant? A memoir*. New York: Bloomsbury.
- Chute, H. (2010). *Graphic women: Life narrative and contemporary comics*. New York: Columbia University Press.
- Cohn, N. (2014). *The visual language of comics: Introduction to the structure and cognition of sequential images*. New York: Bloomsbury.
- Craps, S. (2013). *Postcolonial witnessing: Trauma out of bounds*. London: Palgrave Macmillan.
- Crawley K., & van Rijwsijk, H. (2012). Justice in the gutter: Representing everyday trauma in the graphic novels of Art Spiegelman. *Law, Text, Culture*, 16(1), 93-118.
- Craig, E. (2018). *Putting trails on trial: Sexual assault and the failure of the legal profession*. Montreal, QC: McGill-Queen's University Press.
- Cvetkovich, A. (2008). Drawing the archive in Alison Bechdel's *Fun Home*. *Women's Studies Quarterly*, 36(1/2), 111-128.
- Czerweic, M., Williams, I., Squier, S., Green, M., Myers, K., & Smith, S. (2015). *Graphic medicine manifesto*. University Park, PA: Penn State University Press.
- Dahl, K. (2009). *Monsters*. Portland, OR: Microcosm Publishing.
- Donovan, C. (2014). Representations of health, embodiment and experience in graphic memoir. *Configurations*, 22(2), 237-253.
- Fies, B. (2006). *Moms' cancer*. New York: Harry N. Abrams.
- Forney, E. (2012). *Marbles: Mania, depression, Michelangelo and me*. New York: Gotham Books.
- Giddens, T. (2015). *Graphic justice: Intersections of comics and law*. New York: Routledge.
- Gilmore, L. (2011). Witnessing Persepolis: Comics, trauma and childhood testimony. In M. A. Chaney (Ed.), *Graphic subjects: Critical essays on autobiography and graphic novels* (pp. 157-163). Madison, WI: University of Wisconsin Press.
- Gloekner, P. (2000). *A child's life and other stories*. Berkeley, CA: Frog Books.
- Green, K. (2013). *Lighter than my shadow*. London: Jonathan Cape.
- Groensteen, T. (2007). *The systems of comics*. Jackson, MS: University Press of Mississippi.
- Green, M. J., & Myers, K. (2010). Graphic medicine: Use of comics in medical education and patient care. *British Medical Journal*, 340(7746), 574-577.
- Gomez Romero, L., & Dahlman, L. (2012). Justice framed: Law in comics and graphic novels. *Law, Text, Culture*, 16(2), 3-32.
- Hidalgo, L. (2015). Augmented fotonovelas: Creating new media as pedagogical and social justice tools. *Qualitative Inquiry*, 21(3), 300-314.
- Hill, J., & Azzarito, L. (2012). Representing valued bodies in PE: A visual inquiry with British Asian girls. *Physical Education & Sports Pedagogy*, 17(3), 263-276.
- INCITE! Women of Color against Violence. (2006). *Color of violence: The Incite! anthology*. Cambridge, MA: South End.
- Johnson, H. (2012). Limits of a criminal justice response: Trends in police and court processing of sexual assault. In E. Sheehy (Ed.), *Sexual assault in Canada: Law, legal practice and women's activism* (pp. 613-634). Ottawa, ON: University of Ottawa Press.
- Joseph, S. (2013). *What doesn't kill us: The new psychology of posttraumatic growth*. New York: Basic Books.
- LaCapra, D. (2014). *Writing history, writing trauma*. Baltimore, MD: John Hopkins University Press.

- Leavitt, S. (2012). *Tangles: A story about Alzheimers, my mother and me*. Calgary, AB: Freehand Books.
- Lorenz, L. (2010). Visual metaphors of living with brain injury: Exploring and communicating lived experience with an invisible injury. *Visual Studies*, 25(3), 210-223.
- Lorenz, L., & Chilingerian, J. (2011). Using visual methods to achieve fair process in clinical care. *Journal of Visualized Experiments*, 48, 2342.
- Miller, K. (2013). Purposing and repurposing harms: The victim impact statement and sexual assault. *Qualitative Health Research*, 23(11), 1445-1458.
- Myers, K. (2015). Graphic pathography in the classroom and the clinic. In M. Czerweic, I. Williams, S. Squier, M. Green, K. Myers & S. Smith (Eds.), *Graphic medicine manifesto* (pp. 87-114). University Park, PA: Penn State University Press.
- McCloud, S. (1994). *Understanding comics*. Northampton, MA: Tundra Publishing.
- Nanackchand, V., & Berman, K. (2012). Visual graphics for human rights, social justice, democracy and the public good. *South African Journal of Education*, 32(4), 465-478.
- Ogston-Tuck, S., Baume, K., Clarke, C., & Heng, S. (2016). Understanding the patient experience through the power of film: A mixed method qualitative research study. *Nurse Education Today*, 46, 69-74.
- Osther, K. (2013). *Medical visions: Producing the patient through film, television and imaging technologies*. Oxford: Oxford University Press.
- Power, N. (2014). Rural youth and emotional geographies: How photovoice and words alone methods tell different stories of place. *Journal of Youth Studies*, 17(8), 1114-1129.
- Razack, S. (2002). *Race, space and the law: Unmapping a white settler society*. Toronto: Between the Lines.
- Rizvic, S. (2018, February 20). Why women can't get justice from sexual assault trials. *Walrus Magazine*. Retrieved from <https://thewalrus.ca/why-many-women-cant-get-justice-from-sexual-assault-trials/>
- Rose, G. (2014). On the relation between 'visual research methods' and contemporary visual culture. *The Sociological Review*, 62(1), 24-46.
- Satrapa, M. (2007). *The complete Persepolis*. New York: Pantheon.
- Scaer, R. (2007). *The body bears the burden: Trauma, dissociation, and disease*. London: Routledge.
- Serlin, D. (2011). *Imagining illness: Public health and visual culture*. Minneapolis, MN: University of Minnesota Press.
- Shen, F.X. (2013). Mind, body and criminal law. *Minnesota Law Review*, 97, 2036-2175.
- Small, D. (2009). *Stitches*. New York: W. W. Norton & Company.
- Spade, D. (2013). Intersectional resistance and law reform. *Signs*, 38(4), 1031-1055.
- Spade, D. (2015). *Normal life: Administrative violence, critical trans politics and the limits of law*. Durham, NC: Duke University Press.
- Spiegelman, A. (1986). *Maus*. New York: Pantheon Books.
- Squier, S. (2015). The uses of graphic medicine for engaged scholarship. In M. Czerweic, I. Williams, S. Squier, M. Green, K. Myers, & S. Smith (Eds.), *Graphic medicine manifesto* (pp. 41-66). University Park, PA: Penn State University Press.
- Ulmer, J. (2017). Writing urban space: Street art, democracy and photographic cartography. *Cultural Studies – Critical Methodologies*, 17(6), 491-502.
- Una. (2015). *Becoming unbecoming*. Brighton, UK: Myriad Editions.
- van der Kolk, B. (2014). *The body keeps the score: Brain, mind and body in the healing of trauma*. New York: Penguin.
- Weir, L. (2006). *Pregnancy, risk and biopolitics*. New York: Routledge.
- Williams, I. (2015). Comics and the iconography of illness. In M. Czerweic, I. Williams, S. Squier, M. Green, K. Myers & S. Smith (Eds.), *Graphic medicine manifesto* (pp. 115-142). University Park, PA: Penn State University Press.
- Williams, I. (2014). Graphic medicine: The portrayal of illness in underground and autobiographical comics. In V. Bates, A. Bleakley & S. Goodman (Eds.), *Medicine, health and the arts: Approaches to the medical humanities* (pp. 64-84). New York: Routledge.
- Woliver, L. (2002). *The political geographies of pregnancy*. Champaign, IL: University of Illinois Press.