

Photovoice: A Participatory Action Research Strategy Applied to Women's Health

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ABSTRACT

Photovoice is a participatory action research strategy that may offer unique contributions to women's health. It is a process by which people can identify, represent, and enhance their community through a specific photographic technique. Photovoice has three main goals: to enable people (1) to record and reflect their community's strengths and concerns, (2) to promote critical dialogue and knowledge about personal and community issues through large and small group discussion of their photographs, and (3) to reach policymakers. This report gives an overview of the origins, key concepts, methods, and uses of photovoice as a strategy to enhance women's health.

INTRODUCTION

PHOTOVOICE IS AN INNOVATIVE participatory action research (PAR) method based on health promotion principles and the theoretical literature on education for critical consciousness, feminist theory, and nontraditional approaches to documentary photography. Photovoice enables people to identify, represent, and enhance their community through a specific photographic technique. It provides people with cameras to photograph their perceived health and work realities. Photovoice has three main goals: to enable people (1) to record and reflect their personal and community strengths and concerns, (2) to promote critical dialogue and knowledge about personal and community issues through group discussions of photographs, and (3) to reach policymakers. This article sets forth the theoretical underpinnings of photovoice, key concepts, and methodology. Drawing examples from field experience in China and the United States, the contributions of photovoice as a PAR strategy for promoting women's health are described.

THEORETICAL UNDERPINNINGS

The photovoice concept was developed initially by Wang and Burris to enable Chinese village women to photograph their everyday health and work realities.^{1,2} Three main sources underpin this technique: (1) the theoretical literature on education for critical consciousness,³ feminist theory, and nontraditional approaches to documentary photography, (2) the efforts of community photographers and participatory educators to challenge assumptions about representation and documentary authorship,^{4,5} and (3) the application of the process in the Yunnan Women's Reproductive Health and Development Program supported by the Ford Foundation.

Of particular interest here are the roots of photovoice in feminist inquiry. Weiler has identified three themes that characterize a feminist methodology.⁶ The first theme, an appreciation of women's subjective experience as researchers, advocates, and participants, builds on the understanding that feminist theory and practice carry out programs and policies by and with women instead of on

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women in ways that honor women's intelligence and value knowledge grounded in experience. Photovoice is a method that enables women to control the photographic process in order to express, reflect and communicate their everyday lives. The second theme, a recognition of the significance of women's experience, holds that women's everyday identities matter. As Solomon⁷ has stated:

Women's actual experience tells a different story. There is a split between the fictitious woman represented publicly and how we know our daily and private selves to be. How can we as women tell stories that eradicate the disparity between how we are seen and what we feel? How do we present who we really are in terms of images? And why does it matter that we do? To answer this we need to understand the very fundamental way that the representation of people helps to determine who they become.⁷

Applied to gender and health issues, what is the relationship among the representation of women's bodies, lives, and health? Photovoice poses an alternative to positivist ways of knowing by listening to and learning from women's own portrayal of their lives. The third theme, political commitment, contrasts with the notion of disinterested scholarship or objectivity. Photovoice makes explicit the facilitators' and participants' focus on improving the life and health of the communities of which they are a part.⁸

KEY CONCEPTS IN PHOTOVOICE

In the United States, people living in shelters,⁹ urban lay health advisors,¹⁰ homeless and marginally housed young and older women,¹¹ and county health department leaders and constituents¹² are among those using photovoice to achieve diverse goals. This section discusses five key concepts that unite the ways in which these groups apply the photovoice technique.

Concept 1: Images teach

The visual image provides a site of learning that may profoundly influence people's health and well-being. As the pioneering community photographer Spence noted, "With their messages—both explicit and hidden—[images] help to shape our concepts of what is real and what is normal."⁵ Images contribute to how we see ourselves, how

we define and relate to the world, and what we perceive as significant or different. The lesson an image teaches does not reside in its physical structure but rather in how people interpret the image in question.¹³ Images can influence our definition of the situation regarding the social, cultural, and economic conditions that affect women's health. They can further contribute to how we see health status, differences, and outcomes.

Concept 2: Pictures can influence policy

Cohen's influential and formative research on the "agenda-setting function of the mass media" put forth the understanding that the media do not tell people what to think but help set the public agenda about what people talk about and pay attention to.¹⁴ Adapting the theoretical framework offered by Hall¹⁵ and Mukerji and Schudson¹⁶ for studying the production of culture, we can take a three-pronged approach to understanding the influence of images by analyzing: (1) the production of the images, (2) the reception of the images and the meanings attributed to them by audiences, and (3) the content of the images themselves. Images do not shape policy in a linear or flowchart fashion. Rather, this framework holds that the images that we see influence our focus and our world view. By contributing to how we look at the world and how we see ourselves, images can influence policymakers as well as the broader society of which they are a part.

Concept 3: Community people ought to participate in creating and defining the images that shape healthful public policy

Policies directed toward creating safe and enabling environments are crucial elements of women's health policy but are not necessarily based on what women need or want. Photovoice is a technique that involves providing people with cameras so that they can create the images that help shape healthful public policy. People merely creating images is not the key to photovoice, however. The process also requires that people define those images. Photovoice entails people's discussing the images that they have produced, and by doing so, they give meaning to, or interpret, their images. By women telling their and their communities' stories, we might better understand the context that women confer on their lives and health conditions.

Concept 4: The process requires that planners bring to the table from the outset policymakers and other influential people to serve as an audience for community people's perspectives

Pictures can influence policy, but how? The potential for using photovoice as a tool to influence policy resides in the exchanges among community people, health workers, and policymakers over the images of interest. These interactions occur not by happenstance but by health planners' targeting at the outset people who can be mobilized for change. Throughout the Yunnan Program, we observed it was the health policymakers—often far removed from the experience of the people they govern—who could and did learn from the women's photographs and stories. Rural women already knew what burdens filled their days. Health planners can convene at the outset an advisory board, governing team, or board of directors, which may include health leaders, funders, researchers, journalists, and policymakers to serve as significant participants in a dialogue with community people.

Concept 5: Photovoice emphasizes individual and community action

Practitioners in the social sciences and health professions have used photovoice alone or in combination with surveys, focus groups, nominal group process, and other methods, but an important characteristic of the photovoice approach unique among such methods is its emphasis on individual and community action. In line with the values that characterize PAR, photovoice integrates a citizen approach to documentary photography, the production of knowledge, and social action. As Sontag has noted, "Photographs furnish evidence."¹⁷ People may use photovoice as a tool to document and illustrate the scope of women's lives. The technique is grounded in the understanding that policies derived from the integration of local knowledge, skills, and resources within affected populations will more effectively contribute to healthful public policy.

PHOTOVOICE METHODS

Briefly, the photovoice method involves a series of procedures as follows.

Select and recruit a target audience of policymakers or community leaders

Who has the power to make decisions that can improve the situation? The target audience may include city council members and other politicians, journalists, physicians, administrators, researchers, and community leaders with the power to make and implement participants' recommendations. As an ad hoc advisory board to the project, their primary role is to serve as a group with the political will to put participants' ideas into practice. In photovoice projects from rural China to urban Detroit, we have created guidance groups of policymakers and sympathetic community leaders who serve as the influential audience for participants' images, stories, and recommendations.

Recruit a group of photovoice participants

To allow for practical ease and in-depth discussion, seven to ten people is an ideal group size. Recruited participants may reflect specific sampling criteria to maximize or minimize representatives along key demographic characteristics, such as age, gender, income, race/ethnicity, and health status. Another approach is to invite participants who wish to volunteer. For example, at a shelter in Ann Arbor, Michigan, we posted flyers, and anyone interested was welcome to participate.

Introduce the photovoice methodology to participants and facilitate a group discussion

The initial meeting is held to familiarize the group with underlying issues about the use of cameras, power, and ethics; potential risks to participants and how to minimize these risks; and the practice of giving photographs back to community members to express appreciation, respect, or camaraderie. The first workshop never begins with the distribution of cameras but with an introduction to the photovoice concept and method. It emphasizes the aim to influence policymakers and community leaders, discusses the responsibility and authority conferred on the photographer wielding the camera, suggests ways to minimize any potential risks, and presents an ethic of giving photographs back to community people to express thanks. It is vital that organizers be aware of their responsibility to participants' well-being, and they should facilitate

effective discussion with participants about minimizing any potential risks. Shared discussion questions should include

- What is an acceptable way to approach someone to take his or her picture?
- Should someone take pictures of other people without their knowledge?
- To whom might you wish to give photographs, and what might be the implications?
- When would you not want to have your picture taken?

Obtain informed consent

Some photovoice projects may pose minimal risk to participants taking pictures in areas that present little or no potential physical harm. Other photovoice projects may involve more risk. In addition, facilitators must consider how participants' vulnerability may be further modified by participants' social class, access to power, health concerns, and a host of other factors. Facilitators should explain the written informed consent, which ought to include a statement of project activities and significance, specific potential risks and benefits, the voluntary nature of participation, that people can withdraw at any time for any reason, and the understanding that no photographs identifying specific individuals will be released without separate written consent of the photographer and the identified individuals.

Pose an initial theme for taking pictures

Participants may wish to brainstorm about what themes they can focus on to enhance women's health and then come to a consensus about which theme they will envision for each roll of film. Given a specific theme, participants may brainstorm and discuss ways in which they might portray it.

Distribute cameras to participants and review how to use them

What kind of camera should be used? We have used three different kinds of cameras: autofocus, autorewind cameras; disposable cameras; and medium format Holga cameras. The choice of camera can be guided by facilitators' and participants' preferences and practical considerations. For example, if participants plan to take more than two or three rolls of film, disposable cameras may be least cost effective. If participants have a strong

interest in using a camera that allows for maximum creative expression, and facilitators are experienced with the medium format Holga, they may prefer this inexpensive camera that permits multiple exposures so that people can literally layer the meaning of their images.

Facilitators may wish to minimize technical advice during the initial workshops to avoid inhibiting people's creativity. At the first workshop, they might advise photographers simply to keep their fingers out of the camera's eye, to place the sun at their back as often as possible, and to avoid putting the subject or center of interest in the middle of each photograph.

Provide time for participants to take pictures

Participants might agree to turn in their film to a facilitator for developing one week after the initial workshop and to gather again to discuss their photographs one week thereafter.

Meet to discuss photographs

The next three stages—selecting photographs, contextualizing or storytelling, and codifying issues, themes, or theories—occur during group discussion. First, each participant may be asked to select and talk about one or two photographs she feels are most significant or that she likes best. Second, participants may frame stories about—and take a critical stance on—their photographs in terms of questions spelling the acronym SHOWeD:

- What do you **S**ee here?
- What is really **H**appening here?
- How does this relate to **O**ur lives?
- W**hy does this situation, concern, or strength exist?
- What can we **D**o about it?

Third, participants may codify the issues, themes, or theories that arise from their photographs. They may particularly focus on issues because photovoice is well suited to action-oriented analysis that creates practical guidelines.

These stages should be carried out for each roll of film taken by participants.

Plan with participants a format to share photographs and stories with policymakers or community leaders

Facilitators and participants may plan a format, such as a slide show, to amplify participants' pho-

tographs, stories, and recommendations to policymakers and community leaders. For example, in a project involving women and men living at a shelter, we organized a slide show held at the city's largest theater, where participants spoke to the audience of policymakers, journalists, researchers, and graduate students after having shared their photographs and stories.

This outline provides a brief methodologic overview. Those interested in using photovoice may turn to other articles for more exhaustive information on concept and theoretical background^{1,2,18,19} and use of the methodology for participatory needs assessment¹ and participatory evaluation,²⁰ and to www.photovoice.com.

USES FOR WOMEN'S HEALTH: PARTICIPATION, ACTION, AND RESEARCH

Beyond biomedical factors, the status of women and gendered power relations profoundly influence women's health.^{21,22} Literature reviews, surveys, and statistical studies provide valuable ways of knowing, but these passive methods of data analysis fail to bring to life the depth and breadth of women's lives and burdens. Israel et al.²³ have defined key characteristics of PAR: (1) a process that involves community people in all aspects of the research, (2) a co-learning process in which researchers and community people contribute to and learn from one another's expertise, (3) a reflective process that involves education for critical consciousness, (4) an enabling process, and (5) a process that balances the goals of research, action, and evaluation. This section focuses on the core components of participation, action, and research to analyze the contributions of photovoice as an effective PAR strategy for women's health.

Participation

Photovoice can be used to achieve specific participatory objectives in women's health research, including needs assessment, asset mapping, and evaluation.

Participatory needs assessment. Photovoice values the knowledge put forth by women as a vital source of expertise while addressing the descriptive mandate of needs assessment through

an exceptionally powerful means—the visual image.¹ One Yunnan farmer photographed her child's classroom. She wrote, "This is our village's scene of primary school students in class. The desks and benches are very simple and the lighting is quite dim. The children hope that they will have larger and brighter classrooms." Another farmer photographed a mother with her two children in the field during harvest season. She said, "Planting in this local area yields a good income. With no one to help with day care, this woman's only recourse is to bring her children to the field." A third farmer described her photograph as follows: "This woman is spraying pesticides on the saplings in the tobacco field. Where we live, women are expert at planting and roasting tobacco. From installing fertilizer pouches to raising seedlings, spreading manure, picking leaves, and curing tobacco, all are done by women. The intensity of their labor is great." Her photograph enabled women to discuss a myriad of health concerns, as the photograph clearly showed that the woman held the pesticide sprayer in her bare hands, that she lacked protective clothing and a face mask, and that the heavy spray container was hoisted on her back with shoulder straps that might increase the likelihood of poor circulation or pinched nerves.

Participatory asset mapping. A significant contribution by McKnight²⁴ and Kretzmann²⁵ to public health research is the concept of asset mapping. Household surveys and other conventional data-gathering methods in which people are counted, interviewed, and questioned may inadvertently reinforce a sense of impotence, inferiority, and alienation. McKnight²⁴ notes that the range of community experience includes capacities, collective efforts, informality, stories, celebration, and tragedy. As a participatory asset-mapping tool, women may use photovoice to document their resources and strengths. Photovoice vividly enables participants to elicit stories about the community's capabilities. Women might focus on documenting and discussing open-ended, structured themes to elicit stories about their and the community's capabilities. One Yunnan farmer photographed a woman slicing open five lush and juicy pumpkins. She wrote, "In rural villages, all food and vegetables are self-supplied. At the farmer's dinner table, all the food is home grown. This woman is preparing today's meal, cutting a pumpkin planted by her own family." Asset-mapping themes can include

Who are people in your life you give to?
 How do you give to them?
 What do you like to do that people would pay
 you to do?
 Have you ever made anything?
 What are your dreams?²⁵

A basic concept in participatory asset mapping is to not pathologize individuals and their communities as embodying deficiency and abnormality but to strengthen the individual's and the community's capacity to take action. Women may use photovoice as a tool to take inventory of their individual and collective strengths and gifts in order to identify and discuss strategies for change.¹

Participatory evaluation. Photovoice enables participants to document the successes and failures of program activities and interventions. It can vivify people's views of process and impact. It may involve women who seldom have access to those who govern their lives, whether they be young, old, workers, immigrants, speakers of other languages, members of stigmatized social groups, or grassroots community members. As one Yunnan photovoice coordinator observed, the advantages of using the method lie in "quickly exposing the problems existing in implementation of projects and helping the decision makers to avoid making the same mistakes again in their future project plan." Women can use photovoice to vivify their feedback about policies under consideration or services offered, to involve their own wider networks in assessing collectively policy and program strengths and weaknesses, and to furnish evidence and to put forth their view of how policies and programs have or have not benefited them.^{2,20}

Action

Using photovoice as a tool for action reflects PAR's commitment to meaningful social change. The purpose of root-cause questioning using the acronym SHOWeD, described earlier, is to identify the problem or the asset, critically discuss the roots of the situation, and develop strategies for improving the situation.

The commitment to action also may be thought of in terms of how photovoice may provide opportunities for women to enhance the emotional, instrumental, and informational social support²⁶ in their communities. For example, women may use photovoice to provide emotional support by

learning and taking photographs of what people in their community most cherish, such as their children. Women may enhance instrumental support by giving photographs back to friends and community members to express their appreciation and pass along something of value made by themselves. They also may provide informational support by building ties and offering advice and resources during the photovoice process. In a Detroit photovoice project involving lay health advisors,¹⁰ participants discussed how they might approach their neighbors by saying, "I thought you might like this picture of your little girl. How was her last well-baby checkup at the clinic? Were you able to find a way to get there?"

Research

As the eminent psychologist Abigail Stewart notes, a fundamental strategy for studying women's lives is to "look for what's been left out." What health concerns have been overlooked, unconceptualized, or ignored, yet may be central to women's experience?²⁷ Again, a comprehensive approach to women's health research involves "an attitudinal change on the part of policy makers, funders, and researchers to allow for a broader definition of women's health, which incorporates the full length of our lives, the full range of our activities, and all the discomforts and illnesses we face."²⁸ This definition may be expanded to incorporate the societal factors that exert an influence on women's health. Photovoice may help contribute to such attitudinal change by enabling women themselves to convey the breadth and depth of their health concerns. For example, how, when, and under what conditions do discrepancies between women's and men's health status reflect the social inequality between them?²⁹ How do women experience the quality of their reproductive healthcare? Power relationships in their daily lives? The range and intensity of women's work? The physical cost of the menstrual cycle? Their housing conditions and the effects of environmental stressors on themselves and their families? The effects of widespread alcohol and tobacco availability in their communities? Their role as caregivers for children, grandparents, and grandchildren? The relationship among their sexual orientation, ethnicity, age, nationality, and disability and their health status? Body image and weight control efforts? Growing

old? Loss? How do uninsured women cope with their own and their families' health concerns? Research that ignores the network of relationships and roles that women manage obscures an enhanced understanding of their lives. Photovoice provides an effective tool through which participants may narrate their perceptions and experiences.

Researchers and participants may tailor photovoice to specific participatory objectives, but any application of photovoice should be characterized by participatory analysis using the three-stage process¹ of (1) selecting, (2) contextualizing, and (3) codifying, described previously.

What are research implications of using photovoice with women who may belong to the most vulnerable social groups? A comprehensive answer to this question is beyond the scope of this article. However, one premise of photovoice is that everyone has the right to portray his or her life in a creative way regardless of age or station in life. Photovoice may provide one means to do so. Photovoice was initially conducted in Yunnan, one of China's poorest provinces, among rural women farmers who previously had little or no access to cameras. Taking photographs was a luxury few could afford. In Yunnan, the rural women's photovoice effort countered the popular assumption that they lacked the intelligence to use cameras in a meaningful way. In the United States, that homeless women and men have found the photovoice process to be a useful tool suggests that it may be a relatively inexpensive way to enable people to reflect on their lives and communities and effectively communicate their perceptions and insights to others.³⁰

SUMMARY AND FUTURE DIRECTIONS

Successful application of photovoice to exert positive change on women's status in society requires an understanding that images teach and may bring to fruition healthful public policy. The technique is rooted in the belief that people ought to participate in creating and defining those very images that shape the public discourse. This community-oriented process requires that planners bring policymakers and other influential people to the table to serve as the audience for community people's perspectives. In doing so, photovoice emphasizes individual and community action.

Photovoice's potential to better the lives of women in areas as diverse and important as education, child care, violence prevention, reproductive health, access to quality care, and work parity remains largely untapped. These key public policy issues transcend class, ethnic, and cultural boundaries. In *What Can a Woman Do with a Camera?* Spence and Solomon note the need "to make visible our everyday life: surroundings, work, politics, interests, and institutional contexts."³¹ Photovoice is an ideal participatory technique through which participants can document, critically analyze, and improve these contexts that affect women's health. Selected photovoice themes determine the research and policy directions a community may take in a cooperative spirit with policymakers and others whose influence and decisions govern women's life chances.

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