The Use of Photovoice as a Method of Facilitating Deliberation

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Efforts have been made in one rural Appalachian county to broaden local participation in a community health assessment. Through a series of community forums and a photovoice project, residents named community health needs and assets, framed potential solutions, and selected possible action steps to improve the local health status. Photographs and narratives from the photovoice project supplemented information from preliminary health forums to devise a framework of possible solutions to the identified health problems. Analysis of forum transcripts suggests that participants who used an issue guide that used photovoice images and stories were able to transition from broad approaches of change to specific action steps more than participants in other forums who used a more traditional forum issue guide. Community members are more easily able to identify solutions to local health issues when forum discussions are informed by local images and narratives.

Keywords: community health assessment; participatory action research; photovoice; deliberation; citizen engagement

Rural populations in Kentucky and bordering Appalachian regions suffer from some of the highest chronic disease rates in the country (Centers for Disease Control and Prevention [CDC], 2004). Lifestyle choices are an inherent part of this problem; lack of physical activity, poor diet habits, and unhealthy behaviors continue to affect the health and well-being of Kentucky residents both young and old (CDC, 2003, 2006). As discussed in this article, expertise in diagnosing the problem is not enough to catalyze lifestyle changes. For lifestyle changes to occur in these areas, citizens need to play an active role in defining their own health problems and discovering their own solutions.

Principles such as community participation, citizen engagement, and community empowerment have evolved as approaches that might more appropriately address community health issues and disparities (Minkler & Wallenstein, 2005). For example, community-based participatory research and participatory action research are evolving methods of including local citizens in identifying and addressing social problems, including public health issues (Couto, 2001; Israel, Eng, Schult, & Parker, 2005; Minkler, 2000). The goal of community-based participatory research is to strengthen a community’s problem solving capacity through collective engagement in the research process (Agency for Healthcare Research and Quality, 2004). However, ensuring that all the necessary voices are present in the community conversations about improving health remains a persistent difficulty (Eng et al., 2005).

As Paronen and Oja (1998, p. S25) suggested, the community is not a passive arena but the main “engine” in health promotion actions. Despite the evolution of citizen participation in health care during the last 50 years, articulation of how it forms and functions in communities remains ambiguous. The importance of citizen participation in health promotion is well established but is not widely practiced (Green, 1999). Researchers in Appalachia have concluded that participatory action research can provide an appropriate “platform from which the voices of local people can be heard, unfiltered by a set of predetermined research questions designed to elicit specific types

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Photovoice is an innovative participatory action research approach that provides local citizens with cameras so that they can photograph their everyday lives to generate and encourage knowledge about personal and community issues (Killion & Wang, 2000). Photovoice as a method challenges local citizens to identify, represent, and enhance their community through photographic techniques. This method has been successfully applied among vulnerable populations in rural villages in China and in American urban centers (Wang, Cash, & Powers, 2000; Wang & Redwood-Jones, 2001; Wang et al., 2003). In America, African American women and inner-city youth have been empowered to redefine their reality and encouraged to facilitate social change through the photovoice methodology (Strack, Magill, & McDonagh, 2004). Goodhart et al. (2006) described how photovoice was used among college students to influence university policies on campus safety, sexual health, alcohol and drugs use, and campus parking. Other photovoice research suggests that it is an important facilitator of dialogue and is eye-opening to policy makers (Foster-Fishman, Nowell, Deacon, Nievar, & McCann, 2004).

THE IMPORTANCE OF LOCAL DELIBERATION

Citizen engagement is even more important for improving health today because of the complex causes of many health issues that are rooted in community and family factors. Health problems that result from individual behaviors and community-level factors are too complex to simply leave in the hands of professionals. The current understanding of determinants of disease requires a new understanding of the contributions of community, family, economic, and environmental system components to health and disease (Institute of Medicine, 2002).

Too often in public health, ordinary citizens are left out of problem identification and decision making to solve the problems at hand (Heller, Heller, & Pattison, 2003a, 2003b). Even when researchers engage the public, problems are not always presented in local terms that consider the local culture, and certainly not through local images of the problem (Kelly, 2005; Rudd & Cummings, 1994).

Deliberation—the opportunity and ability to reason through approaches to change—is a critical component of community health assessments and a primary method of engaging the public in a democratic manner. Ryfe (2005) posited that deliberative democracy depends on more than public consultation. Rather, deliberative democracies adhere to the notion that ordinary people ought to not only be consulted but also have a significant role in the decisions being made that affect them and their community.

Yankelovich (1991) provided a strong philosophic and empirical basis for the use of public democratic practices in dealing with difficult community problems. He recognized that there are two types of wisdom that are useful in addressing community issues. One is the “scientific and empiric” wisdom reflected in expert judgment. The other is citizen opinion that has gone through the process of consideration and reflection until there is relative stability in an individual’s beliefs and opinions. Yankelovich termed this type of knowledge “public judgment,” a way of knowing that is as important as expert knowledge for addressing complex problems.

Public problems, including public health problems, must be named and solutions framed in the language of ordinary citizens before deliberative dialogue can begin (Mathews & McAfee, 2002). The deliberative process has a number of steps, as described next, including naming the problem, framing the issue, deliberating about possible solutions, and determining which solution to the problem is best.

Naming the problem is the first step in the process. Local citizens should take the primary role in identifying the root problems that need to be addressed for improving the health of their community. This initial involvement promotes ownership of local problems and solutions. Many public health agencies overlook the potential of democratic principles and thus neglect the power of the public in public health processes. Professionals alone should not make decisions among conflicting choices. Rather, local residents should play an essential role in strengthening public health efforts that effectively address health problems.

Framing or identifying solutions to the problem is the next step. In this step, a variety of potential approaches to solving the named issue are outlined as options for the community to take. Multiple approaches should be designed to bring to the foreground the values that must
be weighed in coming to address the problem as a community. An appropriately framed issue is the gateway to the community thinking together and making tradeoffs inherent in grappling with a public problem.

Next, communities must deliberate about potential solutions. In this phase, citizens weigh the various strategies for addressing community problems against the things that they value most. Typically this work takes place in community forums. Forums, historically known as town hall meetings or community gatherings, are increasingly important as a venue to bring citizens together to make choices about solving community dilemmas. At forums, citizens are given the opportunity to think through tough choices and weigh trade-offs (Scutchfield, Ireson, & Hall, 2004).

Once a community begins deliberating about the named and framed issues, they can move to working together to solve the defined problems. In this final step, actions are taken to improve the well-being of the community.

▶ RESEARCH STATEMENT

The primary goal of the project was for rural citizens in one Appalachian county to define and reflect on the strengths and weaknesses of their community’s health. One objective of this research was to explore the potential use of photovoice to enhance public deliberation about community health problems. Of specific interest was whether and how local images, captured by local citizens, informed the deliberative process.

This project explored the process of moving community members toward deliberative dialogue using photography as a means of spurring critical discussion. The methods employed here used visual images as a way to draw out common themes about the community and health, foster dialogue, and spur action for change. Visual images might be a more concrete representation of reality that can foster a different kind of community discussion than the typical forum format. This project sought to launch research from within a communal reality, gathering local input to promote a social transformation through critical dialogue that could eliminate powerlessness and exploitation.

▶ METHOD

Study Design

This was an exploratory study comparing the use of a traditional issue book to stimulate dialogue about community health needs and action strategies with the use of forum booklets informed from the photovoice project. Youth, a group typically left out of community health assessments, were recruited from the local high school to participate in the photovoice project. Eighteen students in a food management course at the local high school participated in the photovoice project.

Data Collection Procedures

Participants were instructed about the purpose of photovoice and the basic philosophy behind the assessment tool. They were then provided with cameras to perform a visual assessment of public health problems in their community. A series of workshops were held to discuss cameras, ethics and power, the photovoice method, and the overall project goals. A local photographer joined the students to demonstrate how to use the cameras, how to load and unload film, and photographic techniques. At the end of the workshops, volunteers were given a Holga 120-millimeter camera (estimated price of $25) and five rolls of film to use during the research project. Participants were asked to answer the following questions through the lens of a camera and their narrative voice: How would you define your community? What are things in your community that you like? What would make your community a healthier place? These seemingly simple questions can document the context of their community, explore assets and barriers, and begin identifying possible solutions (Adams, 2000).

After the film was collected and pictures were developed, photovoice participants gathered to discuss the pictures in a photograph “party.” In this session, participants were able to look at each others’ pictures, discuss the content, and select the most critical pictures. Photographs were returned to the students so that they could write a narrative about pictures of their community and choose the five pictures that best represented the community. Each student selected pictures that they would like to have shown at community health forums.

An Innovative Approach to Community Discussions

This project used forums as its primary method of data collection. Forums have become an important method of conducting public health research, performing community health assessments, and planning local interventions. Often, an issue booklet is used in a forum to help present facts about the issue, guide participants through a discussion about the issue, and outline possible options for solving the issue (National Issues Forum Institute, 2004). Two different layouts of forum booklets were used in this project to investigate whether and how local images and narratives affected forum discussions. First, a more traditional issue guide or booklet was used to present approaches for change in a text only format. Next, an issue guide informed
by the photovoice project was used in community discussions.

Prior to the photovoice project, a quantitative health assessment was conducted. Findings from the quantitative health assessment were presented at a series of preliminary forums where residents had the opportunity to talk through the leading health problems and brainstorm about steps for addressing the identified health problems. Themes that emerged from this initial round of forums (before the photovoice project; Hall & Ireson, 2005) and photographs with narratives from the students’ photovoice project were used to develop a framework of possible solutions to local health problems. Insights for improving the local health status that emerged from the preliminary forums and photovoice project clustered into three approaches: accentuate the positive, encourage healthy behaviors, and put economics first.

This framework of possible solutions was presented in a booklet distributed at the four forums held over a 10-month period in Morgan County, Kentucky. As previously stated, participants of two community forums used the traditional approach to forum discussions (as described previously) and participants at two other forums used a booklet that presented the same approaches to change with the inclusion of pictures and narratives from the photovoice project. It is important to reiterate that both booklets conveyed the same approaches to change, yet the way that the information was presented varied (text only vs. pictures and narratives from local residents; see Figure 1).

More than 75 participants joined forums held at a local diner, the community center, the high school, and a church. Forums were approximately 1 hr 30 min, allowing participants to walk through each of the approaches, weigh the trade-offs between each approach, and decide what actions they would like the community to take for improving health.

Data Analysis and Interpretation

Discussions from the four forums, photographs, and narratives were recorded and documented. To investigate whether and how the photovoice issue guide changed forum conversations, discussion at the two types of forums using the two distinct booklets were assessed using four predetermined criteria. This includes analysis on whether participants in the forums that used photovoice (a) could articulate a greater personal connection

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**FIGURE 1** Example of the Two-Issue Booklet. A Traditional Booklet (Left) in Comparison to the Issue Guide With Photovoice Pictures and Narratives
to the three approaches presented in the booklet, (b) were able to take a stand on which of the three approaches should be taken to improve the community, (c) could identify precise actions (not broad suggestions) that the community could take to enhance the health of local residents, and (d) could perceive a role that they could personally play in making the actions happen.

Following the grounded theory or constant comparative methodology, the first stage of the analysis involved coding as many categories as possible from forum transcripts and photovoice narratives (Strauss & Corbin, 1990). First, open coding, or the unrestricting coding of data, was employed by reading each transcript line by line. Next, the codes were reshaped into categories that represent a deeper meaning and interrelationship between codes (i.e., larger themes from the data). The final stage of analysis involved identifying properties of the categories and constructs. This analysis was carried out with the Qualitative Solutions and Research Non-numerical Unstructured Data Indexing Searching and Theorizing software program to facilitate data management and to enhance the systematic organization and examination of the data.

FINDINGS

Students took an array of pictures that provided a broad illustration of the community, ranging from the physical layout of the community and the economic base of farming to the natural assets of the area to specific health concerns. Through the visual assessments, discussions, and narratives about the photographs, these students offered great insight into the community atmosphere. Four broad categories emerged from their photographs and discussions. These included community life, public health problems, community needs, and local assets. Most of the pictures taken by students captured many of the themes that surfaced from community discussions with the adults in Morgan County. However, they also brought out new themes that provided a more youth-centered assessment of the community. Although many of the photos did not necessarily convey new information, they did provide vital images that reflect concepts identified in preliminary health forums.

Integrating Photovoice Into Community Health Forums

As previously stated, the purpose of the photovoice booklet was to investigate whether an innovative format that captures the three approaches for action through local pictures and stories could provide participants with a clearly defined place to begin discussions about community action. Providing visual images as a way to begin talking about action enhanced the facilitation and enriched the dialogue. In the forums that used a more traditional issue guide, most of the time was spent discussing possible action steps rather than using forum time to catch participants up on what had already been discussed in previous forums. The issue booklet with pictures and narratives was a suitable method to help forum participants get on the “same page” to begin discussions about action. The photovoice booklet provided participants with visual cues so that they could see and understand the framework of solutions in locally relevant images and language.

Participants often connected their personal stories and experiences with the pictures and the approaches in the booklet. In this regard, the pictures and the messages that they conveyed elicited more discussion on the potential approaches, not only redefinition of the problem. Participants often mentioned specific pictures as they worked through the content or information, such as unhealthy behaviors and stagnant economic conditions. In one forum, when a participant turned to the picture of the fruit in the local grocery store, it sparked a discussion about the high cost yet poor quality of fruit at the three markets in the county (see Figure 2).

In the same forum, another high school student talked about the picture of a grease pit behind the school. The visual prompt resulted in a lengthy discussion on the quality of food in the local high school and sparked ideas about how to improve school lunches. Similarly, another student commented on the picture of the local walking trail. A discussion began on how to improve the walking trail to encourage more people to take advantage of that particular asset (see Figure 3).

The pictures were a helpful way for participants to easily work through the information on assets and needs. However, the facilitator should make sure that the participants do not fixate on any one picture too long and get hung up on that specific issue. Rather, the purpose is to assess the whole situation and make broad suggestions for change, not focus solely on one issue. The facilitator (as in any forum) must mindfully guide the conversation from reworking what has already been stated to identifying action steps that the community could take.

The second and third criteria of comparing forum discussion—selecting which approach should be taken and identifying action steps—seemed to merge into one dialogue component during the final phase of the forums. Although the participants very rarely stated whether to go with only Approach 1, 2, or 3, they were able to identify precise action steps that the community could take. By identifying these concrete actions, they were indirectly selecting an approach or a conglomeration of approaches.
Most of the ideas for action did not fit into just one of the three approaches but were generally a mixture of the approaches, because the three approaches were not mutually exclusive. For example, students agreed with one participant who said, “People get involved in a lot of negative activities just because there is nothing else to do. Drugs and drinking becomes all that they care about. If there was something else here, maybe they would start to care about that.” Participants recognized that providing activities for teenagers would require a mixture of the approaches. The community would probably have to draw upon Approach 1, using community assets, and Approach 2, encouraging healthy behaviors.

At the final forum with the pastoral committee, participants made the connection between personal responsibilities and ownership of the necessary actions needed to foster community changes. At this forum, participants actually started naming what they could do as individuals and as a group of pastors to improve the health and social conditions of Morgan County youth. This was the first time in the forums that local participants asked “What can I personally do to make the community better? What actions should I take to improve the well-being of youth?” Channeling a range of pastors’ efforts (different denominations, different locations) would be one venue of giving youth what they were requesting and improve Morgan County. Churches could certainly be an important venue of reaching residents outside of the county seat, where most activities are centered (see Figure 4). Pastors at this forum represented congregations from all of the magistrate districts in Morgan County. In addition to these efforts, however, there would certainly need to be other venues outside of the religious sector for youth.

Although there were differing ideas, opinions, and suggestions for how to make Morgan County residents healthier, there was consensus among participants that the health status of children must improve if Morgan County and its residents are to thrive in the future. Most participants agreed with a local policeman who stated, “I think for there to ever be true change in the community we have to start with the young kids. We have to start this [health] education when they are young. If it is the only thing that they know, then they are more likely to make use of the information.” Ideas for action included more structured activities for youth in the community, healthier school lunches, more family-oriented activities, restructuring physical education,
continually advertising what is already available in the community, using the potential of faith-based organizations, and starting a community beautification project so that industries might relocate to the community.

**DISCUSSION**

These findings suggest that residents are able to listen to one another and critically assess what is happening in their community as well as to brainstorm about possible solutions. These are important findings in an era of public health assessments that typically omit the voices of the community (Williams & Yanoshik, 2001). Citizen stories are rarely included in research studies but are necessary to comprehensively assess public health problems and are vital to facilitate long-lasting changes (Hancock & Minkler, 1997). A community health assessment that lacks the voice of residents is missing in-depth interrogation into why health problems persist and what possible steps the community is willing to take.

Previous research has documented that the photovoice process is a valuable participatory method that can be used in tandem with preliminary community discussions to name local health issues and frame potential solutions (McAllister, Wilson, Geen, & Baldwin, 2005; Wang & Burris, 1994). Photos, narratives, and participant discussions are additional layers of community information that identify community needs and possible solutions from a local perspective. Research from this study advances previous work by suggesting that deliberative environments, such as forums or community discussions, can be enhanced by presenting visual prompts of local areas taken by community members. It can be argued that collecting local images is an innovative method of empowering a community to name their own concerns, needs, and assets as well as to create a place to...
discuss solutions. Pictures and narratives from photovoice projects can be a springboard for fostering dialogue in a community about local needs and assets.

Based on the four predetermined criteria for analyzing forum conversations, photovoice images and narratives provide a visual and content point of reference to spark community dialogue about action. In this study, deliberative forums elicited ideas for improving community health by addressing childhood and youth health behaviors, an area where participants agreed and even voiced a willingness to make personal sacrifices to see necessary changes occur.

**CONCLUSIONS**

As the literature demonstrates, there is a strong relationship between public decision making on questions of community health and the positive impact of public health initiatives and reforms. Answers to some of public health’s hardest questions can be found outside of the expertise of public health professionals and traditional public health techniques. Techniques common to the deliberative process, such as naming problems, framing solutions, deliberating, and acting, can help address the expert–public imbalance.

Thoughtful, considered judgment of the public is a method to reengaging nonprofessionals in discourse about actions for improvement. More efforts are needed to restore the public’s potential to address needs through local-appropriate and community-supported courses of action. This statement does not suggest that professionals should abdicate their knowledge and skills. Rather, it suggests that the power and authority of the public should be encouraged and strengthened to join in the decision-making process. Approaches that encourage a symbiotic relationship between the two types of knowledge—professional and public—should be found and tested as a method to address complex public health problems.

New knowledge obtained in this research provides information for public health researchers interested in innovative approaches to community-based participatory research. Researchers outside of public health can benefit from research findings presented here because similar methods may be applicable to their disciplines. Methods used to encourage deliberation around public health issues can also be used in other fields of social research. The photovoice technique as a qualitative method used here is replicable to dig deeper into an assortment of social issues.

**REFERENCES**


