

Visions of Health: The GirlPower Photovoice Project

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Abstract

The perceptions of 12 middle school girls regarding the health promoting and inhibiting aspects of their community were explored using the innovative methodology known as Photovoice that was situated in a youth-participatory-action research (YPAR) methodology. The photographs and resulting focus group discussions revealed overarching themes of Community Health and Safety, Food, Relationships, Socioeconomic Status (SES), Moral Development, and Physical Activity. The themes offer a way to organize the multiple realities of adolescent girls and how they interpret their personal health and the health of their communities, while the outcomes associated with participating in the project provide evidence of gains in self-esteem, collective efficacy, and leadership and advocacy skills.

Keywords: Youth participatory action research; Photovoice, adolescence; girls; health

While many social workers and counselors within education, direct service provision, and child welfare have been driven by a desire to provide the most relevant and impactful services for youth in an effort to support healthy transition to adulthood, community social workers have often emphasized the importance of fostering inclusion, empowerment, leadership, and social action among young people (Checkoway, 2009; Delgado, 2015). As such, youth participation encompasses many different areas of literature that promotes the empowerment and action of young people as organizers, leaders, activists, and researchers in their communities.

Youth Participation

The literature defines youth participation as a shift in perspective from viewing young people as subjects, problems, and children to be mentored and taught by adults to being active participants and leaders in community and society (Checkoway & Richards-Schuster, 2004). Youth participation promotes the concept of 'adult allies' who recognize the importance of youth created and led spaces and provide mentorship to young people seeking to bring about social change in their schools, communities, and contexts (Checkoway, 2009). Youth participation is directly rooted in empowerment and liberation theories that emphasize individual self-esteem, collective efficacy, consciousness raising, and social action to reform and improve upon existing systems (Delgado, 2015). Although many approaches to youth participation exist, several have demonstrated consistent positive outcomes for young people and communities.

For example, Checkoway (2009) and Ginwright, Cammarota, and Noguera (2005), identified empowerment gains and positive outcomes related to youth facilitation of intergroup dialogues in a diverse urban context. Additionally, Anyon, Bender, Kennedy, & Dechants (2018) in a systematic review of the literature, identified the outcomes of increased leadership and agency to be the most common outcomes of youth led actions. Other scholars have emphasized the role of the arts in youth participation initiatives as a mechanism to convey youth identified needs and youth directed actions related to health and wellness (Madrigal, Salvatore, Casillas, Vera, Eskenazi, and Minkler, 2014). Youth participation is thus an excellent approach and intervention for practitioners wanting to involve young people in community change.

Youth Participatory Action Research

Youth participatory action research (YPAR) brings together action research and youth participation for the purpose of involving young people in the development of knowledge and in the reform of societal systems, institutions, and communities. YPAR is situated in an action research paradigm, which was pioneered by Lewin (1946) to emphasize research, community action, collective efficacy, and praxis (critical reflection on practice). YPAR involves young people in institutional and community-based research projects that they then help to shape, implement, and disseminate to stakeholders, community members, and decision makers (Checkoway & Richards-Schuster, 2004). The use of arts-based methods in YPAR provide young people with accessible tools for advocacy and change, thus Photovoice is often utilized in YPAR interventions.

YPAR and the Empowerment of Adolescent Women

While YPAR and Photovoice are particularly useful mechanisms for involving a variety of young people facing marginalization in society, it may be especially useful as an empowering tool for teen girls. Teen girls often face challenges to inclusion and empowerment due to the promotion of socialized gender norms in schools, families, and communities, and adolescent Women of Color face deep rooted intersectional challenges with relation to institutional racism, misogyny, and other forms of oppression (Gutiérrez and Lewis, 1994).

Teen girls are thus a population that remains underserved on both a national and statewide level. This turbulent time in life can have a strong impact on the health and well-being of girls. Findings from several studies have indicated that girls' self-esteem drops dramatically during adolescence (Baldwin & Hoffman, 2002; Kling, Hyde, Showers, & Buswell, 1999). Declines in self-esteem among teen girls have also been demonstrated to coincide with decreased levels of ambition in terms of academic achievement and career choice (Correll,

2001). Poor self-perception and body image are also largely correlated with girls' declining self-esteem (Clay et al., 2005). Race and ethnicity as well as socio-cultural factors such as unrealistic portrayals of female beauty in the media have also been linked to body dissatisfaction and eating disorders among teen girls (Clay et al., 2005).

Women and Girls in Oklahoma

Women and girls in Oklahoma face many challenges. In 2017, Oklahoma was ranked 43rd out of the 50 states on a general health index, (United Health Foundation, 2017). Likewise, Oklahoma's rate of food insecurity is higher than the national rate with one in four children struggling with hunger (Regional Food Bank, 2018). Oklahoma also has the 11th highest obesity rate for ages 10-17 (CDC, 2018).

In addition to food insecurity and obesity, women and girls in Oklahoma experience numerous other barriers to health and well-being. For instance, Oklahoma has the highest number of women incarcerated per capita in the United States, a statistic associated with many unfavorable outcomes for children of this population (State of Oklahoma Department of Corrections, 2016). To make matters worse, Oklahoma was ranked second nationally for teen birth rates in 2018 (Associated Press, 2018), and in 2018, the state ranked 48th for the number of women in politics (Center for Women in Politics, 2018). Finally, the rate of forcible and attempted rape against women in Oklahoma was also 38% higher than the national average (OSDH, 2018).

Current Study

The purpose of this study was to learn more about the perceptions of teen girls regarding the health promoting and inhibiting aspects of their communities while also empowering them to share their voice with local community leaders. It is intended that these data can inform programming aimed at Oklahoma girls in order to bolster their health and well-being in the face of adversity and challenges.

Photovoice Methodology

Photovoice is a powerful participatory method that can effectively capture the perspectives of groups traditionally underrepresented by research (Wang & Burris, 1997; Wang, 1999). Individuals use photography to visually document the realities of their lives, promote critical dialogue amongst participants about community issues, and reach policymakers and the larger community through the use of photographic exhibitions (1999).

Participating in a Photovoice project can be especially empowering for participants (Foster-Fishman et al., 2005). This method illuminates previously overlooked areas of inquiry and explores the significance of context to participants' experiences (a potential that is heightened by the use of photography; Camic, Rhodes, & Yardley, 2003; Suzuki, Prendes-Lintel, Wertlieb, & Stallings, 1999). Photovoice contributes to the goals of YPAR and youth participation. Finally, the exhibits of participants' photography may be a catalyst for social action. As such, these exhibits bring key social issues to the attention of policy makers and other important stakeholders.

Photovoice and Teen Girls

One of Photovoice's unique strengths is its ability to amplify the voices of traditionally disenfranchised groups. As such, it has been successfully implemented with many different groups including teen girls both within the United States and internationally. For instance, Washington State University used Photovoice to explore the realities of housing conditions for migrant workers in their community by placing cameras in the hands of mostly high school age, female "health promoters" who volunteered at a local clinic. These girls reached out to families served by the clinic to document their experience and to help influence public sentiment and policy-making (Postma & Peterson, 2010). Photovoice is thus well-suited to use with teen girls and was the ideal method of choice for this investigation.

Overview of GirlPower

The GirlPower Photovoice project utilized Photovoice methodology to elucidate the ways in which teen girls' health can be strengthened in spite of the significant health disparities and negative social and health outcomes that women and girls of low-socioeconomic status traditionally face. This innovative participatory methodology allowed for a participant-led exploration of teen girls' perceptions of their own physical, social, and emotional health as well as the health promoting and inhibiting elements of their communities and schools. The participants and *Visions of Health* team developed an exhibit showcasing the participants' photography and select findings following the completion of focus groups. Two separate events were held to share the exhibit with the local community, one at the state university where the researchers work and another at a local art cooperative. The university exhibit drew about fifty guests from the campus, local school district, city leaders, partner agency, and community members. The exhibit was featured in the city paper both before and after the event. A few of the participants chose to speak at the university exhibit, and all participants were honored with a reception, awards, and a speech by the City's Mayor. After the exhibit, the girls completed process papers to explore the impact of the Photovoice experience on their confidence, relationships, and well-being.

Sample

A total of 12 middle school girls residing in a moderate sized city in central Oklahoma were recruited to participate in the GirlPower Photovoice project. The participants were in seventh or eighth grade and ranged in age from 12-14 years old. They were recruited from an after-school program for girls sponsored by a local child abuse and neglect treatment and prevention agency. The participants were all enrolled in the same middle school. Three of the participants were African American, two were Hispanic, and seven were Caucasian.

Data Collection

The research team worked closely with agency staff on data collection procedures. Data collection methods were developed in a way that protected the girls and the integrity and purpose of the agency while serving the purpose of the research study (authors, 2015). The project had Human Subjects IRB approval from the researcher's university. It was decided that all focus groups would be facilitated by members of the research team (one faculty member and one graduate student), however, a member of the agency would be present for the girls' comfort and to ensure agency oversight. All members of the research team who were to engage in data collection received training in conducting focus groups with youth. Following this process, girls were recruited to participate in the investigation.

First, researchers and agency staff described the study design and explained the Human Subjects Committee to participants and families during an after-school dinner hosted by the project. Participants in the agency's after school program were invited to attend with their parents. Both parental consent and child assent forms were collected at this time. Following this event, GirlPower Photovoice participants were supplied with digital cameras and engaged in two days of training covering the topics of safety issues and photography. The photography training session took place during after school programming provided by the agency and included instruction on safety, the use of digital cameras, and time with local photography professionals to learn tips on taking photographs.

Once trained, participants were asked to spend a month representing their community and personal lives by taking photographs, discussing them together, and developing narratives to go with their photographs. Each week, girls were asked to take photographs that represented health, or lack thereof, within their communities. They were asked to document health promotion and inhibiting characteristics of their environments. The girls would then convene at the partner organization's office space for reflection sessions.

The Photovoice sessions started with snacks and social time while the research team downloaded photos and the girls took turns selecting their favorite photos for sharing with their larger focus group. The participants were then asked to participate in a focus group in which they discussed the photographs.

Based upon their knowledge of the girls, agency staff assisted with the process of assigning the girls into focus groups. The girls were divided into two groups, each of which was led by members of the research team. During the sessions, each girl was given an opportunity to share her selected photographs with the larger group. She was asked to explain the significance of her photographs, and the facilitators then encouraged discussion of these pictures amongst the group. The facilitators worked to elicit the girls' thoughts on the meaning of the photographs and their significance to the girls' perceptions of health in their individual lives, families, and communities. The meetings were recorded. Along with the photographs, the transcripts of these sessions served as sources of data for the investigation.

As the project continued, we realized that we needed to modify the implementation of the research project to better fit the needs of adolescent girls. We observed that the girls were having a difficult time answering the open-ended questions (i.e. Describe your community; What is the healthiest place in your community?) posed during the focus group sessions and struggled with their attention spans in a large group. Accordingly, we decided to develop more specific questions to be asked during the sessions and split them into two smaller focus groups.

The photo assignments given each week were as follows: *Describe your community; What is the healthiest and unhealthiest place in your community?; What helps you be healthy? And What keeps you from being healthy?; Take a picture of the contents of your fridge; Take a picture of your favorite snack; and Take a picture of what you had for dinner.*

Data Analysis

Data analysis was conducted by two faculty, two graduate students, and agency staff. Thematic analysis was conducted using the framework provided by Lincoln and Guba (1985) and was rooted in naturalistic inquiry and social constructivism. The analysis emphasized the meaning making of participants and themes that provide a larger level framework for understanding the connections and more abstract meaning of collective data. In this case, adolescent girls met in a series of focus groups over several weeks to discuss the meaning of their pictures within the health and wellness focus of the Photovoice project. In total, each participant took part in four different group conversations about the pictures they took and the meaning that they ascribed to them.

Focus group audio files were transcribed, and initial transcripts were reviewed and coded by each member of the research team in order to develop trustworthiness in the coding process. Research team members met regularly to discuss emergent themes in order to develop a coding framework. This beginning level coding revealed a broad conceptual framework consisting of the following themes: community health and safety, relationships, food, body image, socioeconomic status, moral development, and physical activity. In this analysis, items were allowed to be cross coded across thematic categories. Photographs were reviewed based on the coding framework that emerged from focus groups with participants and displayed in a thematic presentation photo exhibit at a community event where youth presented to local leaders, school officials, decision makers, parents, and community members.

Trustworthiness and Rigor

Trustworthiness refers to the transparency, consistency, and accuracy of the data analysis process (Rodwell, 1998). In this study, trustworthiness was promoted through the utilization of multiple coders of focus group transcripts and pictures, along with a consensus-based team process for determining final categorization of photos and final themes. Additionally, the researchers attempted to verify and engage in member checking during focus groups to ensure that they accurately understood participant voices related to photos they took

and the meaning the ascribed to them. Minor participants and their parents had an opportunity review and approve the photos selected for the final community exhibit.

Results

Data analysis revealed overarching themes, categories, and subcategories. The themes reveal the girls' personal reflections on their own health as well as the health of their community. Relationships between individual and community health were also identified.

Socioeconomic Status

The theme of socioeconomic status (SES) encompasses the girls' thoughts around money and their basic needs. Many of the girls were from lower-income families and had a heightened awareness of money. They knew when the family was paid each month and altered their eating habits and lifestyle based upon the proximity to payday.

We found that SES had an impact on the food choices families made and the family's culture or beliefs about food. Some of the girls had experienced extreme repercussions of poverty such as homelessness and food insecurity. The girls were also surprisingly aware of the cost/nutrient value of food. The girls had noticed that there were times when their families chose unhealthy food because it was cheaper than healthy food.

“. . . the healthy food costs more money. Fast food like McDonald's, a greasy, greasy burger costs a buck.”

Additionally, SES also played a role in their recreational choices. The girls shared the challenge of finding activities that were inexpensive and they voiced concern over transportation difficulties.

“Gas prices are going up these days.”

“...all of the city pools you have to pay for it.”

Moral Development

The theme of Moral Development emerged from the girls' discussions about their sense of empathy for others and their beginning ideas of justice. Like many adolescents, GirlPower participants were developing their own value set with input from their families, peers, school, community, and media. They often struggled to develop or hold on to a strong sense of personal confidence in the face of peer and other pressures.

“Well, if you're secure about yourself then you don't really have to worry about what everybody else thinks, but it's kind of hard to get secure about yourself when everybody else is trying to bring you down.”

The girls were also observed developing empathy for others and developing a sense of justice regarding the treatment of others and animals. They were observed to be particularly aware of the incongruity between a person's stated beliefs and his or her behaviors.

“my uncle owns a church and he, there was one (homeless man) who came up to our car and asked him for money for food and he had a kid with him, and my uncle threatened to run him over and told him to get off his lazy, yeah, and get a job.”

Personal Health

The theme of personal health included discussions around personal hygiene, dental hygiene personal health problems, and decisions related to personal health. They discussed the high cost of some personal hygiene products and the challenges of personal or parental health problems. One girl described her commitment to dental hygiene as a result of viewing her teeth as one of her best physical features.

“. . . I think soda's really bad for your teeth, and that's why I don't drink it, because like, my teeth are like my most treasured possession thingy. I like, I don't mess around with my teeth. I can't go a day without brushing my teeth.”

Additionally, the girls identified that health conditions can impact self-image.

“I have this thing called hyperhidrosis. . . it means I sweat. My hands are always sweaty, but when I have to wear long sleeve shirts and stuff, like pit stains and stuff, people judge on that.”

Physical activity. Physical activity surfaced as a sub-theme under Personal Health when the girls talked about how they spend their time. As young adolescents, they still portrayed a similar attitude toward physical activity as children who naturally integrate movement into their day as described below:

“We're really close, and um, we usually walk around our neighborhood to hang out with friends, there's like a mile between our neighborhood and the school, and we live a mile and a half away.”

“I've been swimming every day since we got out (summer break)”

Body Image

The theme of body image emerged out of the girls' discussions about their perceptions of others' views on their weight, hairstyles, clothes, and skin color. Many girls made decisions based on how it would impact their physical appearance.

“Sometimes I wonder if like everybody looked the same and the only difference would be how our personality was, how many people would be more secure about themselves, and be able to show who they really are to people.”

The girls also shared the strong influence of peers on body image and behavior. One girl tried a starvation diet and intense exercise after a boy called her fat.

“I used to be fat, like last year I was like . . . I need to do something about this. After one boy called me fat, then like I was like you know what I have to do something about this. I stopped eating for a week, and then I realized it wasn't working very well. So I started doing like a billion exercises and I almost died, but yeah, and I ate good food so it worked a lot better than trying to starve yourself.”

In addition to physical attributes such as, weight and perceived body size, girls also discussed the importance of clothing, hairstyles, and skin color.

“People judge on how you dress and stuff.”

“I wish I were lighter. Like, not light-light, but I want to be like my mom, light.”

In addition to the challenges girls' discussed related to social pressures to look a certain way, girls involved in this project also expressed a sense of developing their own self-image that was not based on their peers or the media, and demonstrated resiliency despite peer pressure and socialized gender norms related to body image and appearance.

“I don't like it when a person judges me because like, they don't even know me or anything. If they don't like me, well it's their fault, because they're missing out on something, and, well, I'm confident in myself and I don't care what anybody says. Cause I feel good about myself.”

Food

The overarching theme of food includes all discussion related to eating, snacks, meals, and grocery shopping. The family's SES and the family's beliefs and practices around food impact the theme of food. As noted under the SES theme, the girls from low-income families had a heightened awareness of the cost of food and altered their eating habits based on proximity to payday. Notably, the girls were aware of hypocrisy and the mixed messages they receive from authority figures regarding food.

“Especially like, during volleyball and basketball games, and like in the rec gym. They (teachers) always talk about changing . . . our diets into healthy stuff, but they're (teachers) the ones that sell soda for a dollar..”

“The water is more expensive than the soda (at school).”

We also observed the importance that food played in the cultural identity of the girls and their families.

“I eat Mexican food. . .because I'm Mexican.”

“My stepdad is from Africa, so he taught mom how to cook this thing it has . . .onions and then . . . like rice and chicken.”

“. . . since it's summer we started a garden in spring, our annual garden, we usually eat some vegetable from there.”

Family food culture. This subtheme represents the relationship that families have with food and its connection to their culture and identity as a family unit. The girls described the importance of food in celebrations of holidays and birthdays or ethnic heritage. The family unit influences eating habits and food choices in a number of ways. Many of the families were creating a norm of eating at fast food restaurants because it was inexpensive. These findings relate to the quotes shared below:

“My mom does allow fast food, but she just wants me to eat it like not more than twice a month, so basically she doesn't want me to eat fast food.”

“Well, the place we go most often is Taco Bueno, because we can eat, a family of four we can all eat there and get full for under ten dollars, and it's good food.”

An additional finding of this study was that the girls in our study did not regularly eat together with their families. Interestingly, even families that may home cook food were not sitting down to eat together. Many of the girls reported eating while watching television or family members eating in their own rooms separate from each other.

“We (family members) eat at different times.”

“Since my mom started dating her boyfriend, we've been eating out way too much. My mom's only cooked once in the last, like, three months. And if we ever eat at home, I cook, and don't like cooking for long periods of time; I think whatever is fastest, like ramen with butter.”

In some families the responsibility for food preparation was shared equally by the members and in other families only one parent was identified as the cook.

“Yeah, I cook, everybody cooks in the house; even my brother cooks.”

“. . . and it's like my dad always makes, has some sort of meat product and always has some sort of vegetable, and um some other side, so it's always meat, vegetable, something else.”

Relationships

Youth today navigate multiple relationships including family, peers, romantic relationships, school personnel, and the community. The girls in our sample represented a variety of familial structures. Peer relationships were both supportive and damaging. They had varying levels of interest in forming romantic relationships and had an emerging awareness of the opposite sex.

Family. Family broadly encompasses those persons who are both biologically and legally related to the girls or people living in their home who share a close, personal connection with them. Only one girl involved in the project lived with both her biological mother and father and many lived in non-traditional families due to various challenges. The health or illness of one member of the family had a profound impact on the family. For example, one girl shared that she had taken on a more parental role in her family as a result of her mother's health condition.

“. . . but my mom has spina bifida and she. . . can't bend over, and when my brother moved out, I got all the chores, and it's just me, my mom, and my little sister living in the house, and I'm the only one who cleans. . . I'm not really capable of cleaning all of that by myself . . . so our house hasn't been cleaned since we moved in three years ago. Because it's all my job and nobody else can clean.”

Another girl shared how her mother's illness was bringing a great deal of stress to the family. The family was working hard to clean the house because they were afraid of a second visit from the child welfare office.

“A lot of stuff keeps happening . . . My mom and I keep fighting and something big happened . . . we were home at like 9 in the morning and somebody knocked on the door. . . She was like ‘I'm Kimberly from Child welfare’ and somebody called and reported my mom for leaving us unattended, which is bull, she never leaves us home alone . . . and I'm almost 14, so it's not illegal, but no, they have to come and do a home visit and our house isn't clean, so we have to spend all week cleaning, and my mom has been really stressed about it.”

Peers/Friends. This subtheme encompassed the girls' relationships with their fellow classmates and friends. The girls described relationships that provided them with support and discussed the challenges of navigating relationships with peers.

“I take my friends very seriously because like, my friends, especially best friends are the funniest people they make me laugh every single day. My best friends are like the best comebackers cause if someone makes fun of me they will come up with something.”

“I like to talk in groups, when you like you're so caught up on your insecurities, if someone in the room intimidates you, or makes you feel so insecure that you can barely talk in a group, even though you have something you want to say, that just isn't. . . I don't know. . . It's just that you don't want to mess up in front of them or say something stupid.”

Community Health and Safety

Community Health and Safety is the broadest theme and refers to the resources both accessible and inaccessible within the community as well as the overall sense of well-being within the community. The subthemes of crime and delinquency, animal cruelty, substance abuse and clean and healthy spaces emerged from our conversations with the girls and the connection of these traits to the overall health and well-being of a community.

Crime and delinquency. Crime and delinquency refer to the presence of criminal activity both within their neighborhoods and their schools. The girls shared their experiences with crime in their communities.

“ . . . I’d rather be out doing something like graffiti”

“ . . . over there they have lots of fights . . . and they’re all videotaped. ”

Animal cruelty. Animal cruelty emerged as an important issue for the girls. This discussion provided further evidence of their moral development and their emerging sense of justice. In addition to moral development, this discussion also provides insight into the safety of their communities.

“But some people don’t treat animals right. They grab them bad they like just. . .”

“People hit their cats and their dogs, they slap them and they throw things at them, and stab them, and cut them.”

Substance abuse. Substance abuse is a subtheme that reflects the girls’ experiences with both family and friends using drugs and alcohol. The girls described experiences of being pressured to use drugs and of substance abuse by peers.

“...it was vodka, and it was just out on the counter open when her parents left, and we were home, alone for like, 9 hours, till like, 4 o clock in the morning and they were out at the bar.”

“...I’ve told them (peers) I’ve never had marijuana before and they’re shocked.”

“ . . . I know that I’m never going to fall into that peer pressure thingy into drugs because I have read books like Crank and all that, and it really messes up your life.”

Healthy spaces/cleanliness. Healthy spaces encompass city parks and neighborhood pools. The girls reported that they enjoyed visiting a few of the neighborhood parks, but also expressed concern that their friends and classmates would ruin a public park if they went to it very often. They expressed concern regarding the cleanliness and appearance of their school grounds and neighborhood parks.

“ ‘cause like, people leave dog poop everywhere, when they take their dogs for walks, like, and when they smoke, they just throw the cigarettes on the ground and they throw their beer bottles on the ground, with all those little kids out there, and like step on glass and stuff.”

Limitations

Although the Girlpower Photovoice project was widely considered a success by participants, the research team, and community members, there were several limitations that need to be pointed out. One limitation of this study was the ages of participants and that even a 1-2-year age different among adolescents can be significant in terms of their developmental abilities around abstract thinking, moral development, and social responsibility. Another limitation in this study is that the girls themselves did not write narratives for the pictures displayed in the community forum. In most Photovoice projects, participants ascribe titles and descriptions to their work before it is displayed for advocacy purposes. However, given the different literacy levels of the girls, the team decided that it was better to have participants discuss photos during regular focus groups sessions and orally discuss photos with community leaders at the advocacy session. Finally, this study was undertaken in one specific context with a small sample of the girls and may not have transferability beyond the study’s context and location.

Implications and Discussion

The Girlpower Photovoice project illuminated several key areas of youth life and the perceptions of teen girls regarding their health and the health of their communities. The findings spanned the continuum of illustrating resources and strengths as well as deficits and challenges present in the lives of the girls, and it represents a modest contribution to the literatures related to health promotion, health and families, and the risks and resiliency traits of adolescent girls. The implications of this project are timely given the current socio-cultural emphasis on youth health and well-being at the state and national levels.

Family Influence on Adolescent Health

Within this context we found that families have a strong influence on the health knowledge and behaviors of a girls. In particular, our findings support the influence families have upon adolescents' food choices. The girls participating in our project frequently mentioned family eating behavior and norms when discussing health in terms of food selection, their own eating habits, and body image. Significantly, research indicates that family connectedness, parental support, shared family meals, and a positive environment at mealtime were linked with higher levels of body satisfaction (Fulkerson et al, 2009). Family connectedness can actually work as a protective factor against poor body image. (Resnick, Harris, & Blum, 1993). Additional research findings support an association between positive psychosocial outcomes among adolescents and family meals. The frequency of meals consumed as a family has specifically been correlated with lowered rates of depression and stress, increases in positive coping skills and family cohesion (Fulkerson, Kubik, Story, Lytle, & Arcan, 2009)

Research findings also indicated that families had a unique influence over substance abuse beliefs and behaviors among participants. The parents' behaviors around substance use differed from the verbal messages they had provided their daughters. While the girls did not report using alcohol or substances at this point in their lives, with continued lack of supervision, access, modeling by parents and pressure from peers it seems unlikely that they will continue to avoid alcohol and substance abuse. As a result, public health interventions need to create more inclusive messages that target children and families.

Socialized Gender Norms and Adolescent Girls' Health and Wellbeing

The larger socio-cultural contexts within which the girls exist also emerged as a significant finding with implications. An especially important area to consider is the perceived relationship between beauty and health. The media and popular culture have made healthy, fit, and skinny synonymous. We found that the girls had an emerging understanding of health and healthy behaviors; however, that understanding was influenced primarily by their perception of beauty. The girls based their health behaviors on its potential impact on their looks. Research has found that adolescents' body image has a negative impact on their engagement in healthy behaviors. For example, adolescents with low body image were more likely to engage in unhealthy dieting practices, binge eating, and lower levels of fruit and vegetable intake and physical activity (Neumark-Sztainer, Paxton, Hannan, Haines, and Story, 2006). Leveraging familial influence on body image may thus improve girls' health behaviors.

Impact and Outcomes on Participants

Several of the participants reported a newfound interest in photography and desire to become involved in the promotion of health within their community. The use of Photovoice within the project provided the participants with a voice and a new way to share their story. One participant elaborated on her experience when she stated, "we would talk about pictures together, but we were allowed to be ourselves because each picture meant something different to everyone." Additionally, another participant shared, "I learned that every person contributes to the community for better or for worse . . . , everything and everybody matters in a community."

Final Thoughts

Teen girls are especially affected by sociocultural gendered messages, often reinforced through traditional and social media, peer groups, and even institutions. As a society, especially in public health circles, we may be inadvertently encouraging young women to engage in dangerous behaviors, through the messaging of our interventions, which often focus on outcome-based measures such as, BMI, weight, and physical activity levels, rather than on socioemotional wellbeing, positive body image, and self-esteem.

In conclusion, we would like to encourage social workers and counselors within schools, youth serving-organizations, and public health centers to engage families in their health-related interventions. Despite current research trends that have often found that children and youth are more strongly influenced by their peers than their parents (Harris, 2009), our findings illustrate the strong influence that parents and families have on their children's health. Perhaps integrating family interventions to improve health into youth award ceremonies, graduations, and fun events like block parties will have a stronger impact than television commercials and billboards.

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