

Using Photovoice to Hear the Voices of Mothers  
Raising Children in St. Croix County

FINAL REPORT

By

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## Executive Summary

### Background

This project is the qualitative research component of the St. Croix County Community Health Improvement Process. A joint partnership was formed by professionals from Hudson Hospital & Clinics, St. Croix County Public Health, and Wisconsin Area Health Education Centers (AHEC), University of Wisconsin-Madison to see the views and hear the voices of mothers raising children in St. Croix County about community strengths, needs, and concerns for the purpose of relevantly targeting programs and community planning that supports families. This research was approved by and conducted in accordance with the University of Wisconsin-Madison Institutional Review Board.

### Methods

The method of *Photovoice*, as developed by Dr. Caroline Wang was selected and used for this research project. Photovoice places cameras in the hands of local residents to enable them to depict their everyday lives through visual image. It has been used by county health professionals, educators, and community organizers throughout the nation to improve the living conditions of members of vulnerable populations who typically do not have access to decision makers. Three groups of six women raising children in St. Croix County were recruited: (1) mothers who are concerned about maternal and child health issues; (2) mothers who are of Hispanic ethnicity and do not speak English; and (3) mothers who are concerned about healthy eating and active living for their children. Two workshops were held for each group during the summer and early fall of 2008. In Workshop I, training was provided about the purpose and methods of Photovoice. During Workshop II, mothers shared and discussed the meaning of their photos, and what they would like to see changed in the community (if anything) to foster quality family living.

### Findings

#### Barrier & Need—Transportation

“When we don’t have a driver’s license, the road ends and we need to keep on going. That’s what the picture represents.”

*Interpreter:* “[The picture] represents the barrier that many Hispanic people have. She said, ‘Thank God I can drive,’ but many of her family and friends can’t because they don’t have the documents or whatever is needed for them to get a license. They don’t want to change the laws, they realize they can’t, but they would like to have some kind of permit that would allow them to

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drive to the grocery store, to bring their kids to school, just the basics.” *Mother of Hispanic Ethnicity from Hudson*

### **Barrier & Need—Environmental Health & Safety**

*Interpreter:* “Okay, that’s a place in a farm where everybody that is there goes and drops their garbage. It’s not like a garbage can or garbage place. It’s just that’s the place that everybody brings their garbage to. It’s not really a designated place but they took it there and that’s where they are going to burn it....There are plastic bottles there and that it is the people who throw out anything for recycling ....There’s nothing for a garbage truck that will come and pick it up so they just dump it out there and burn it and she feels that has contaminated the environment....The Hispanic people that work there, they are the ones dumping the garbage there because they don’t have anyplace else to bring it....It’s on a farm so they don’t live in the city so it’s private property. There are a lot of trailers....”

*Mother:* “People just throw garbage wherever and you know that’s like how everybody dumps their garbage. There is garbage everywhere so that is a garbage place.... There is glass like broken bottles and those kinds of stuff.” *Interpreter:* “Her son already got cut once.” *Mother of Hispanic Ethnicity from Glenwood City*

### **Barrier & Need – Pedestrian Safety**

“That picture is right by my older daughter’s school, the middle school in New Richmond. It’s Main Street in New Richmond. It’s a horrible intersection that always looks like that. You have cars going all the time and for kids to have to cross that street it’s horrendous. The kids have to cross that street if [they] are walking home. I’ll pick up my children to avoid this intersection. There have been several pedestrians hit up there.” *Mother from New Richmond*

### **Community Need—Nutrition Education in the Schools**

“This is lunch at school. It seems as though no matter what’s on the menu, they would pick the things that aren’t the healthy choice....Sometimes I watch what these children eat because I go to lunch often to be there as a support for my children. It’s kind of saddening to me that we’re not incorporating as a community this health and wellbeing through our schooling and providing our children with education that says these are the things that are super healthy for you. I don’t think we do enough to get that across to our children through our schooling.” *Mother from Hudson*

### **Community Need – Parental Language Barrier in School System**

“Because of the language barrier we don’t get informed as well as the other parents – that is the problem of us not learning the language fast enough. But not all is bad – the teachers are excellent and help me with the kids, and guide to give them a better education.” *Mother of Hispanic Ethnicity from Somerset*

### **Community Need – Stroller & Handicapped Accessible Walking Paths**

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“This is called ‘Our Daily Walk’. These are my kids and my dog. This is the path we go down and if you look way ahead there’s a woman there pushing a stroller and the path isn’t easy for her. Once we passed her, I realized she was really struggling. I kept [this] picture because it’s great for us, but it wasn’t so great for her and we don’t have any paths in Glenwood. So it’s beautiful but maybe not easy for bikes [or] strollers.” *Mother from Glenwood City*

#### Reflection on the Value of Community

“The chain represents where I fit into the community. We all work better as a whole and it is important for families to have others in the community to rely on. The circle symbolizes how it keeps going and never ends.” *Mother from Somerset*

#### Parenting Strategy – Mothers Modeling Physical Fitness for Their Children

“This one I named “Free to Be Fit” because of the Olympics and spirit of that this summer – seeing some of the Olympians with their flags around them as they were celebrating their accomplishments. I thought in our country one of our assets in our community is that it’s safe to be outside. There are a lot of opportunities to be active and physically fit. The education [is] there for people to utilize to be fit. Opportunities are there. On the flip side there’s also the freedom to not be fit. You have the choice. These are just some of my running friends that are all mothers and all of our kids are seeing us continue to have fitness as a daily part of our lives and a very positive part.” *Mother from New Richmond*

#### Community Asset – Paved Pedestrian and Bike Pathways

“This is a picture of the trails, a part of the trail system that is actually in the town of New Richmond. It provides an opportunity for people who need paved pathways to partake in exercise whether it’s on their bike, rollerblades, strollers, walking or jogging. These are very well cared for and the system keeps expanding so that it’s functional as well, so you can get to the schools and to some major destinations by using [these] rails.” *Mother from New Richmond*

#### Community Asset – Farmers Market

“This produce was available at a local farmers market this summer. The presentation was wonderful and the joy of selecting and [the] cooking quality [of] locally grown produce is even better. Our family visited the market each week, selecting our purchases together, and then we went home to prepare meals together. My three year old has discovered a love of snapping beans while my five year old has discovered a love of eating them fresh.” *Mother from Roberts*

#### Community Asset – Head Start Education

“This is the good part. This is a program that started last year for children of four years old. It was his first year of school....4K in New Richmond.... It’s free [and is held for] four hours [a day], 12:30 to 3:30 in the afternoon. *Mother of Hispanic Ethnicity from New Richmond*

## **Limitations**

This information is not generalizable to all mothers raising children in St. Croix County, since it was obtained from three non-randomized, small convenience samples that consisted of six women in each group. The findings were based on mothers' perceptions; as such, they may lack scientific precision.

## **Strengths**

The strength of these findings is that they allow community stakeholders to hear the voices and see the views of mothers in a real-world context about community assets, needs, and personal reflections related to raising healthy children in St. Croix County. This information provides insights into existing services that are valued by residents as well as how to more effectively support parents through community planning. The study empowers parents to be partners with decision makers by placing their perspectives as an integral part of the community health improvement process.

## **Discussion**

Major themes related to community needs, personal reflections and parenting strategies, and community assets included topics, such as, transportation, pedestrian safety, nutrition, language barriers, environmental health and safety, and the meaning of community. While differences in emphases was seen among the three groups, agreement occurred in the identification of community assets, including outdoor parks, recreation facilities, camp-grounds, and organized sports, and a high quality of elementary education.

## **Recommendations**

The findings are hypotheses generating related to future research and interventions. Further investigation is require to determine the pervasiveness, magnitude, and importance of meeting the needs identified by the mothers in this Photovoice project, such as: transportation; pedestrian and biking safety on school routes and in the community as a whole; language barriers between Hispanic teachers and parents in the schools; environmental health and safety for Hispanic immigrants; improved nutrition served in the schools, and nutritional education for parents. In addition, this information may be examined in combination with relevant population-based data collected as part of the community health improvement process. Mothers recommended possible action steps in a group discussion which are reflected in the following possible approaches:

- Discussing the possibility of incorporating nutrition information in existing parenting education classes

- Examining the feasibility of implementing on-site organic gardening in new green schools as curricula to teach youth about healthy food choices
- Investigating approaches toward development of walking/biking paths in city planning to promote healthy lifestyle
- Assessing the need, community support, and feasibility of establishing a public transportation service.

Mothers of Hispanic ethnicity identified several complex needs which necessitate further investigation. If these situations are widespread, some possible approaches could include:

- Outreach with farmers to comply with local ordinances regarding burning on private land
- Outreach with the tenants union to maintain rental property
- Exploring options for a phone line where messages can be left and translated to facilitate communication between parents of Hispanic ethnicity and teachers about children's issues
- Assessing of the impacts of current laws related to obtaining drivers licenses
- Analyzing of the feasibility of establishing a Hispanic immigrant center in St. Croix County, such as, a scaled-down version of the Milwaukee Latino Center, which addresses multiple needs, and could include advocacy for many of the issues raised by mothers in this Photovoice project.

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## REPORT

### Background & Mission

#### *Emerging Partnership*

This research project is the qualitative component of the St. Croix County Community Health Improvement Process, and has been conducted in joint partnership with members from the following agencies: (1) Hudson Hospital; (2) St. Croix County Department of Health and Human Services [DHHS] Public Health Department, and (3) the Wisconsin Area Health Education Centers (AHEC) Program. Participation among these partners is consistent with the missions of the organizations they represent.

The mission of Hudson Hospital is "Caring for the Health of Our Community" (Hudson Hospital Foundation, 2008). As a non-profit organization, Hudson Hospital collaborates with the community to improve the quality of life for its residents, especially low-income, marginalized, and underserved groups. Guidelines from the Wisconsin Hospital have outlined participation in community health research as an activity to facilitate meeting this mandate (Wisconsin Task Force on Community Benefits, 2008). As such, Hudson Hospital is a partner in the larger community health improvement process as well as in this qualitative research study.

The mission of St. Croix County DHHS Public Health is to protect and promote health, prevent disease and injury, and empower communities to live healthier lifestyles (St. Croix County DHHS Public Health Department, 2008). Every five years the St. Croix County DHHS Public Health conducts a community health needs assessment to meet Title V maternal and child health federal block grant funding requirements for health programs it provides to families. This study, as well as the larger community health needs improvement process will be utilized to meet this federal requirement in addition to addressing the larger needs of county residents.

The Wisconsin Area Health Education Centers (AHEC) program connects students to health careers, health professionals to communities, and communities to better health. One major focus of Wisconsin AHEC is to partner with local organizations for outreach activities to improve the health of the community. Collaborative participation in this qualitative research project is consistent with this organizational priority (Wisconsin Area Health Education Centers, 2008). In consonance with these organizational objectives, a joint partnership between Hudson Hospital, St. Croix County DHHS Public Health, and Wisconsin AHEC was formed to conduct the qualitative component of the St. Croix County community health needs improvement process. The mission of the members of this research team was "to see and hear the community strengths, needs and

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concerns from mothers raising children in St. Croix County to more relevantly target programs and coordinate community planning for families.”

## Study Methods

### *Photovoice*

A qualitative research method called, *Photovoice*, developed by Dr. Caroline Wang, from the University of Michigan-Ann Arbor was selected. Photovoice is an innovative community-based participatory approach that places cameras in the hands of local residents and enables them to record the everyday experiences of their lives through visual image. The approach gives visual voice to members of vulnerable populations, who typically do not have access to decision makers and who may not have verbal acumen in the dominant language, for the purpose of improving local living conditions and alleviating health disparities. Photovoice has three primary goals: (1) to enable residents to reflect upon and document the assets and needs in their community; (2) to promote critical dialogue through small and large group discussion about these issues; and (3) to engage policymakers (C. Wang, 2005). The approach has been used by county health departments, community organizers, educators, and health care professionals throughout the United States and world-wide. Examples of the use of Photovoice includes projects that have involved: adolescents concerned about crime in Flint, Michigan (C. Wang & Redwood-Jones, 2001); community members living in a homeless shelter in Ann Arbor, Michigan (C. C. Wang, Cash, & Powers, 2000); low income mothers living in a diverse county in the San Francisco Bay area with a high rate of poor perinatal outcomes (C. C. Wang & Pies, 2004); Aboriginal pregnant women in Canada's Northwest Territories (Moffitt & Vollman, 2004); peasant woman living in rural China (C. Wang, Burris, & Ping, 1996); Hispanic women for the purpose of improving family planning (Schwartz, Sable, Dannerbeck, & Campbell, 2007); and citizens in a low-income community concerned about healthy eating and active living (Kaiser Permanente, 2008).

Community-based participatory research (CBPR) takes place in the community and has relevance to ordinary people. It brings together academics, local stakeholders, and residents in a collaborative process to generate research and knowledge, and empowers community members to be a part of the solutions to improve the quality of their lives (Minkler & Wallerstein, 2003). Photovoice is one methodology that is grounded in CBPR. Our objectives for this Photovoice project were : (1) to foster awareness of existing resources for parents raising healthy children in St. Croix County; (2) to enable parents to record their concerns related to raising healthy children in St. Croix County; (3) to promote dialogue about existing community strengths and needs related to raising healthy children in St. Croix County; (4) to engage public health professionals, community partners, and policy makers in discussion through a visual

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display of the photos and findings; and (5) to incorporate the perceptions of parents in the development of future programs and resources to assist parents to raise healthy children.

### ***Research Protocol***

This Photovoice research was approved by and conducted in accordance with the University of Wisconsin-Madison Institutional Review Board. Mothers were informed that participation was strictly voluntary, that they were free to withdraw from the study at any time, and that their decision regarding participation would not affect their relationship with the agencies involved in this research. The women were provided with informed consents, which included signatures for their intent to participate and the release of photos for future publications. The consents were written by Dr. Kirstin Siemering and approved by the Institutional Review Board at the University of Wisconsin-Madison (Appendice A). In addition, photo release forms were given to participants during workshop I for usage in cases where mothers took portraits of people who were not in their immediate families (Appendice B). The risks for participating were minimal and included a potential that an individual could disclose information that may make her uncomfortable; however, since the women self-selected the pictures and the stories they shared, this risk was negligible. Women received a \$50 stipend for participating in each workshop. Daycare and transportation were provided, if needed, by Hudson Hospital and refreshments were served during the sessions.

### ***Recruitment***

Three distinct groups of six mothers raising children who were age 18 or older and resided in the county for a minimum of 12 months were recruited. The first group targeted mothers of Hispanic ethnicity who do not speak English. Non-English speaking Hispanic immigrant parents may face cultural and language barriers in their goal of raising healthy children. In addition, at 1.3%, persons of Hispanic or Latino origin are tied for the largest minority living in St. Croix County<sup>1</sup> (U.S. Census Bureau: State and county quickfacts, 2008). As such, the perspectives of mothers raising children from this group were sought out. Non-English speaking Hispanic immigrant mothers were recruited from a bilingual interpreter who works with this population at the St. Croix County DHHS Public Health.

The second group targeted mothers raising young children who may have a special interest in maternal and child health services. Eligibility for participation included one of the following criteria: (1) a history of pre-term delivery, less than 37 weeks gestation; (2) a history of delivering a low birth weight infant, less than 2500 grams; or

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<sup>1</sup> Persons of Asian ethnicity also comprise 1.3% of the population of St. Croix County.

(3) a history of little or no prenatal care. Recruitment was conducted by a public health nurse at St. Croix County DHHS Public Health, and through flyers distributed in the waiting room of a clinic affiliated with Hudson Hospital. This group was selected to hear their perspectives, since they may have greater experience in the utilization of county and private services aimed at promoting maternal and child health (MCH) compared to those with low-risk and uncomplicated deliveries.

The third group targeted mothers who have concerns about the topic of healthy eating and active living. During the last 30 years, the rate of childhood obesity has increased greater than two times for children and adolescents between the ages of two to five years, and 12-19 years, while increasing greater than three times for children between the ages of six to 11 years. Compared to their peers, obese children are at higher risk for developing health conditions associated with cardiovascular disease, such as, elevated blood pressure, elevated cholesterol, and Type 2 Diabetes; in addition, they are more likely to become overweight as adults (Israel, Eng, Schulz, & Parker, 2005) (United States Department of Health and Human Services Centers for Disease Control and Prevention, 2009; United States Department of Health and Human Services Centers for Disease Control and Prevention, 2009). As such, a report by the National Institute of Health has suggested that the prevention of childhood obesity is a national public health priority among government, families, and communities (Institute of Medicine of the National Academies, 2004) (St. Croix County DHHS Public Health, 2008). A community health needs assessment conducted by the Office of Rural Health in 2003 identified diet, exercise, and obesity as a top community health priority for St. Croix County (St. Croix County DHHS Public Health, 2008) (St. Croix County DHHS Public Health Department, 2008). Obesity is related to the balance between calorie intake and expenditure, mediated by a complex interaction across biological, genetic, social, environmental and political factors (Institute of Medicine of the National Academies, 2005). Therefore, focus for this group was placed upon the topic of *healthy eating and active living* for the purpose of hearing the unique perspectives of mothers related to the complexity of these trends. Mothers known to be interested in this issue were recruited by a dietician from the St. Croix County DHHS Public Health and the marketing and community relations manager from Hudson Hospital through informal referral.

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### ***Photovoice Workshops***

Two workshops were held at Hudson Hospital for each group of mothers. Workshop I was presented in August 2008 and included information about the purpose of the community health improvement process and this Photovoice study, along with an introduction to the sponsoring partners and their missions. Photovoice was described, and instruction was provided in the following components of the methodology: (1) how pictures might be used to convey views of community needs, assets, and concerns; (2) the ethics of using the camera<sup>2</sup>; (3) tips on how to take well-composed photos; and (4) how to use the camera (Appendix C). This training was facilitated through power point presentations, and a hands-on-session in how to use the cameras. Mothers were given a list of questions, or prompts, to facilitate meaningful reflection about community needs and assets that are important in supporting them as parents raising healthy children. The same questions were given to both Hispanic mothers, and mothers with an interest in maternal child health issues, with all materials translated into Spanish for Hispanic participants. The questions differed for mothers concerned about healthy eating and active living, since they were geared toward community needs, strengths, and reflections focused solely upon this topic (Appendix D). Cameras were supplied on loan for mothers to use during this project by Wisconsin AHEC.

Mothers pondered these issues at home and in the community and recorded their views in photographs during the next three to four weeks. They selected six photos that were most meaningful to them; the pictures were submitted to local recruiters in person or electronically by email, and made into CD-ROMs. Co-principle investigator, and lead, Dr. Maggie Stedman-Smith, uploaded the photographs into a power point format prior to workshop II, which was held approximately four to six weeks after the first workshop. During workshop II, mothers individually described each picture and what the image meant to them in terms of community needs, assets, and parenting concerns. After the photos were shared, a group discussion took place with the mothers related to what they perceived to be the most important issues in the community, i.e., what is working effectively, and what they would like to see changed to better support them as parents (Appendices D and E).

Three mothers who attended workshop I and submitted photos were not able to attend the second workshop. To enable their participation, these women wrote descriptions of the meaning of their pictures and submitted this information for inclusion in data analysis. A guideline was created, which consisted of the same basic questions

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<sup>2</sup> Ethics of Photovoice include: (1) obtaining permission before photographing individuals; not taking pictures that are identifiable which cast persons or private property unfavorably; and when possible, to give back a copy of the picture as a measure of thanks.

asked of their peers during workshop II. Dr. Wang has a tradition of employing “free-writes” for participants who cannot present their photos and narratives face-to-face in a group session (Baker & Wang, 2006) (Appendix F).

### ***Data Analysis***

The second meeting was tape recorded and transcribed for accuracy. Debriefing sessions occurred immediately after each workshop, in which team leaders and co-researchers discussed their impressions of the sessions, including major themes identified by participants. Field notes were compiled during and after the first workshops, during debriefing sessions and immediately following the second workshops by the co-principle investigator, Dr. Maggie Stedman-Smith. In addition, leadership team, co-researcher, Karen Hansen wrote field notes during the second workshops. Field notes are subjective impressions recorded by qualitative researchers related to participation and observation during and after research sessions or field work. They can contain direct quotes and paraphrase responses of participant interviews, often depicting perceptions related to who, what, where, when, and why during participant observation (Mulhall, 2003). Major themes were identified from transcripts and photos by Dr. Maggie Stedman-Smith. The findings were verified by the group discussion section of the transcript and field notes from team debriefing sessions. In addition, they were validated through peer review by leadership team, co-researcher, Karen Hansen and co-principle investigator, Dr. Kirstin Siemering.

Cross case analysis was used to discern similarities and differences across the three groups. This method employs matrixes or graphic displays as an integral process of data analysis; the approach allows for a systematic and comprehensive examination of the information, which is easily accessible for the researcher or others who may use the findings for future endeavors (Miles and Huberman, 1994).