



Exploring Community Perceptions of the Built Environment through Photovoice



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BACKGROUND:

- Evidence suggests that environments (built and social) where chronic disease prevention (CDP) interventions occur are as important as intervention design and participant characteristics^{1,2}.
- Chronic diseases are the leading cause of death and disability worldwide³.
- Although scholars are aware of the relationship between environments and chronic diseases, little attention has been paid to how perceptions of community environments foster or inhibit healthy choices.

Community Health and the Built Environment:

- The current project is part of a larger project called Community Health and the Built Environment (CHBE).
- The purpose of the larger project is to build a comprehensive understanding of the role of place in interventions for obesity reduction (OR) and CDP to facilitate identification of environmental factors that may foster, inhibit or prevent health intervention success.

OBJECTIVE:

- To facilitate the identification and presentation, through photography, of community residents perceptions of opportunities and barriers to physical activity (PA) and healthy eating (HE).

METHODS:

Photovoice:

- Participants photograph and storytelling to capture their communities built and social environments. This method is commonly referred to as Photovoice^{4,5}.
- Photovoice is a participatory action research approach which allows participants to use photography to represent issues they identify as being prominent in their community^{4,6}.

Study Design:

- A case study approach was employed in four contrasting Alberta communities (two urban and two rural).
- The research was conducted in four distinct phases:
 - **Phase 1:** initial semi-structured interview to discuss individual perceptions of community, PA and HE;
 - **Phase 2:** approx. 2 weeks to take pictures around the community;
 - **Phase 3:** follow-up semi-structured interview to allow participants to tell a story about their pictures; and
 - **Phase 4:** presentation of photographs and stories to the community.

Participants:

- A total of 35 participants took part across the four communities.
- Every effort was made during recruitment to ensure that the participants represented the diversity of each of the communities.

Analyses:

- Interviews and photographs were analyzed using qualitative thematic analysis to identify common codes and themes.

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RESULTS:

- **Urban Communities:**
 - Tended to focus on how the social environments of the communities influenced their PA and HE.
 - Increased awareness of the driving culture in the urban communities (i.e., saw the value of mixed land use).



This is a picture of the back door of my house. For me, healthy living starts with not being afraid to go out this door. Security lights add to the safety of the area, but it is also a constant reminder at night time that we are under siege in our neighbourhood.



This photo captures the fear that is associated with a woman being out on the street in this neighbourhood. This can be a big detriment to being out and active in this part of the city. Being a younger man I have never felt that personally, but I do know that it is out there and a lot of people talk about it.

- **Rural Communities:**

- Tended to focus on how the physical (or built) environments of the communities shaped their PA and HE decisions.



The Community Gardens I believe is a good combination of physical activity and healthy eating. People can build their gardens and then go to the farmers market and sell the vegetables and other crops which they've grown. It is a community project The gardens are well publicized to raise awareness in the community.

This is a nicer neighborhood called Spring Park. The subdivision was developed by the town. Take note that they don't have side walks. I think they left the side walk out to cut costs. (I don't think a private developer could get away with this.) It is reasonably safe to walk/stroll on the side of the street as this is not a high traffic area, but it doesn't promote mobility in the winter.



LIMITATIONS AND STRENGTHS:

- **Limitation:** Although efforts were made during recruitment to ensure that the diversity of the population from each community was represented in the sample, this proved challenging.
- **Strength:** Decision-makers have already begun to use the pictures and stories for community planning and community activities.

CONCLUSIONS:

- The results of the current project are particularly valuable for helping guide community-driven interventions for CDP and OR while supporting community-level decisions.
- In addition, the results of this project will be combined with the results from the larger Community Health and the Built Environment project to facilitate the identification of environmental factors that may foster, inhibit or prevent healthy lifestyle choices.

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