

# Photovoice as a methodology with people suffering the consequences of alcohol-related harm

**Dr. Aisha Holloway, University of Edinburgh**

**SHAAP/SARN 'Alcohol Occasional' Seminar  
Thursday, 18<sup>th</sup> June 2015, The Royal College of Physicians of Edinburgh**

**Scottish Health Action on Alcohol Problems (SHAAP) and the Scottish Alcohol Research Network (SARN) are proud to support the lunchtime 'Alcohol Occasional' seminars which showcase new and innovative research on alcohol use. All of the seminars are run in conjunction with the Royal College of Physicians of Edinburgh. These events provide the chance for researchers, practitioners, policy makers and members of the public to hear about new alcohol related topics and discuss and debate implications for policy and practice. The current theme for the seminars is "Alcohol and Mental Health". Briefing papers, including this one, aim to capture the main themes and to communicate these to a wider audience. SHAAP is fully responsible for the contents, which are our interpretation.**

Holloway presented the findings from a research project exploring the lived experiences of people suffering the consequences of alcohol-related harm. Innovative technologies had been used in the form of photovoice, a technique bringing together photographic art and narrative. The research had been led by Dr Sarah Rhynas, from the University of Edinburgh, and was supported by SHAAP, the National Portrait Gallery of Scotland and NHS Lothian. Participants had been recruited from Rowan Alba's Community Alcohol Related Damage Service (CARDS) and from the Serenity Café.

Although the terminology ARBD (alcohol-related brain damage) is widely used, Holloway explained, participants who had come from CARDS often did not recognise themselves as having such a condition. Only men had agreed to participate in the project, and several women who had been invited, cited reasons such as having strong feelings of shame for not wanting to be involved. Holloway reported that participants often described the experience of being admitted to hospital, where they stayed for some time in an acute state, but that then, afterwards, although they remained in hospital, not much seemed to happen. Some participants were still consuming alcohol, although they had been trying to abstain.

Three workshops had been held in the National Portrait Gallery. The first consisted of an introduction to the project and explanations about how to use the digital cameras. Participants then had gone away to take pictures of their environment. They returned to another meeting, bringing the cameras back in order to have the photos viewed and selected with the help of a photographer, while a creative-writing expert helped the participants to explore the meanings of the images. In the final meeting, participants selected the 'photovoices', which would be used in their individual photobooks.

The project team had worked to enable participants to record and

reflect on their personal strengths and concerns, as well as on their neighbourhood, encouraging them to record these in photos. Through group discussions about the photographs, the researchers had intended to facilitate dialogue and information sharing, with a view to pass some findings on to policy makers. However, as Holloway explained, project participants underwent very individual experiences of recovery. Despite the project team's efforts, the participants from CARDS chose to work predominantly in isolation, not interacting with each other, engaged with their own individual stories.

Despite this, Holloway argued, the researchers ended up acquiring quite good data, because the participants had come to the sessions with lots of ideas about what they would be photographing (e.g. pets, scenes for a particular reason), and some had specifically intended to use their photos to generate a positive impact on others.

The following are some of the comments provided by the participants describing their experiences in the project:

*I thought that it was going to go on for 6 months or something, I really really liked that place, you know, the folk, all of them, they were all really nice. I wish we could go back, you know, together, they were all so relaxed. It relaxed me.*

*I enjoyed it. If I can make one person look at my pictures and think twice about drinking then that's a good thing. Its made me think about how I can help others, like maybe mentoring or something.*

*It has made me think about asking that social worker about getting access to my money to buy a camera, I'm allowed the money for things like that. They keep it to stop me buying booze, but I'm sure they'd agree to this.*

Following Holloway's talk, her conversation with the audience started with a discussion on the possible reasons as to why project participants from CARDS had not interacted very much with each other in the workshops, despite the project team's efforts. It was suggested that this might relate to the stage of recovery of individuals. It was also suggested that at an earlier stage at CARDS, clients might interact mainly with professionals. However, in settings like Edinburgh's Serenity Café, founded

and managed by people in recovery, a safer, more peaceful environment can be experienced with peers working to create a community atmosphere.

Talking about how the participants carried on drinking while in recovery, discussants commented that while stopping drinking might be easy, especially when a crisis point has been reached, it is far more difficult to maintain abstinence, because alcohol is widely available and advertised in many settings. It was also noted that while on social media, for example, on Facebook, depictions of alcohol contexts are often imbued with images of sociability, where people are having loads of friends and fun, the photovoice pieces were mostly about bleak and depressing experiences. It was suggested that this could have been influenced, to some extent, by the participants' assumptions about what the researchers would be expecting them to present.

An audience member, talking about his own alcohol problem, commented

that he had stayed in hospital for a while to receive treatment, but that, when released, he had had to return to his usual accommodation, surrounded by the places and the people linked with his problem drinking. There was broad agreement that alcohol recovery processes need not to focus only on individuals, but also on neighbourhoods. While it might not be possible to support people to move house, social services ought to be able to support people to engage in pursuits that do not involve alcohol drinking.

Finally, Holloway explained that the photovoices had been exhibited and mentioned in a debate in the Scottish Parliament. She also explained that while a permanent project display had been set up in an ARBD unit, volunteers at the Serenity Café had also set up their own exhibition. The researchers would be interested in developing a toolkit to support other organisations willing to undertake a similar project.



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## SHAAP/SARN Alcohol Occasionals Lunchtime Seminar Programme 2015–2016

### Call for Presentations: 'Alcohol, Europe and the World'

Scottish Health Action on Alcohol Problems (SHAAP) and the Scottish Alcohol Research Network (SARN) are pleased to announce a Call for Proposals to present at our lunchtime 'Alcohol Occasional' seminars. These showcase innovative research on alcohol use and provide the chance for researchers, practitioners and policy makers and members of the public to hear and discuss alcohol related topics, over lunch in the historic Royal College of Physicians in Queen Street, Edinburgh.

The theme for our forthcoming seminar series, from October 2015, is 'Alcohol, Europe and the World'. We're particularly interested in presentations which provide insights and can stimulate discussion about alcohol in different cultural contexts, drawing on a range of disciplines and opening up debate about implications for policy and practice. Following the seminars, SHAAP will produce briefing papers, which will aim to capture the main themes and to communicate these to a wider audience. You can access reports from previous seminars here: [www.shaap.org.uk/alcohol-occasionals.html](http://www.shaap.org.uk/alcohol-occasionals.html)

**The 2015–2016 seminars will take place from 12.30–14.00 on the following dates**  
29<sup>th</sup> October 2015 • 8<sup>th</sup> December • 4<sup>th</sup> February 2016 • 1<sup>st</sup> March • 19<sup>th</sup> May • 14<sup>th</sup> June.

If you are interested in presenting your work, please email Eric Carlin, SHAAP Director, at [shaap.director@rcpe.ac.uk](mailto:shaap.director@rcpe.ac.uk) by 31<sup>st</sup> August 2015 with a proposal of no more than 300 words.