REFLECTION | REFLEXÃO

Images and social representations: photolanguage and photovoice in data production on health phenomena

Imagens e representações sociais: a fotolinguagem e photovoice na produção de dados sobre fenômenos de saúde

Imágenes y representaciones sociales: fotolenguaje y fotovoz em la producción de datos sobre fenómenos de salud

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ABSTRACT

Objective: to reflect on the use of photographs in the apprehension of social representations of phenomena in health care by applying the photolanguage technique and the photovoice method. **Method:** a reflective and theoretical study developed in two stages: literature analysis; and reflective analysis on the technique and method applied, based on social representations. **Development:** the analysis pointed out that photographs make it possible to capture the silent zone of representations and the dimension of affections, symbols, as well as that they are part of the methodological triangulation strategy to understand the multiple dimensions that contribute to the organization of the field of social representation of phenomena in health care. **Conclusion and implications for the practice**: photographs enhance apprehension of the figurative dimension of the representation, essential in understanding the elaboration of social thinking. The use of photolanguage and photovoice in the research operational practice contributes to the advancement of knowledge in studies of social representations in health care.

Keywords: Data collection; Photography; Nursing research; Qualitative research; Social Psychology.

RESUMO

Objetivo: refletir sobre o uso de fotos na apreensão das representações sociais de fenômenos na área da saúde, a partir da aplicação da técnica da fotolinguagem e do método *photovoice*. **Método**: estudo teórico-reflexivo desenvolvido em duas etapas: de análise da literatura; e análise reflexiva sobre a técnica e o método aplicados, pautados nas representações sociais. **Desenvolvimento**: a análise apontou que as fotos possibilitam captar a zona muda das representações, a dimensão dos afetos, dos símbolos e são parte da estratégia de triangulação metodológica para entendimento das múltiplas dimensões que concorrem para a organização do campo da representação social de fenômenos da área da saúde. **Conclusão e implicações para a prática**: as fotos potencializam a apreensão da dimensão figurativa da representação, essencial na compreensão da elaboração do pensamento social. O uso da fotolinguagem e do *photovoice* na prática operacional de pesquisa contribui para o avanço do conhecimento nos estudos de representações sociais na área da saúde.

Palavras-chave: Coleta de Dados; Fotografia; Pesquisa em Enfermagem; Pesquisa Qualitativa; Psicologia Social.

RESUMEN

Objetivo: reflexionar sobre el uso de fotografías en la aprehensión de representaciones sociales de fenómenos en el área de la salud, desde la perspectiva de la aplicación de la técnica del fotolenguaje y del método de la fotovoz. **Método**: estudio teórico-reflexivo desarrollado en dos etapas: análisis de la literatura; y análisis reflexivo sobre la técnica y el método aplicados, basado en las representaciones sociales. **Desarrollo**: el análisis señaló que las fotografías permiten captar la zona muda de las representaciones, la dimensión de los afectos, de los símbolos y forman parte de la estrategia de triangulación metodológica para comprender las múltiples dimensiones que contribuyen a la organización del campo de la representación social de fenómenos en el área de la salud. **Conclusión e implicaciones para la práctica**: las fotografías intensifican la aprehensión de la dimensión figurativa de la representación, fundamental para comprender la elaboración del pensamiento social. El uso del fotolenguaje y de la fotovoz en la práctica operativa de la investigación contribuye al avance del conocimiento en los estudios de las representaciones sociales en el área de la salud.

Palabras clave: Recolección de Datos; Fotografía; Investigación en Enfermería; Investigación Cualitativa; Psicología Social.

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INTRODUCTION

Social Representation (SR) is understood as a set of proposals and explanations that appear in everyday life in the course of interpersonal communications. In today's society, it is equivalent to the myths and belief systems of traditional societies; it can also be seen as the contemporary version of common sense[1].

The structure of SR has a dual nature: conceptual and figurative. The concept is capable of conferring meaning to an object that is not present, of symbolizing it; perception means recovery of that object, giving concreteness to it, tangibility. Therefore, SR makes every figure understand a sense and every sense a figure[1]. This process occurs through anchoring and objectification, mobilized by the individual facing something unusual.

Anchoring seeks to anchor strange ideas, to reduce them to common categories and images, and to place them in a familiar context[1]. Such mechanism tries to approach unknown situations, categorizing phenomena into already known classes and, based on that, conferring meaning to them. Objectification assigns an imagery dimension to the object presented to understanding; then, what was unknown becomes objective, assuming the contours of reality, with concreteness, palpable[1].

Thus, objectification naturalizes representation, limiting the object to the mental image. Naturalization of notions gives them the value of concrete, legible and usable realities in action on the world and on others. With this, the imagery structure of the SR becomes a reading guide, a reference theory to understand reality[1].

In light of these theoretical precepts, the starting point is the premise that apprehension of the SR should encompass two aspects: verbal and imagery. From this perspective, it is necessary to expand the methodological strategies of data production beyond those techniques based on numerical and written messages[2], with a view to thickening the analyses.

In view of this, this article highlights the use of images as a data source in SR research in the health area, especially through photographs. This is because images, when used in SR research studies, favor socialization of meanings and are active elements in their formation, since reality is not defined only by words[3].

In the case of the SR phenomena in the health area, previous studies have evidenced this strong imagery dimension, such as, for example, technology/care in the intensive care sectors, objectified in the image of "a seven-headed beast" for inexperienced nurses; or the SRs of food for adolescents, whose meanings are related to weight and health, in which being healthy is structured on the image of a thin/"strong" individual and fat objectifies the unhealthy person[4,5].

In an exploratory analysis of existing studies on the use of photographs for SR studies, in particular with the use of photolanguage and photovoice, the technique and method that are the focus of interest in this article, three productions on the use of photolanguage were identified. In this analysis, it was verified that the technique has been used as a group strategy in a therapeutic perspective, and as a data collection technique in research studies, illustrated by the survey of the SRs of older adults in rehabilitation about physical disability[6,7].

As for the use of photovoice, the review that analyzed publications on its use by nurses in health education stands out. Twenty-seven studies were collected, categorized into two thematic areas: health-disease transition and creation of favorable environments for health. None of the studies developed were based on the SRs[8].

This incipience regarding studies on photolanguage and photovoice at the interface with SR analyses, added to the fact that, in the experience of researchers as *ad hoc* evaluators, methodological weaknesses are observed in SR studies, mainly due to lack of coherence in the choice of data collection techniques and the elaboration of instruments: these are the arguments that justify such a study.

It is considered that, when analyzing the potential of photolanguage and photovoice from the theoretical dimensions of the SRs, the article in question contributes innovation to knowledge. In addition, studies with methodological instructions to the scientific community contribute to greater deepening of SR analyses, which enables advances in qualitative research in the health area and, in particular, in Nursing research, a discipline for the insertion of the researchers of this article.

The question is: How do data production techniques based on the use of images by photographs contribute to capturing the SRs of phenomena in the health area? Objective: to reflect about the use of photographs in the SR apprehension of phenomena in the health area, from the application of the photovoice method and the photolanguage technique.

METHOD

A theoretical-reflective study developed in two stages. Stage 1 was a literature review on the theme, in which an on-line exploratory survey of scientific articles that addressed data production techniques in SR studies was carried out, as well as on the existing possibilities of using images; and a manual search in a sectorial graduate library for theoretical and methodological books on SR and data production methodological strategies. The objective of this first stage was to assess the state of the art, analyzing the existing knowledge about photographs and SR. From this analysis, the first two sections of this article were built, presenting the theoretical and methodological aspects that support the application of photolanguage and photovoice, as possibilities of a data production technique and method in SR studies.

In Stage 2, the reflective analysis on the photolanguage technique and the photovoice method in the interface with the theoretical perspective of the SRs was carried out, which supported organization of the third section of the article. For this analysis, the concepts of silent zone of the SRs and of the affective dimension and figurative dimension of the SRs were applied, in addition to the definition of methodological triangulation and its use in social psychology. These concepts were used to highlight the theoretical potential of using photographs in the apprehension of the elements that organize SRs about phenomena in the health field.

To illustrate the theoretical arguments brought up in the reflections and demonstrate such potential for the application of photolanguage and photovoice in the research practice, the results of two previous studies developed by the authors using these methodological strategies were presented.

DEVELOPMENT

Photolanguage: Theoretical and methodological aspects

Photolanguage was created in 1965 by psychologists and psycho-sociologists as a tool to stimulate the discursive expression of adolescents with difficulties in expressing their experiences in a group. The positive result enabled its use in the training of adults, in companies, in the social area, either to start or end a group[6].

In the field of clinical care, it has been used with a therapeutic function in the psychiatric area by psychologists and nurses with groups of adolescents, psychopaths, older adults and drug users. In this case, the group has around eight participants who meet weekly for approximately one hour with the motto of a triggering question, which evolves with continuity of the work and the group's thinking[6].

The session starts with a question elaborated by the moderator and presented to the group that raises choice of the photographs. This question requires attention in its proposal, as it should not be too direct, long or complex. As for the photographs, they are brought to the group in the form of thematic dossiers with 48 photos, whose selection is made from previous groups that raise representations about the theme and, subsequently, the photographs are researched, tested in a new group, with selection of the most significant ones[6].

Based on the question, the photographs are placed on a table and the participants must choose the one that is most representative for them. The choice must occur in silence, by the look, so that all the photos remain available to the participants, without changing the chosen photograph. In the clinical groups, the moderator participates in the choice, as this influences how it is perceived by the other participants[6].

Subsequently, group exchanges take place. At this point, the participants present their photograph and explanations of their choice, and the others say what they see as similar or different from the photo. This game of listening and sharing their personal views of reality creates an associative chain of ideas that facilitates identifying exchanges and the transformation of perceptions/senses about the photograph[6].

The particularity of requesting the answer to a question through a photograph mobilizes thinking in images, which bring internalized images and the affections that accompany them, followed by thinking in ideas. This intermediate space between thinking in images and in ideas, when the participants talk about the other's photograph, favors articulation between the intrapsychic and the intersubjective[6].

Photolanguage has been applied in SR studies, as these, as organized sets of knowledge, are rooted in the unconscious, in an intrapsychic dimension and in social communications, in which beliefs, values, information, attitudes are shared[9]. As they are rooted in the unconscious, it is fundamental to use special techniques to capture these SRs, such as projective ones. Such techniques are able to access elements rooted in the psychic apparatus, making the unconscious conscious[9].

Projective techniques are divided as follows: thematic, which help individuals to reveal elements of conflicts, desires, reactions to the environment and defense mechanisms; examples: drawings, free word associations, interpretation of photographs, drawing a story with a theme; and structural, which do not appropriate people's living manifestation, but how they apprehend their subjectivity, such as classic Rorschach[9]. From this theoretical perspective, photolanguage is considered a thematic projective technique that can be performed individually when the intention is to capture the spontaneous dimension of the SR, which can be modified with techniques such as individual or group interviews.

Images mediated by the photograph are sensory, as they are part of the body experience. When a photograph imposes itself on the participants, captures them, it is no longer a simple photograph but an image, that is, it connotes something else in addition to the objective data it denotes. Consequently, the photograph mediates and transforms the imaginary, supports the projections, has a visible, real side, and is a metaphor of another reality[6].

Photovoice: Theoretical and methodological aspects

Photography can be seen in action-research studies as a catalyst for change, justified by the dual function that the photographic image can assume, either as a creative visual expression or as a means of portraying realities and contexts. In this sense, it can be used as an instrument that provides social researchers with the opportunity to access different realities, perspectives and participants' awareness of the social issues that surround them[10].

With regard to Photovoice, it is a method of photographic production that has been widespread in social and health research studies, as it makes subjects active in data production and research construction. This type of action-research allows expanding the scenario and the intervention possibilities for the participant and researcher, as it portrays realities. In addition to that, once registered, images cannot be silenced with words and, when shared and associated with experiences, they can resurrect subjectivities alienated by the social system[11,12].

It was created in the 1990s by researchers from the Universities of Michigan and London with a focus on the following triad: health promotion, community development and dialogical-critical education, based on the precepts of educator Paulo Freire[13].

It consists of a participatory strategy, in which people use cameras to document their realities. The central focus is to access other people's world views as closely as possible to their realities. The images and associated stories are developed in group dialog, where people's change experiences are shared[8]. This group

process mediated by photographs promotes critical thinking, from which the participants can become agents of change[14].

In Photovoice, photography is the instrument for "representing the perspectives of those who lead a life different from the means that traditionally have control of the world's images"[15:154]. The image photographed by those involved in the research serves as an alternative to the written record, which, by itself, promotes inclusion of the participants as informants and even as researchers[10].

Regarding the implementation and operationalization of Photovoice, the following steps are highlighted to be adapted according to the context of each study: 1-training phase, in which the researcher provides cameras and explains how to use them, clearing doubts without, however, limiting the participants' freedom at the time of photographic production; 2-photograph taking by the participants based on a guiding question; 3-disclosure of the photographs and feedback to the participants. The researcher can provide copies of the images to the participants, as per previously established agreement; and 4-Focus discussion groups, in which the participants present their photographs, acting as catalysts for reflection themes and expression of experiences and subjectivities[13].

In the focus groups, the participants are instructed to develop the following options: Selecting: choose the photographs that best reflect the needs and resources of the community or group that be included; Contextualizing: discuss or tell stories or experiences related to the meanings of the chosen photographs; Coding: identifying the issues, themes or theories that emerge in this discussion process[13].

The use of photographs to capture the SRs of health care phenomena: A reflection

Social psychology has paid little attention to the use of images, whether static (photographs) or dynamic (films), as research tools in identifying how people construct social reality. In this understanding, it is necessary to give visibility to the figurative component of the SRs[16]. This is because every representation has an objectified image, an imagery dimension of the social object that simplifies it and is naturalized as the real object itself. In this way, objectification establishes a nucleus of images that reflects a complex set of ideas[1].

This SR simplifying role conceals the assessment made about the social object, which can mask values that serve as a reference for the construction of the thinking of social groups. Thus, from objectification, the object gains truth value and resists attempts to question this veracity[17]. From this perspective, there are contents that can be masked by the research subjects, the SR silent zone.

The silent zone consists in spaces of SRs that are not easily expressed in daily speeches, as they are contra-normative, that is, they are not adequate to the current social norms. Therefore, there are what theorists call "masked representations", in which the elements that may conflict with the moral values of groups are concealed[18].

Consequently, in the context of research in SRs, it is assumed that the people investigated do not always say what they really think; it is relevant to access what is not said. In the health area, a number of studies have pointed to the silent zone in relation to sensitive phenomena, such as aging/rejuvenation, whose normative discourse on natural and healthy aging can mask cognitions related to the fear of aging and the practices adopted for rejuvenation; or HIV/AIDS for health professionals, in which the evoked terms "fear" and "prejudice" have a contra-normative character and can be constitutive of the silent zone[19,20].

The classic study on the SRs of madness is also illustrative about how social practices express beliefs, accessible through verbal manifestations, but also iconic, behavioral, gestural, ritual, routine, practical or artistic[21].

These theoretical aspects justify the use of photographs, either chosen or produced, as they provide an opportunity to understand the unspeakable aspect of the SRs by capturing its iconic dimension. The potential of photographs in capturing the silent zone could be seen with the application of Photovoice in a survey of 15 adolescents about their SRs about being healthy. In this previous research developed by two of the authors of this article, the theoretical premise was that there were aspects of the SR of this object (being healthy in adolescence) that were inscribed in the silent zone, because it encompassed more sensitive themes and marked by social values and norms, such as sexuality and drug use[22].

During application of the Photovoice stage, the adolescents were divided into two groups with a mean age between 11 and 14 years old to carry out the photographic activities, followed by the discussion stage in the expanded focus groups[22].

The use of Photovoice fostered understanding of the phenomenon of being healthy in adolescence, in addition to a politically correct discourse based on the scientific concepts of health maintenance, as well as on the knowledge shared with the family. From the photographs and group negotiation, the social practices emerged, in which friendship and group relationships guided attitudes towards their health[22].

In body care, the cult of the perfect body stood out, noting the lack of information regarding the long-term health consequences of the attitudes taken to obtain it. Such body image was built based on the representations circulating on social media, easily accessible to the group over the Internet. There was greater dissatisfaction among women, with more distorted ideas about the adequacy of their weight for their height, being those who dieted more to lose weight. Regarding physical activities, there was greater involvement on the part of men, due to the character of masculinity based on the definition and size of muscle mass[22].

As for the involvement of adolescents with healthy eating and with physical activity levels appropriate to their age, it was far from what is desired for a healthy life and for combating obesity. Physical inactivity was a concern in the participants, who preferred watching television and using the computer and/or playing video games[22].

In terms of alcohol use, women and men consume it in festive situations and among friends, with no limits for its interruption, with spirits being preferred by women and beer by men. Sexual behaviors, in turn, revealed lack of information regarding the risks of non-protection and, although the vast majority have not yet had their first sexual intercourse, the concern was about pregnancy[22].

The second possibility of using images is to consider their role in capturing emotions. The affective dimension is the basis of familiarity with the social belonging group. Thus, when an object provokes such a group, the subjects who identify with it want to participate in the conversation circuit mobilized by the object, to feel included, to be recognized, to be able to communicate using a common language. In this understanding, affections are essential to the elaboration of the SRs from this conversation, which organizes cognitions or evaluative behaviors[23].

Projective techniques make it possible to capture these affects, since with their use it is considered that questions and answers are not direct, entering the metaphorical field. The metaphor, instead of saying everything, simultaneously reveals and conceals, referring to the unconscious and to the affective-emotional. They are indicated when individuals have problems in the physical and/or psychological sphere (fear, rejection, death, sadness, self-image)[9].

In photolanguage, one of these projective techniques, the photograph as a mediating object becomes an image that mobilizes interior images associated and reconnected by the affection that sustains them, contributing to the expansion of preconscious activities[6]. An example of the potential of photolanguage was evidenced in a research study that showed the role of images in the construction of social memory in relation to cultural objects through the filter of emotions and representation systems. Social memory is understood as a type of study that seeks to discover not really how much is remembered of an event, but what is remembered and how memory is socially constructed, which ideological filters are used, which emotions are evoked and the interlocutors involved[16].

The study focused on the memory process of a major social event, full of communications and images, the attack on the Twin Towers on September 11th, 2001, 522 participants having been approached[16].

The subjects answered a questionnaire about mental images to remember/forget; and selected images in photolanguage groups from photographs most used by the media, to identify images that made a stronger first impression, negotiated in the group, as well as more representative images[16].

Emotions played a central role in selection of the images. The authors noticed that, in the selection of the five most remembered and most representative images, there was a linear normative sequence centered on the same images (aircraft collision with the towers). In the case of the five images to forget and of the most impressive ones, instead of the planes' crashes, the images of the victims (trapped in the towers, jumping to save themselves) appeared, from which emotions emerged, such as despair, anguish, sadness and horror[16].

The role of emotions in the selective construction of memory was confirmed and, with this, the importance of studying the iconic component of the SRs and their emotional impact, highlighting the methodological implications of this theoretical choice[16].

In the health area, several SR objects are covered with this affective charge, which mobilizes attitudes, such as leprosy, marked by the stigma that generates the patients' social dullness; euthanasia, which mobilizes the debate in the fields of health, law and religion based on social values and beliefs; and the mastectomized body for women, which associates negative representations with the appearance of the breast[24-26].

The potential of photolanguage to capture this affective dimension, essential in the SR elaboration process, can be seen in the study with patients with vasculogenic ulcers about their quality of life (QoL), carried out by the authors of this article. The research was developed more than three months ago with 30 patients with vascular ulcers from a Family Clinic. The choice of photolanguage was based on the assumption that the vasculogenic lesion refers to an imagery dimension of the body, which brings out identities and affections[27].

The technique consisted in showing the patients chromatic photographs that were related to elements that illustrated daily life and had links with QoL. The inducing question was as follows: What is your life like having to live with a wound in the leg? Time was provided for the patient to make this choice, and then the following questions were asked: Is this image positive or negative? What does it express to you[27].

The data showed that the phenomenon was immersed in an affective duality. This is because, when the patients were asked about the affective connotation that the chosen image expressed in relation to their life with an ulcer, at a first moment, most of them associated the images with positive affects, which revealed a normative scientific aspect, particularly in the images that alluded to eating and physical activity practices. However, in the explanations, the way in which the scientific is redefined in the social emerged, that is, the negative emotions and feelings caused by the losses arisen from the new life with an ulcer[27].

The most chosen image among the 30 participants was the one representing two baskets of vegetables and fruits, whose explanation related them to "good nutrition/healthy eating" that assisted in wound healing, a practice they sought to adopt based on the guidelines provided by the health professionals. On the other hand, they were concerned about eating food products that could harm them and, as a consequence, adopting a new lifestyle due to dietary changes was something difficult to deal with and implement[27].

Another image chosen was the one showing a group of people exercising in a public place. The patients initially conveyed the idea of physical exercise as important because of the benefits it brings to health. However, as it was not always possible to do so; they remembered their past physical capacity and the desire to rescue it. This return to functional capacity before onset of the ulcer brought to light the losses in relation to the practice of activities such as playing ball, walking, gymnastics or running.

In this sense, although physical activity itself was positive, when they referred to the present, negative affects arose because they could not perform it[27].

Data analysis showed that the patients used expressions such as: "I can't do it anymore"; "I'd like to do it again"; "I had to banish"; to refer to the changes to a new lifestyle, mentioning the past in relation to the present experience. Therefore, the affects that emerged from these changes, due to the losses experienced in relation to themselves, in the maintenance of self-care, and social influences guided the SRs about QoL and the practices articulated with it, which was captured by the projective technique.

The third possibility of using images in SR studies is by triangulation, which gained strength in Social Psychology from the advent of the socio-constructionist paradigm. Triangulation means validating the knowledge produced by crossing results obtained by different methods/techniques[28].

The Social Psychology of health, in which the subject and its social inscription (macrocontext) and the interactions established in its microcontext are important, has been developed in this perspective. Therefore, this contextualization in the understanding of health phenomena demands a methodological polymorphism[28]. The use of photographs can then be a complementary methodological strategy in SR research studies, seeking to capture the spontaneous dimension of the phenomenon investigated and the affects invested, while other dimensions of the SRs can be deepened through techniques such as interview and observation. With this, better understanding of the elements that organize the field of the SRs is allowed, a relevant aspect to be demonstrated in studies that use the SR procedural approach.

The triangulation potential to understand the macro-context and micro-context involved in the construction of the SRs of phenomena in the health field is exemplified in the study that investigated how SRs influence oncologists' communications and practices related to decision-making[28].

The authors combined qualitative and quantitative strategies: 1. Triangulation in collection – Field immersion to apprehend the natural categories displayed by physicians in real decision-making situations, used in conjunction with the literature to prepare the observation guide; observation with the guide; interview, with a script elaborated on observation and on the theoretical aspects; 2. Triangulation in the analysis – The physicians' statements during the meetings were coded, with statistical analysis of the frequency with which non-medical characteristics were appearing in the collective discussions; qualitative analysis for global understanding of the phenomenon; thematic analysis of the interviews complemented by the Nvivo software. There was also selection of an interview for interpretive phenomenological analysis, a method that has an epistemological root common to the SRs; and 3. Researcher triangulation – Researchers from different areas participated in the coding of the observations and in the verification of inter-examiner reliability in the coding, as well as in the thematic analysis phase[28].

The last phase consisted in crossing the qualitative and quantitative results. Triangulation made it possible to understand various aspects of the phenomenon (collection triangulation), providing data confirmation (analysis triangulation) and plausibility of analyses (researcher triangulation), refining understanding of the SRs of the phenomenon[28].

In the research on the SRs of QoL by patients with vasculogenic ulcers, there was also triangulation in collection, as photolanguage was used in conjunction with semi-structured interviews, and the analysis, with the use of thematic content analysis (photolanguage) and the Alceste software for processing the interviews. This triangulation made it possible to deepen the dimensions of information and social practices through interviews which, complemented by the affects and attitudes that emerged from photolanguage, delimited the organization field of the SRs about QoL[27].

Finally, in light of the figurative character of the SRs, the associations between figure/meaning and the potential of images in SR studies are highlighted. SRs allow interpreting images of the world and producing social images of the world. Such understanding is sent back to three analysis levels: perceptive, cognitive and symbolic[29].

In the perceptive, the imagery support has three properties: figuration, replacing certain object; its ability to generate emotions; and its ambiguity, that is, the meaning of the image is appropriated by the individual who perceives it. At the cognitive level, the image becomes a mental image, not as a simple visual image, but with an ability to associate the form (signifier) with a sense (meaning). In the case of the mental image, figurative and semantic elements are combined, meanings by words. At the symbolic level, certain words have the ability to evoke images. Thus, correspondence of the word to a mental image operates a symbolic process[29].

It is concluded that SRs can be expressed in the form of mental images that give concrete effect to the object. Activating multiple mental images results in the object's social image. In this perspective, it is fundamental to collect content related to images from the selection or expression of visual images[29].

CONCLUSION AND IMPLICATIONS FOR THE PRACTICE

The use of photographs in SR studies enhances understanding of their figurative dimension, which is essential to understand the social thought elaboration processes. The reflection in question pointed out some theoretical elements that support the construction of SRs that can be accessed by photolanguage and photovoice: the SR silent zone, the dimension of affections, the symbolic dimension, and the expanded understanding of the context that contributes to the organization of the field of phenomena representation in the health area, considering the application of photographs as one of the methodological strategies for triangulation.

It is concluded that photolanguage and photovoice are based on different principles, but converge as methodological possibilities in SR studies, a choice that should be guided by theoretical precepts. The use of these strategies in the research

operational practice contributes to knowledge advancement in SR studies in the health area.

The limitations are theoretical, related to the scope of the SR framework as one of the possibilities for analyzing the potential of the technique and method discussed in the article, among other existing ones.

AUTHOR'S CONTRIBUTIONS

Design of the reflection study. Nathália Nunes Gomes. Julyana Gall da Silva. Ana Beatriz Azevedo Queiroz. Márcia de Assunção Ferreira. Thémis Apostolidis. Rafael Celestino da Silva

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