
Visual Narratives of Care and Reproduction in Forced Migration: Women Displaced from Venezuela to Brazil

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Migration is deeply gendered, yet little is known about the lived experiences of displaced women or how they manage their reproductive health challenges. Here, we explore the meaning of sexual and reproductive health for displaced Venezuelan women in Brazil, using photovoice. This methodology revealed that women interpret ‘sexual and reproductive health’ in ways that go beyond medicalised understandings and include concerns more usually associated with ‘social reproduction’ or care work. Caring, for Venezuelan migrant women, is complex: many take comfort from their roles as carers, but they also experience depletion and anxiety. Our research suggests the need for wider understandings of what reproductive health in displacement means and for support for migrant women that goes beyond addressing their biological reproductive roles.

Keywords: care, gender, migration, photovoice, sexual and reproductive health, social reproduction.

Lived experiences of migration are gendered, and deeply impacted by racism, discrimination and classism (see Freedman, 2010; Arbel et al., 2014; Vanyoro et al., 2019; Mayblin et al., 2020). For this reason, there are calls to explore the experiences of displaced populations through their own knowledge production and voice (McMichael and Nunn, 2019: 239). Our study responds to this need by using the arts-based methodology photovoice to explore how displaced Venezuelan women and girls understand challenges to their sexual and reproductive health. Our argument in this paper is twofold: first, we show that arts-based techniques of engagement and enquiry enhance understandings of the lived experiences of Venezuelan migrant women, demonstrating that they are helpful in conducting participative research with groups labelled ‘vulnerable’ and pushed to the margins of the global political

economy. Second, we argue that migrant women interpret ‘sexual and reproductive health’ in ways that go beyond the medicalised understandings generally deployed by international agencies and NGOs. In particular, we found that migrant women also correlate reproductive health with issues of care and what is often understood as social reproduction, meaning the unpaid work in households and communities that falls disproportionately on women, impacting women’s health and well-being, and the value given to these ‘feminised’ tasks (True, 2019; Elias and Rai, 2019). The photographs and testimony provided by the women in our study reveal the emotional significance and importance that migrant women place on the care they carried out, but also the costs of caring in situations of precarity.

It is now widely accepted that engaging with the arts in political research can shake up what we think we know about politics, providing a different kind of knowledge and a different language with which to interpret complex and personal experiences (Bleiker, 2018; Harman, 2019; Callahan, 2020). Photovoice can provide the opportunity for groups invisibilised in politics and policy to share their perspectives on everyday struggles, on their terms and according to their interpretations and definitions. By using this methodology, we bring to the fore visual and narrative accounts of Venezuelan migrant women and their experiences in relation to social reproduction and its links to sexual and reproductive health. We draw attention to the ambiguity of ‘reproductive rights’, as a concept and in practice, and to the interplay between the emotional benefits that women in our study experienced alongside depletion as a result of caring for others. We apply the definition of depletion outlined by Rai et al., (2014: 86), referring to the harmful physical and emotional impact incurred by those engaging in social reproduction, as a result of the significant ‘gap between the outflows – domestic, affective and reproductive – and the inflows that sustain their health and well-being’.

There is a tension within mainstream policies of support for displaced women because they tend to focus on the challenges of accessing medical reproductive health and neglect the need for other policies that would mitigate more negative experiences of ‘migrant motherhood’ (Erel and Reynolds, 2018). We argue that as well as access to medical services for migrant and displaced women, there is a need for policies that redress the depletion associated with care and social reproduction, particularly in contexts of sociopolitical conflict and crisis (True and Tanyag, 2018; Rai, et al., 2019).

This paper is part of the UKRI-GCRF project Redressing Gendered Health Inequalities of Displaced Women and Girls in contexts of Protracted Crisis in Central and South America (ReGHID) led by the University of Southampton and the University of York in the UK, and by investigators in the Federal University of Maranhão and the Fundação Oswaldo Cruz/Fiocruz, in Brazil. The research took place between June and October 2021 in Manaus, Brazil, with 29 displaced women and girls between 15 and 49 years old (21 non-indigenous participants and 8 indigenous Warao participants). All participants gave written consent to participate and for their photographs to be exhibited, published and distributed by the research team. The project was approved by ethics committees in the University of Southampton and the Federal University of Maranhão.

Creative Methods: Understanding the Reproductive Worlds of Displaced Venezuelan Women through Their Own Eyes

The political and economic conflict that Venezuela has endured since the 1990s has led to increases in hunger, infectious disease, and maternal and infant mortality due to the deterioration and, in some cases, the collapse of public services and health provision (Kislinger et al., 2019). The Covid-19 pandemic intensified these challenges. Persistent and intersecting gendered socioeconomic inequalities disproportionately impact working-class Venezuelan women; according to Elfenbein (2019: 5), gender inequalities are embedded in cultural perceptions that reify working-class Venezuelan women as ‘altruistic mothers’ who care for their families through ‘home-making’ and unpaid labour.

As a result of these protracted crises, over seven million Venezuelans have left the country to seek shelter elsewhere, half of which are estimated to be women and girls. Most migrate to neighbouring countries in South America. We chose Brazil as a site to investigate sexual and reproductive health challenges for displaced women and girls for several reasons. Brazil receives the third highest number

Visual Narratives of Care and Reproduction

of Venezuelan migrants in the region, is host to the highest numbers of Indigenous Warao Venezuelan migrants and, on paper, provides universal health care as part of the constitutional entitlement that benefits nationals and non-nationals (Cintra et al., 2023; Do Carmo Leal, 2024) – although, the extent of provision and access is shaped by systemic biases of language, race, culture and gender. Such biases are particularly acute in the provision of sexual and reproductive health (Lamy et al., 2023). Furthermore, Brazil has created a programme of support for displaced Venezuelans known as *Operação Acolhida* (Operation Welcome), a federal initiative led by the Armed Forces and supported by the International Organisation for Migration, and the UN Refugee Agency. *Operação Acolhida* includes the provision of shelter and of essential and emergency healthcare. It operates in Pacaraima, Boa Vista, in the border state of Roraima, and Manaus, the second city of settlement for Venezuelan migrants (see ACNUR, 2022; Riggiozzi et al., 2023).

Photovoice is a participatory, arts-based methodology designed by Wang and Burris (1997), initially in the context of health research, and later expanded to other areas including violence and migration. It centres the visual and oral testimonies of research participants as the main way of knowing about their lived experiences; supports voices which are often ignored or silenced to reach policymakers; and nurtures empowered political identities (Evans-Agnew and Rosemberg, 2016). Our study, with its focus on gender and health, reflects the extended use of photovoice in health and migration (see Sutherland and Cheng, 2009; Catalini and Minkler, 2010; Lightfoot et al., 2019). Other photovoice studies have identified the importance of care as a determinant of health, including during migration, but they have rarely, if at all, explored it from the perspective of the caregiver, or recognised its full significance (Soriano-Ayala et al., 2019; Lögdborg et al., 2020).

Photovoice involves giving participants a camera and asking them to take photographs that respond to a specific theme. Through their photographs, they set the boundaries of what elements of their lived experience they consider important for others to see, effectively deciding which story to tell and how to tell it. Participants decide which photographs to take and subsequently which ones to share in focus groups; in these focus groups, participants provide both written and spoken testimony about their selected images, which may elicit group conversations amongst the focus group participants. In these ways, participants are, arguably, able to regain more control of the narrative than is afforded to them in traditional methods of investigation.

In our study, we worked with 29 women and adolescent girls, in four different groups. All had arrived in Brazil between 2018 and 2021 and were living in Manaus. We located our research in Manaus because of its significance in terms of settling Venezuelan migrants. On the one hand, we could reach women living in different types of accommodation, comprising *Operação Acolhida* shelters, government-run shelters for Warao migrants, and private accommodation. We could also ensure greater diversity in our sample, reaching women with different intersectional characteristics, including ethnicity, age and socioeconomic background, and at different points in their migration journey. We approached participants either directly or via a local NGO, *Hermanitos*, a key support organisation for Venezuelan migrants in Manaus. Although we undertook this research while the impact of the Covid-19 pandemic was still very much being felt, the challenges that participants in our study shared either pre-dated or appeared to have no direct connection to the pandemic.

We held an initial meeting with participants to explain the project, and discuss both policy-based understandings of sexual and reproductive health and participants' own interpretations of sexual and reproductive health. We also outlined the ethical conditions and practical concerns and sensitivities associated with taking photographs of human subjects. After initial meetings, groups of non-Indigenous participants were given two weeks to take photographs of challenges to sexual and reproductive health during migration, before reconvening in focus groups to discuss their photographs through written and oral testimony. ReGHID's local researcher in Manaus, and co-author of this paper, spent a longer time with Warao participants, visiting their shelter weekly over a period of eight weeks. This helped to develop rapport and trust, as well as aiding with practical challenges including Warao participants' limited familiarity with cameras, and the language barrier between them and the research team.

Many of the photographs that participants chose to share in focus groups have also been collated in a photobook (Riggiozzi et al., 2023). In this paper, we focus on a sub-set of those photographs that, as emerged in the focus group discussions, challenge traditional understandings of sexual and

reproductive health and capture the way in which ‘reproduction’ reveals the complexities of caregiving and social reproduction in migrant women’s everyday lives.

In this paper, we modify the approach taken in most photovoice projects (Catalini and Minkler, 2010; Wang and Hannes, 2020) by focussing primarily on the photographs, though we also support our interpretations of these photographs with analysis of testimony from participants. These testimonies are analysed in more depth in the photobook produced for this project. Further information about participants’ experiences can be found in the photobook, including sexual and gender-based violence, access to services, and their experience of migration more broadly (see Riggiozzi et al., 2023). We centre on the photos for three main reasons. First, images have the potential to elicit emotional and visceral responses in the viewer and have ‘transformational potential’ (Danchev, 2014: 2) by fostering an ‘open-ended level of sensibility about the political’ (Bleiker, 2009: 2). Photographs can generate a tangible understanding of the emotional nature of a particular moment, and transmit those sensations to those who were not present when this moment occurred, provoking a continual process of engagement with the viewer (see Catalini and Minkler, 2010; Sutherland and Cheng, 2009; Lightfoot et al., 2019). This is important given our desire here to deeply understand the lived experiences of women on the move and produce transformative knowledge.

Second, images make the invisible visible. The photographs presented here provide important information about the everyday experiences of displaced women. Many contain elements that were not explicitly discussed in the focus groups, but which illustrate the context in which these experiences take place. They allow us to interrogate silences and omissions and visually explore the impact of environmental conditions on women’s health and well-being. The process of taking photographs may also help the photographer see things differently or notice what they had previously normalised, since photography encourages reflection. This is captured by a participant in a photovoice study by Leung et al. (2015: 10), who observes that when ‘taking photos, you need to have your own feelings’.

Finally, in our approach, we return to the question of whose voice is privileged within photovoice (Evans-Agnew and Roseberg, 2016). Funding, research constraints and biases mean that marginalised voices are often placed into conversation with other – often louder and more confident – voices, diluting their original contribution. We have chosen to return to, and centre our analysis on, the photos taken by participants precisely because the photographs evidence where participants wanted to begin the conversation about their experiences, and what they considered urgent and important. We believe that by focusing on the images produced by displaced women, we stay true to the boundaries they themselves intended to set and the experiences or emotions that they wanted to share.

We analysed these photographs taking into consideration the sites where ‘the meanings of an image are made’ (Rose, 2016: 24); these are (1) production, (2) image, (3) circulation and (4) audiencing. We do not consider circulation given that the research team retains control over image circulation. In each of these sites, technical, compositional and social elements impact upon the images (Rose, 2016). While the sites and the elements overlap at each stage, it is valuable to approach the analysis in this way in order to best understand the underlying complexities of the photographs and the many ways that meaning is made within the images.

We acknowledge that everyone who looks at these photographs will interpret them from their own position and will read them intertextually, in context with their own experiences. Part of our role as researchers is to be cognisant of this, and to enable ‘effective exchange’ through ‘a process of translation, which facilitates cultural communication while always recognising the persistence of difference and power between different ‘speakers’ (Hall, 1997: 11). As authors, we are all women and we broadly share similar educational backgrounds, but, we have different nationalities and first languages; our original social class positions are different, as are our ages, academic roles, research specialisms, experiences of migration and caregiving. We also had different levels of interaction with the participants. We recognise that these factors have all shaped our own engagement with the photographs. Nevertheless, we agreed on the dual interpretation we present here, which privileges both the emotional significance of care and reproduction and the intense depletion it engenders.

From Biological to Social Reproduction: The Everyday Lives of Forced Women Migrants

As Bastia and Piper (2019) note, South–South migration remains poorly understood and feminist scholarship on migration is still limited. Listening to displaced women and girls, centring them as agents and taking their perspectives seriously is essential to understand the gendered dynamics of migration, including the gendered inequalities and harm women and girls experience, and how they respond to them. In our research, we particularly wished to understand the meanings given to sexual and reproductive health in conditions of forced migration, recognising that challenges would not be simply medical ones, but that social life in such conditions would also depend on large, undervalued and under-supported care economies.

In health studies, understandings of reproduction have centred on bodies and biology. Reproductive health is interpreted to mean access to a range of medicalised services such as family planning and contraception; the right to accurate information; maternal and neonatal health; treatments and prevention of sexually transmitted diseases; and treatment of illnesses that affect sex or reproduction. The influential Guttmacher-Lancet Commission reaffirmed this medicalised understanding while also incorporating a focus on rights (Starrs et al., 2018). But health studies have tended to ignore social reproduction. Feminist political economy, by contrast, acknowledges the biological processes of human reproduction but focuses chiefly on the gendered provisioning of care work, and its role in sustaining economies and societies over the long term. Care provision in all societies is highly feminised, and often racialised and classed. Whether paid or unpaid, care is always under-valued and under-recognised. Feminist research on social reproduction has identified how care work is integral in the global capitalist economy, and is pivotal in explaining lived experiences of gendered inequalities (Folbre, 2006; Elias and Roberts, 2018; Bakker and Gill, 2019). Feminist political economy has also drawn attention to the consequent costs of care to women in income, recognition, dignity, self-worth, physical and mental well-being. Rai et al. (2014) conceptualise these losses as ‘depletion through social reproduction’. Recognition of depletion through caregiving, especially in extreme situations, is increasing (Brickell et al. 2020, Grugel et al., 2022), and we agree with Rai et al. (2014) that this is essential in order to ensure that strategies are adopted to address it.

Because our research was framed conceptually by feminist political economy as well as health studies, we anticipated that our discussions would provide evidence of gendered depletion through care. We found that the displaced women we were working with understood ‘reproduction’ to refer almost seamlessly along a continuum that ranged from sexual and reproductive health as it is traditionally defined in health research – and how it was presented it to the participants in our study in our initial meetings with them – to an understanding that incorporated care, mothering and the work of sustaining others. The distinctions between understandings of reproduction as a biology-led process, and social reproduction, blurred in the everyday lived experiences of the women we worked with. When visually documenting and discussing their experiences of sexual and reproductive health and rights in displacement, Venezuelan women did not simply deal with the absence of services, or the erosion of dignity and personhood when using these services. Instead, they documented the complex emotions and bodily experiences associated with unpaid care and the gendered responsibilities women perform day-to-day (Sylvester, 2001; Enloe, 2014), based on a clear understanding that reproduction is life-long work, both biological and social in nature.

Migrant women’s access to (biological) reproductive support is explored at length in the literature and elsewhere by the authors (Riggirozzi et al., 2023; see also Irons, 2022). We found, however, that participants framed their discussion of sexual and reproductive health within a context of social reproduction and everyday acts of unpaid labour and care. Connections were made between care and sexual and reproductive health in participants’ photographs and testimonies, pointing to the importance placed on both meanings of reproduction. We did not anticipate, however, the extent to which the narratives we encountered would be composed of reflections on the value, rather than the costs, of care. The women in our study repeatedly described the positive feelings that caregiving in forced migration generated. They did not see themselves as victims or as exploited in their caring roles, although they recognised that the circumstances in which they carry out caregiving are risky, exhausting and limiting, and that this was heightened by displacement.

As such, our research echoed not just work on social reproduction but also sociological scholarship that identifies how women in particularly challenging circumstances (such as forced displacement) experience comfort, love and dignity through investing emotionally in socially reproductive work, often because it provides them a sense of worth and value at a moment of heightened insecurity and even dehumanisation (Christian and Dowler, 2019). As Boccagni and Baldassar (2015) show, migrants actively seek ways to re-embodiment their emotional well-being in places that are unknown and sometimes hostile. Ensuring a continuity of care and recreating the familiar emotional bonds on which care work frequently depends may offer a route to imagining a future in ways that have continuities with the past. This may be particularly so in cases such as ours, where Venezuelan working-class women have been instructed throughout their lives that caring for others is essential to their identity (Elfenbein, 2019) leading to 'matricentrada' familial norms centred on motherhood as sacrifice and provision for others. Women may also trust more intensely the familiar and the (gendered) family in circumstances that involve external 'othering' such as migration (De Souza, 2004). In this sense, unpaid care within the family may appear as a source of comfort and pride or even, as Erel et al. (2017) claim, an expression of belonging and presence in a new place. In short, care emerged in our research as central to conceptualisations of reproduction.

In what follows, we share a selection of photographs and testimonies that capture these complexities and juxtapositions in migrant women's everyday lives. As we explained earlier, our analysis of these visual narratives draws on the framework developed by Rose (2016), which allows us to understand the multiple ways that meaning is made through the photographs taken by participants. We reference this framework alongside our interpretation of the photographs in order to support our arguments regarding the meaning produced in the photographs.

Social Reproduction in Focus

Site(s) of Production

The social, cultural, economic and political conditions within which a photographer is operating influence in a practical sense what is 'visually possible and what [is] impossible' and contribute to 'the social and /or political identities that are mobilised' through the photographs they take (Rose, 2016: 27, 30). Analysing the conditions under which a photograph is taken can reveal something of the everyday life and opportunities afforded to a photographer; furthermore, where and under what circumstances a photograph is taken is a crucial determinant of how the final image looks and, by extension, the impact a photograph may have on its audience. In the context of this study, this can help make tangible the complex relationship between depletion through social reproduction and, at the same time, the potential to find comfort in caregiving that participants appeared to experience.

All of the images we analyse here were taken in Manaus, the site of our fieldwork. Figures 1–3 were taken by displaced non-Indigenous Venezuelan women; Figure 4 by a displaced non-indigenous Venezuelan teenager; and Figures 5 and 6 were taken by two displaced Warao women. Most of the photographs were taken in the shelters where the participants were living temporarily at the time of their involvement in this research. Two of the photographs were taken by a participant who was not living in a shelter at the time, and hers are the only photographs that were taken in outdoor spaces not part of the property of the shelters.

The participants took photos in what appear to be their everyday surroundings, including the shelters that are their temporary homes, a playground and an unidentified public space. These are the places where women live out their everyday routines. It is in these spaces that women cook, clean, care for and play with their children, and interact with other displaced people and members of the host community. In structural and economic terms, these spaces are sites of poverty and precarity. Displaced Venezuelan women and girls often live for a time in a state-sponsored temporary accommodation, which can be insecure, impersonal and uncomfortable, exacerbating the pressures and lack of control that women experience as caregivers, intensifying depletion and contributing to the increased importance and reliance placed on repeated and familiar routines of love and care.

Figure 1. Violencia y Abuso (Violence and Abuse)



Source: photograph by Briyis

Through taking these photographs, the participants share insights of their knowledge ‘from the margins’ (hooks, 2014). As hooks argues, knowledge deriving from the lived experiences of those who do not occupy politically, socially or culturally ‘central’ positions can be particularly deep and holistic because people living in multiple oppressions see and experience complex realities. The photographs reinforce participants’ social and political identities as people who possess valuable knowledge about caregiving and social reproduction on the move, knowledge which those occupying a ‘central’ position cannot. Because the participants in this project took photographs of moments of their own lives, which they then explained and contextualised for us, we recognise them as experts in their own experiences of caregiving and social reproduction.

To an extent, the situated knowledge emphasised in these photographs underscores participants’ gender, social class, and their migrant status. We explicitly invited the participants to be part of this study *because* they were Venezuelan migrant women, and we encouraged them to photograph things which emphasised these elements of their identities, specifically, what they felt represent challenges to their sexual and reproductive health from this position as women and girls on the move.

A final element made tangible through an analysis of the site of the production of these photographs is how women on the move may experience time in relation to caregiving. Caregiving and social reproduction is time and labour-intensive, and it is disproportionately carried out by women: women and girls do at least 75 percent of unpaid care work across the globe, to the (conservatively) estimated monetary value of at least US\$10.8 trillion annually – a figure ‘three times the size of the world’s tech industry’ (Oxfam, 2020: 10). Women living in poverty and marginalised communities, especially in locations lacking infrastructure, policy support and technology, spend more time on unpaid care work than better-off women, and more than men in the same communities (Oxfam, 2020). Feminist scholars increasingly address the relationship between time, care and health (Elias and Rai, 2019). In our case, the time women’s time spent on paid and unpaid care labour will have impacted upon the time that they had to participate in this project. Time undoubtedly shaped where women took photographs, whether the photos were posed or not, if they included props or items that would have required purchasing and setting up. As a result, in most cases, the photographs are snapshots of moments that the participants just happened to be living, as opposed to being the result of planned photo shoots.

Figure 2. Amor Incondicional (Unconditional Love)



Source: photograph by Royra

Site of Image

Caregiving and social reproduction is consistently undervalued, unrecognised, and made invisible through processes of normalisation, which render it apparently too obvious, ‘unskilled’ or ‘natural’ to be remarked upon. In fact, care and social reproduction is complex and demanding, and the emotional and physical impact on caregivers – and the level of depletion they then experience – is intensified by external political, economic and social conditions. The photographs here expose, both compositionally and metaphorically, the different and sometimes contradictory layers and juxtapositions of caregiving. In part, they evidence the physical conditions within which displaced women and girls carry out caregiving and social reproduction. However, these conditions are presented, both literally and figuratively in the testimonies and photographs, as backdrops to the relationships developed and maintained by participants through everyday acts of love, care and survival. Here we argue that the photographers foreground their roles as caregivers and emphasise the ways that care can be a source of strength, determination and comfort throughout the difficult conditions that they identify as part of the migration experience.

Figure 3. La sonrisa que llena el alma (The Smile that Fills the Soul)



Source: photograph by Royra

Figures 1 and 2 place affective bonds between adult women and children at the centre of the images. In Figure 1, a woman envelopes a teenage girl in a close embrace; in Figure 2, a woman and a little girl sit together closely, looking intently at each other, each gently cupping the other's cheek. The physical similarities between the women and children in both photographs, and their respective ages, suggest that these are photographs of mothers and their children, or perhaps aunts and their nieces. We are drawn to focus on the women and girls almost to the exclusion of the other elements of the photographs. In the case of Figure 1, this is primarily because both the woman and teen are looking directly at the camera, one confidently, the other peeking out from behind the older woman's arms. Our eyes focus on them because they are at the centre of the photograph. In Figure 2, the woman and child fill the frame, dominating the image against the backdrop of a clear blue sky. Both of these photographs are posed, but neither seems exaggerated or uncomfortable. The expressions on the women's faces and their body language seem tender, warm and natural.

Figure 4. Cara Vemos Corazones No Sabemos (We see the Faces, But Do Not Know Their Hearts)



Source: photograph by Eolannis

Figure 5. Untitled



Source: photograph by Dolores

Figure 6. Untitled



Source: photograph by Alenia

The photographs differ in how the colours, backgrounds and locations shape the mood and emotional experience represented. The participant who took the photograph Figure 1 has altered the camera settings so that the background is in black and white, and only the figures of the woman and teen are in colour. An analysis of the image from background to foreground also shows worn, metal bedroom furniture, cabinets that look like lockers, and a thin mattress with no pillows or bed sheets; the harsh appearance of the room is emphasised by greyscale colours in a clear contrast to the more compassionate and colourful look of the women and adolescent girl at the centre. Figure 1 was taken inside the shelter where the participant was living at the time. In contrast, Figure 2 was taken in a public space by a participant who no longer lived in a shelter. It emits peace, warmth and tranquillity, appearing to have been taken at sunset on a warm day, near calm water and lush vegetation.

The short written testimonies that accompany these photographs evidence this mixture of hardship and the challenges of care in displaced settings. Briyis commented that '[her] challenge was being vulnerable with [her] family', and Royra wrote that, 'many of us women emigrate with our children and when we needed someone we did not have anyone, we only had our children.' In both of these cases, there is a sense of loneliness and a need or expectation that they must remain resilient, but they also echo the value placed on their role as mothers.

In Figure 3, a little girl grins joyfully while playing on monkey bars at sunset. This is a spontaneous photo was taken by the child's mother. She has captured her daughter looking delighted, carefree and unselfconscious. In Figure 4, we see a posed self-portrait of a teenage girl, the young woman also looking confident, self-assured, and healthy. The bright colours, warm light and bold appearance of the girls in both photographs contrast with the backgrounds, which betray the socioeconomic conditions that they are living in. The apparatus in the park where the child plays in Figure 3 is, despite its bright primary colours, derelict, broken and rusty. The wall behind the teenager in Figure 4 is the stark and uninspiring exterior of one of the buildings in the shelter where she was living at the time.

The power of these photographs is that they bring into focus the ambiguities and juxtapositions of care. The daily routine of social reproduction is non-negotiable, whatever the conditions and locations

or the challenges that are posed externally to being a 'good mother'. Yet the photographs actively seek to foreground and mirror the social and cultural messages Venezuelan women have traditionally received about their role as carers and the unspoken assumption that mothering means prioritising having healthy, happy, well-fed children and dependents, whatever the costs. As Royra explained in her written testimony:

'The joy of seeing your son or daughter smile is something that fills your heart. I had to leave my daughter for a time and I only saw her smile in photos, but now that I'm with her I capture all of her smiles.'

What we see here can be interpreted as a vision of strength, and a connection with home, family and community that migrants in other studies have emphasised as having positive health outcomes (Soriano-Ayala et al., 2019; Lögdberg et al., 2020). During our focus group session, the teenager in Figure 4 spoke positively of her relationship with her mother and the care she receives from her, and the image she chooses to portray of herself underscores this. In another focus group session, the participant who took the photograph in Figure 3 spoke consistently of how her child's happiness is more important to her than her own. Still, the conditions surrounding the care foregrounded in these photographs are quite bleak, though often they were left unremarked in the background – both metaphorically and literally – in these photographs and focus group discussions. Behind the happiness, they seek to convey is a struggle that unless addressed, produces negative outcomes for caregivers (Riggirozzi et al., 2023).

Finally, Figures 5 and 6 illustrate elements of care and social reproduction from the perspective of two Warao women. What is striking in both of these images is how culture and tradition are reproduced through essential, gendered everyday actions that have been performed throughout the migration journey. In Figure 5, a middle-aged Warao woman sits on a plastic chair, wearing a mix of traditional and Westernised clothing, holding a half-finished craft in her hands and looking directly at the camera. In Figure 6, we observe two plastic bowls containing homemade food, set on a tiled floor. Almost out of shot is a small, dirty, pink, child's shoe, which from its style and colour we can infer is for a girl. Read together, the photographs show layers of caregiving and social reproductive responsibilities. In Figure 6, we see the multitasking involved in caring for young children through glimpses of cooking, cleaning, dressing, and tidying. We see evidence of intergenerational reproduction of traditional culture, past, present and future, as well as the cultural and gendered roles amongst the Warao groups, where women cook the same food that their female ancestors cooked, and which they teach their girl children to cook (Riggirozzi et al., 2023). In Figure 5, making this traditional craft is necessary on the one hand because it can be sold to generate much-needed income; but, similarly, it is also a way of reproducing traditional culture.

As with the other photographs discussed here, the backgrounds of the photographs contrast with the evidence of the reproduction of traditional culture and gendered roles foregrounded in the images. The solitude of the woman in Figure 5 is striking, especially given the communal nature of Warao living (ACNUR, 2021; Marinho Cirino and Kuner, 2022). The image of food in Figure 6, meanwhile, is central to Warao culture, and participants repeatedly emphasised, in their photos and testimonies, the difficulties they experienced in accessing the food that was culturally important for them and their families and the cooking facilities to prepare it appropriately (Riggirozzi et al., 2023. See also ACNUR, 2021; Marinho Cirino and Kuner, 2022).

In all of the photographs analysed here, stark, impersonal backgrounds frame emotive moments of caregiving and social reproduction and acts of love, in ways which mark profound absences and presences. We can infer that the conditions under which displaced women and girls engage in caregiving and social reproduction are likely to intensify the depletion they experience: the backgrounds illustrate the poverty of the conditions in which care is delivered. They reveal how, on the one hand, these are spaces where displaced women and girls are subjected to cycles of everyday and sometimes seemingly mundane direct and structural gendered and racialised violence (Christian and Dowler, 2019; Mayblin et al., 2020). Mayblin et al. (2020: 109) argue that for displaced people, 'marginalisation is so often experienced and felt at the banal level – eating, washing, travelling and socialising', and Christian and Dowler (2019: 1069) argue that the cumulative impact of this sort of violence levelled against displaced people has significant negative health outcomes. Despite this, at the centre of these photographs taken by the women we worked with are loving bonds, care, comfort, strength, and a sense of permanence in transit, echoing the fact that, for many, providing a positive and secure future for their children was

Visual Narratives of Care and Reproduction

the main reason they migrated, and why they persevered despite many of the difficulties they faced. Caring for and protecting their children was a source of worry, but also a source of strength and joy.

Site(s) of Audiencing

The term ‘audiencing’ refers to ‘the process by which a visual image has its meanings renegotiated, or even rejected, by particular audiences watching in specific circumstances’ (Rose, 2016: 38). There is never a right, wrong, singular or fixed interpretation of images: ‘meaning has to be actively ‘read’, and this occurs multiple times as multiple people encounter images in different contexts and at different social, political, historical junctures (Hall, 1997: 32). The meaning found within images at different sites of audiencing matters because it has real, tangible effects on people, since it contributes to influencing behaviour, actions or policy towards them (Hall, 1997; Ahmed, 2004). In the section above, we laid out the meanings we have attributed to these photographs as one particular audience, a feminist research team who primarily see these photographs as data collected within an academic research project, supported by the testimonies of the photographers themselves. In this final section, we briefly analyse how presenting the photographs in this paper may impact the meanings attributed to them.

The style of these photographs and the context in which they were taken aligns them with the genre of documentary photography, which ‘originally tended to picture poor, oppressed or marginalised individuals, often as part of reformist projects to show the horror of their lives and thus inspire change ... documentary photography usually pictures the relatively powerless to the relatively powerful’ (Rose, 2016: 28–29). Documentary photography is one of the three core elements which underpinned the conception of photovoice, which is intended to be an emancipatory methodology driven by a social justice and transformative agenda (Wang, 1999). Both the documentary photography genre and the photovoice methodology imply that the participants are part of marginalised populations, and in contrast, those to whom the research is presented occupy positions from which they can help influence change at empirical, political or other levels. This indicates that we must be aware of the limitations of the emancipatory potential of research, given the context of structures of global inequality and power within which research is carried out. What we find productive to address here is our responsibility as feminist researchers to honour the voices of the participants as closely as possible, in a way which sufficiently contextualises them to facilitate the development of knowledge and policies which can directly benefit displaced women and girls.

We have, therefore, attempted to draw out the complexities and contradictions in caregiving and social reproduction that the participants expressed through their photographs, trying to illuminate the contexts in which women engage in caregiving, without losing sight of the humanity of this experience. In this way, we aim to contribute to producing transformative feminist scholarship, which centres women as agents in their own lives, and attempts to redress everyday power imbalances.

Conclusion

In this paper, we set out to show that creative, arts-based techniques of engagement and enquiry are a valuable and important way to support the development of transformative research. We wanted to centre the knowledge of research participants by documenting and exploring their visual interpretations of their complex, lived experiences of sexual and reproductive health in displacement, and as such, help to deepen our collective understanding of reproduction.

Through photovoice, we found that Venezuelan displaced women regarded sexual and reproductive health to be somewhat different from the medicalised understandings generally associated with it. They were, in fact, taking a broader interpretation of ‘reproduction’ and one perhaps more akin to the way the term is used by scholars of social reproduction than health researchers. ‘Reproduction’ was understood to combine both biological needs, rights and experiences and the social roles of being a mother and carer – lived experiences, which were understood to be seamlessly and intimately related to each other. Furthermore, the photographs demonstrate some of the complexities of caregiving in displacement. The women whose photographs we present here see their affective relationships and

caring roles in social reproduction as sources of strength, and even as areas of autonomy in otherwise disrupted and insecure lives. But as their photographs and testimonies demonstrate, this takes place in contexts that can intensify depletion.

We argue that greater efforts must be made in academia and policy, especially in the field of women's health, to acknowledge the blurred boundaries in the lived experiences of many women. Policy should logically support displaced women to have choices as to whether and how they want to engage caregiving, as well as the provision of unbiased and empowering information on contraception and other essential health provision. Doing this means ensuring that women have sufficient social, economic and personal security to provide care in ways that allow them to feel strength, love and joy in these roles, rather than experience disproportionate stress and depletion.

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Data Availability Statement

The sensitive nature of the data means it is not publicly available.

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