considering both the limitations of this system and the possibilities for extending it in future research.

Student Nurses' Perceptions of Dignity: An Innovative Use of Photo-Elicitation Within a Nominal Group Technique

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Photo-elicitation is a technique involving the use of photographs in an interview setting. It was selected as a key component of the nominal group technique (NGT) in this study. The NGT consists of four key stages to establish group consensus: silent generation of ideas, sharing of ideas, group discussion, and individual voting and ranking. The application of photo-elicitation in this doctoral study used a suite of preexisting images with five nominal groups of student nurses to explore their perceptions of dignity. The decision to incorporate photo-elicitation into the NGT was guided by the complex nature of the concept of dignity and the need to bridge the gap between the participants' perceptions and what they could articulate. The literature suggests that photo-elicitation can help overcome any perceived need to say the "right" thing? and can evoke a more authentic and spontaneous response by connecting with the unconscious. Furthermore, images are thought to stimulate broader discussion and reduce the awkwardness of the research setting. This paper will outline the practical application of photo-elicitation within NGT in this study. Participants were invited to select an image that captured something of the meaning of dignity and to explain their choice in writing during the silent generation stage. Images were available from the outset, and this was found to enhance participant engagement. In utilising photo-elicitation in NGT, participants were enabled to generate rich responses to a complex concept.

Sharing Stories: Engaging Underserved Youth and Community Members in Dissemination Efforts

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Translational research is needed to substantially affect health behavior change. One approach is to engage individuals in the process of identifying and prioritizing needs and expanding community capacity through community-engaged research. Underserved, inner-city youth enrolled in a weight management program and their parents participated in a community-engaged qualitative study to explore the barriers and facilitators of weight throughout their daily lives. Primary emphasis was on access to nutritious foods and engaging in physical activity. Data were collected using photovoice as a data collection approach and semistructured interviews were analyzed inductively and deductively using thematic analysis based the levels of the social ecological model. Community members, youth participants, and their parents partnered with researchers to identify and implement a variety of dissemination methods to increase community awareness of the realities these young people face regarding health behaviors. Dissemination included traditional modalities as well as an art exhibition, presentation at school board meetings, dialogue with community stakeholders, and the use of data as an educational tool to increase awareness of the contextual factors influencing health promotion among an array of health students. Youth actively participated in sharing their stories and increasing awareness of factors affecting their health. Moreover, their involvement identified existing resources to be leveraged to expand community capacity in addressing the health needs pertinent to this community. Lessons learned from this research can be utilized by other research and community stakeholders to address community health needs and recognize community members as experts of their lives and their communities.

Collaborative Ethnography: Identifying Implicit Processes Influencing THRIVE

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The Trial of Healthy Relationship Initiatives for the Very Early-years (THRIVE) is a three-arm randomised controlled trial (RCT) for mothers identified as vulnerable in pregnancy and their babies who are at high risk of maltreatment. The RCT is evaluating the efficacy and cost-effectiveness of two antenatal and very early postnatal interventions, Mellow Bumps (MB) and Enhanced Triple P for Baby (ETPB), for improving both mother–child interaction and maternal mental health. THRIVE's realist process evaluation is critically examining (1) the mechanisms by which MB and ETPB work; if they do, who they work for and how; (2) how faithfully MB and ETPB are being implemented; and (3) the contextual factors that are necessary for the programmes to function or that might prevent them functioning. Complex and interdependent dynamics of context, practice, and agency can remain "hidden" in conventional reporting of trials. The process evaluation includes ethnography, using participant observation and multiperspective serial interviews, to make these complex processes more explicit. RCT researchers and fieldworkers were also encouraged to develop "ethnography skills" and were asked to reflect on, and write about, their interactions with key respondents and observations in different trial settings (e.g., clinics, participants' homes); ethnography thus became a collaborative enterprise. Studies of implementation rarely present "thick" description which impedes their ability to draw conclusions on how local contextual factors contribute to intervention outcomes. Collaborating in ethnography, and having many eyes and ears in the field, as opposed to just one trained ethnographer can elicit critical details needed to produce these thick descriptions.