
Intergenerational Photovoice Projects: Optimizing This Mechanism for Influencing Health Promotion Policies and Strengthening Relationships

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Intergenerational photovoice groups are promising for promoting health through the topic that is explored and through group dynamics that can foster healthy relationships and communication. To investigate the potential benefits of intergenerational photovoice projects, photovoice groups were conducted in urban Minnesota, United States, and in rural Morelos, Mexico, between 2009 and 2012 with Mexican-origin adults and their adolescent relatives. Seven photovoice groups of adult-adolescent dyads met for eight sessions and developed exhibits highlighting their views on health and migration and made policy recommendations, using messages conveyed through their words and photographs. Informal process evaluation and focus groups were used to elicit feedback about photovoice project participation. Photovoice project themes were descriptively analyzed. Focus group evaluation data were thematically summarized, and facilitator reflections were descriptively summarized to identify factors associated with intergenerational photovoice groups. Seventy-five participants were recruited. Photovoice themes represented effects of migration on health, family, and well-being. The following two evaluative themes were identified: (a) participant sentiments about the benefits of photovoice participation and (b) facilitator observations of intergenerational photovoice group benefits

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and challenges. Participants described opportunities to learn new things and barriers to healthy relationships that the project was eliminating by providing them with time to work together. Used in health promotion, photovoice is a valuable tool that contributes to understanding the complex underlying factors influencing behaviors and health.

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► INTRODUCTION

Photography is a powerful tool in health promotion. Recognizing the value and power of visual messaging, researchers committed to action research developed photovoice (Wang & Burris, 1997; Wang, Morrel-Samuels, Hutchison, Bell, & Pestronk, 2004). Photovoice is “a process by which people can identify, represent and enhance their community through a specific photographic technique” (Wang & Burris, 1997, p. 369). The photovoice process encourages identification of a collective voice that has potential to be heard by decision makers, program planners, and agenda setters. Despite the lack of data establishing causality between photovoice projects and policy change outcomes (Catalani & Minkler, 2010), evidence of associations among community health promotion efforts and photovoice initiatives suggests value in its use, including increased community partnership in research (Carlson, Engebretson, & Chamberlain, 2006), mapping environmental influences on health (Haque & Rosas, 2010), and promoting policy change (Kramer et al., 2010). To date, photovoice has been an effective tool facilitating community members voices being heard on a health topic and subsequently informing a variety of health promotion and policy efforts (Strack, Magill, & McDonagh, 2004; Streng et al., 2004; Wilson et al., 2007). However, very few have tested the potential of photovoice as a tool to promote health not only through the results that are yielded (i.e., photovoice exhibits, policy changes) but also through the process itself (i.e., strengthened relationships among participants, increased social network). This study was undertaken explicitly to explore the hypothesized potential of an intergenerational photovoice approach as a health-promoting, relationship-strengthening strategy for the participants and their communities.

► BACKGROUND/LITERATURE REVIEW

Photovoice methods have become increasingly popular in the United States and globally, among health promotion researchers and practitioners, as evidenced by a surge in publications describing use of photovoice addressing a range of health and social problems. With youth, photovoice projects have facilitated expression of their views on living as orphans (Abebe & Skovdal, 2010), caregiving for adults (Skovdal, 2011), being health literate (Pahl & Allan, 2001), engaging in health promotion (Bader, Wanono, Hamden, & Skinner, 2007), and being a recently arrived refugee (Sampson & Gifford, 2010). Among adults, photovoice projects have been used to encourage community engagement around mental health promotion (Chung et al., 2009), to picture

homelessness (Remillard & Schneider, 2010; Walsh, Rutherford, & Kuzmak, 2010), and to identify stressors and supports among those living with HIV (Schrader, Deering, Zahl, & Wallace, 2011). Numerous photovoice projects have examined environmental factors, including neighborhood environment (Mahmood et al., 2012; Seaman, Jones, & Ellaway, 2010; Nicotera, 2007), environmental inequities (Redwood et al., 2010), and use of space (Kwok & Ku, 2008).

Fundamentally, photovoice projects are intended to be participatory and community based, undertaken in partnership with researchers or others (Wang & Burris, 1997); however, the literature reveals a range of adherence to the original intent of photovoice and reinforces the complex requisites to successful, ethical implementation of photovoice projects (Wang & Redwood-Jones, 2001).

Intergenerational Photovoice

Intergenerational photovoice projects are those in which the range of participants represents more than one generation. A review of the literature published between 2007 and 2011 (for a review of photovoice literature pre-2007, refer to Catalini & Minkler, 2010; Hergenrather, Rhodes, Cowan, Bardhoshi, & Pula, 2009) yielded 115 articles describing photovoice projects covering a range of health and social topics in many countries, yet only 3 described use of photovoice with intergenerational participants working together (see Table 1). Alcock, Camic, Barker, Haridi, and Raven (2011) conducted a photovoice project as an intervention designed to address age-related stereotypes; an exhibit was held, and data demonstrated improvements in reducing stereotypes and increasing cross-generational understanding.

The benefits of intergenerational programs, such as combined adult and child day cares, demonstrate the hypothetical relational and well-being outcomes individuals might experience when participating in an intergenerational photovoice program. Theoretically, relationships can be strengthened through photovoice projects because the projects require respectful collaboration, exchanges of personal perspectives about a topic of mutual interest, triangulation of sharing through photographs that participants take, and group cohesion to build a photovoice exhibit with policy messages. Building on work that documents the potential protective nature of adolescents' connectedness to a caring adult (Bernat & Resnick, 2006), including the benefits of strengthened mutuality (i.e., capacity to look at a situation through the view of the other; Zayas, Hausmann-Stabile, & Pilat, 2009), we theorize that the parent-adolescent

TABLE 1
Intergenerational Photovoice Literature Through 2011

Authors (Year)	Purpose	Participants	Sessions
Leipert et al. (2011)	To examine the influence of curling on health of women in rural Canada	Girls, 12-17 years ($n = 3$) Women, 40-60 years ($n = 8$) Women, 65-72 years ($n = 2$) $N = 13$	2
Alcock, Camic, Barker, Haridi, and Raven (2011)	To change negative age group stereotypes and promote sense of community	Boys, 9-14 years ($n = 13$) Girls, 9-14 years ($n = 5$) Women, 65-80 years ($n = 10$) Men, 65-80 years ($n = 3$) $N = 31$	12 together (36 total)
Foster (2009)	To explore the lived experience and perceptions of weight-related health in African-American families with an overweight or obese child	Youth, 7-16 years ($n = 12$) Adults ($n = 6$) $N = 18$ (6 families)	2

interaction encouraged in a photovoice program has potential to strengthen familial relationships, communication, and connectedness.

Adolescence is a period in which many youth struggle to relate with their parents as they also seek out independence; parents struggle to communicate effectively in an understanding manner and to set aside adequate time to be available (Rew, 2005). A common reaction to increases in conflict is to reduce the amount of time spent together in an attempt to reduce conflict. What can result, however, is increased lack of communication as well as increased negative feelings such as isolation, loneliness, and being misunderstood. Positive parent-child communication and supportive parental involvement are important to fostering the well-being of Latino youth. There are documented correlations among Latino parent-adolescent communication levels and quality and adolescent delinquency (Davidson & Cardemil 2009), suicide attempts, self-esteem (Kuhlberg, Peña, & Zayas, 2010), and academic motivation (Henry, Plunkett, & Sands, 2011). Spending time side by side doing a project such as photovoice allows for an adolescent and parent to have quality time together without the pressure of needing to talk about their "relationship" (Garcia & Lindgren, 2010).

The theoretical underpinning for intergenerational photovoice as a health promotion strategy is twofold. First, resilience theory (Bernat & Resnick, 2006) supports identification of risk and protective factors with

attention toward optimizing protection and minimizing risk in the lives of youth. Intergenerational photovoice projects afford opportunity for identifying personal, familial, and societal sources of risk as well as strength; in addition, participation in the group efforts contributes to building protection through positive social networks and strengthened connectedness with caring adults. Second, Bronfenbrenner's (1979) social-ecological model underlies photovoice, emphasizing the critical need to understand influences at all levels (i.e., ontological, exosystem, microsystem, macrosystem) and to apply that knowledge effectively to health promotion efforts. Photovoice projects provide a unique opportunity for participants to identify individual, relational, community, and system level influences on their health and well-being; these insights contribute understanding about barriers and facilitators to change and, ultimately, can inform prioritization of strategies and health promotion activities. Strack, Lovelace, Jordan, and Holmes (2010) succinctly portray photovoice through a social-ecological logic model lens, offering a step-by-step guide to planners and participants to encourage individual- and community-level change. Our study was guided by resiliency theory and a social-ecological model; together these support and explain the use of photovoice to promote health, and importantly, they indicate the potential for photovoice to yield intergenerational benefits among participants that to date have not been examined.

Binational Photovoice Project

A unique funding mechanism offered through the Health Initiative of the Americas (PIMSA—*Programa de Investigacion en Migracion y Salud*) provided the opportunity to establish a binational research collaboration between the National Institute of Psychiatry in Mexico City and the University of Minnesota in Minneapolis. The purpose of the project was to use an intergenerational photovoice approach to elicit insights about how migration influences the health and well-being of adolescents and their families; of interest were perspectives from those who had migrated to the United States and from those who had remained in Mexico. In this article, we describe the successes and challenges associated with seven photovoice groups that were conducted with parent-adolescent dyads in the United States and Mexico. Specifically, we outline the photovoice project planning, implementation, and participant feedback, to inform future intergenerational health promotion initiatives.

► METHOD

Approach

A mixed-method study design was used to implement and evaluate intergenerational photovoice groups with Mexican-origin adolescents and adults residing in the United States and Mexico. Institutional review board approvals were received from the University of Minnesota in Minneapolis and the National Institute of Psychiatry in Mexico City.

Settings

We conducted seven photovoice groups in an urban part of the Midwest, United States ($n = 5$), and in a rural part of central Mexico ($n = 2$). The selected cities represent sending and receiving communities in a popular migration pattern between Minnesota and Morelos.

Participants

Participants were conveniently recruited using verbal invitation, distributed fliers, and word-of-mouth among families in the community. Participants were of Mexican origin because the source of funding emphasized binational research between Mexico and the United States (see funding acknowledgements). It was required that both an adult and his or her adolescent relative participate in the project.

Mixed- and single-gender groups were purposefully planned because of anticipated differences in group

Participants:

- learned how to use the cameras
- understood the ethics of picture taking
- confirmed a topic of mutual interest
- took photographs to represent their perspectives on the topic
- described the meanings of their photographs
- discussed commonalities across their individual photographs
- identified themes that summarized collective policy messages
- created an exhibit to display the photographs with their policy implications
- presented to invited guests at a formal exhibition in their community

Introductory Session

- Project purpose
- Assent and consent
- Questionnaires
- Introductions
- Camera use and photography ethics

Sessions 2-5

- Ice-breakers
- Sharing photographs and meanings
- Break-out and large-group discussions
- Identifying common themes
- Ongoing photography

Sessions 6-7

- Creating core messages
- Designing photography exhibit
- Organizing key policy recommendations
- Inviting stakeholders to the exhibit

Session 8

- Exhibit presentation
- Questions, answers and dialogue
- Presentation of certificates to participants

FIGURE 1 Overview of Photovoice Participant Process

dynamics (Gilligan, 1993). Most adults were parents, but grandmothers and aunts were also represented in the absence of a mother (this absence was most often because of migration patterns). Included in the informed consent process was information regarding photography and mandated reporting laws.

Implementation

Every photovoice group followed a similar outline of weekly session processes and activities (see Figure 1) that culminated in a photovoice exhibit open to the broader community. Lead facilitators guided the process

and were selected based on previous experience with group facilitation. These included a public health nurse, licensed clinical social worker, licensed teacher, and psychologist. Coleaders included professionals with previous group facilitation experience and young adults who had previously engaged in a photovoice group as a participant. A male cofacilitator was involved in the mixed-gender groups; otherwise the facilitators were female. The roles of the facilitators were critical because the photovoice process is organic. Rather than being directive and leading, the facilitators used guiding, coaching skills to assist individuals and the group toward collective generation of representative themes. All facilitators completed ethics training and received education and mentoring from a co-principal investigator (lead author) regarding photovoice group processes, intergenerational factors, and project goals.

Data Collection

Participants completed a pre- and postparticipation questionnaire, provided weekly feedback following each photovoice session and participated in a postintervention focus group discussion. The self-report questionnaire included demographics, measures of emotional well-being, and measures of family, mother, and father connectedness (adapted from the Minnesota Student Survey).

Participants provided open-ended feedback following each session, verbally to the facilitators and occasionally in writing on anonymous note cards. Additionally, a facilitator wrote a reflective summary of the session, including what had been completed, main discussion points, and any key occurrences (i.e., a disagreement, emotional displays such as crying, increased group cohesion).

Following four of the photovoice groups, semistructured focus groups were conducted with willing participants to formally obtain feedback about the photovoice process, the aspects that were appreciated, and suggestions for doing things in a different way; focus groups were not conducted with all groups because they were primarily intended to gain feedback from initial groups to inform subsequent groups and because grant resources were limited. Questions addressed what participants liked about the photovoice group process and what they thought could be improved for recruitment, engagement, and the photovoice process overall.

Analysis Strategies

Descriptive data were summarized, including demographic characteristics of participants and retention/participation rates in the respective photovoice groups.

Photovoice group themes were descriptively organized by the lead researcher in each country. Facilitator and participant process feedback were thematically organized according to benefits and challenges regarding the intergenerational photovoice group processes. Focus group evaluation data were inductively coded and organized into descriptive themes representing aspects of intergenerational group dynamics, which are presented below (Sandelowski, 1994). The U.S.-based principal investigator led the qualitative analyses and engaged other research partners in analytic discussions to confirm representativeness of the codes and resulting themes.

► RESULTS

Participant Demographic Characteristics

Seventy-five participants were recruited in the United States and Mexico, males and females, with high rates of retention for each of the seven groups (75% to 100%; see Table 2). Adults in the United States were more likely to report being employed and uninsured than those in Mexico. Similarly, more half the youth in the United States reported lacking health insurance coverage whereas none of the Mexican youth lacked coverage. Additionally, more youth in the United States reported living with their mother and/or their father compared with youth residing in Mexico.

Photovoice Themes

Table 3 provides a summary of the photovoice themes developed within the groups, addressing influences on family relationships, including culture and migration. The themes between the United States and Mexico reflected, metaphorically, two sides of the same coin. For example, in the United States, participants described missing home and feeling nostalgic for their home communities in Mexico; Mexico-based participants described feeling abandoned and the challenges that they faced when family members migrated to the United States. Participants in both countries spoke of the need for immigration reform although in Mexico the photographs and reflections highlighted dangers and repercussions associated with migration while those in the United States emphasized immigrant rights.

Participants' Reflections on Intergenerational Photovoice Group Benefits

In the focus groups, adolescents not only spoke about the benefits of participating, which included spending time with their parents (i.e., "You get to spend

TABLE 2
Intergenerational Photovoice Project Demographics, 2009-2012

Year	Location	Participants (N = 75)		Gender		Retention (%)	Facilitators
		Adult (n = 38)	Adolescent (n = 37)	Female (n = 55)	Male (n = 20)		
2009	Twin Cities, Minnesota, United States	4	4	X		75	Females White Adult
2010	Twin Cities, Minnesota, United States	6	8	X		77	Females White Adult
2010	Atlacahualoya, Morelos, Mexico	8	8	X		100	Females Mexican Adult, adolescent
2010	Atlacahualoya, Morelos, Mexico	4	4	X	X	100	Females, male Mexican Adult, adolescent
2010	Twin Cities, Minnesota, United States	6	4	X	X	80	Female, Male Latino Adult
2011	Twin Cities, Minnesota, United States	5	5	X	X	80	Female, male Latino Adult, adolescent
2012	Twin Cities, Minnesota, United States	5	4	X	X	100	Female, Male Latino Adult, young adult

time with your parents if they're both gonna participate and get to know your parents better"), but also reinforced the attraction of the photovoice elements, including use of a camera (i.e., "I'm so sleepy and then I got out of bed, and once I found out that it was about cameras I was like 'ooo that's my thing'") and it being a new type of project (i.e., "It's a project we've never had in our community like this").

Speaking about their relationship with their parents, some youth described improvements (i.e., "Before this class, I wouldn't talk to her as much about things that were happening in my school, but after the class I was kinda starting to talk to her more and more about her stuff"; and from another girl, "It improved a little. Like I tell her most of my things now. And like I didn't use to do that, I use to just like keep things to myself, not all of them though. I'd only tell her little things but now I like give her more trust").

Parents concurred, with key benefits of the program described as "more communication with your

adolescent." A mother described what she learned about her son:

For example my son is very, very quiet. He is 15 and sometimes one can understand that it's the change of adolescence. I hadn't noticed that my son needed more conversation with his father. The day of the presentation he went up and said that he had really like the project because he had more time with his dad that they don't really have. Because my husband works in the evenings and my son is at home in the evenings so he doesn't really have much conversation with his dad . . . I was surprised because I hadn't noticed, I always say "you guys like that your dad isn't here so that he doesn't tell you what to do." But it's not like that. He does need his dad because he said so. It was one of the things that really got to me and that I found about him. He is very quiet so he may be trying to feel or say something but he only says "yes" or "no" but nothing like "I wish my dad was here or [I could] go out

TABLE 3
Intergenerational Photovoice Groups Foci and Themes

Participants	Location	Focus	Themes	
Mexican-origin parents and adolescents girls (N = 8)	Twin Cities, Minnesota, United States	Preserving culture and traditions	Culture Education Family union Nostalgia	
Mexican-origin adults and adolescent boys and girls (N = 48)	Twin Cities, Minnesota, United States Atlacahualoya, Morelos, Mexico	Migration effects on family and community	United States Comprehensive migration reform Drivers' licenses Deportation Economy Education How to defend the rights of immigrants Nostalgia	Mexico Causes of emigration Ending the illusion of the American dream Solutions for avoiding more deaths Abandonment
Mexican-origin parents and adolescent boys (N = 19)	Twin Cities, Minnesota, United States	Migration effects on family and community	Culture and traditions Education Immigration challenges Dreams Cultural impact of migration Family	

with him." No, he is very quiet. That day he said it, so it's one of the things I now know.

Similarly, parents described increased understanding about their adolescents (i.e., "I had no idea my daughter was so sensitive and could express herself so beautifully through art"). A daughter described how previous to the project she had no idea her mother was such a strong leader in a group setting; this was inspirational and motivating for her.

Adults and adolescents described barriers to healthy relationships that the project was eliminating primarily by providing them with time to be together in the same room or working together when they were out in the community taking pictures. A parent shared,

What this was also about was to work together as father [and] son or mother [and] daughter. And it was one of the things that did help a bit because sometimes one doesn't have time and that way now one has time to work together on a project like this.

Reflections on Intergenerational Photovoice Groups

Facilitators of the intergenerational photovoice groups documented weekly summaries that yielded insights regarding recruitment and participation factors unique to the intergenerational nature of the project. These are described below.

Participation dynamics. Recruitment efforts originally intended participation of one adult and one adolescent to foster strengthening that relationship. However, some adults preferred participating together with their child, or bringing along multiple adolescent children to participate. These modifications were allowed and yielded an expected range of outcomes. For example, a mother and father participated with their adolescent daughter; because the mother could not adjust her work schedule, this enabled the daughter to have a consistent parent presence in the group week to week. A parent commented on the benefits she perceived when both the mother and father could participate:

It's better to have mothers and fathers . . . Like, for example, my son is a boy. It's good that I'm here, but also his father because since he is a boy, right? And those that have daughters, it's good that the mother comes but it's also good that the father participates to get closer to their daughters.

Group dynamics can change when one family has an extra participant, with potential for a perceived or real unbalanced power dynamic occurring within the group. When two siblings participate, they might feel the need to compete for the parent's attention, or they might engage with each other more than with their parent. When both parents participate, one parent might be more vocal in the relationship, and this could inhibit the participation level of the quieter parent. It was necessary for the facilitators to adjust communication activities to address potential problems.

Engaging youth. Naturally, there were challenges related to engaging youth to verbalize their feelings and opinions as equals alongside their parents in the group context. These challenges lessened as the group met over time and were effectively addressed by our facilitators through a variety of strategies, including ice-breakers, small-group work, and discussions separately for youth and for adults; assigning youth tasks that required leadership and engagement; and offering reflective exercises such as writing that did not require verbal interaction.

Opportunities for healthy communication and skills building. Youth and parents were challenged to grow in communication skills throughout the photovoice group sessions. Sometimes a youth agreed to assist with note taking for the group on a dry erase board; other times participants were engaged to help lead the group in development of an idea. A facilitator of one of the groups reflected on observed changes in family relationships, "I watched mothers recognize their daughters in ways that strengthened relationships, and daughters appreciate their mothers. The awe and gratitude of the dyads for the ability to reconnect with their parent/adolescent was humbling."

Skipped generation challenges. Unique to Mexico there were intergenerational dynamics that yielded some challenges. Specifically, on a few occasions a grandmother participated with her granddaughter because the mother has emigrated from Mexico. For these dyads, participation in the photovoice group discussions provided a safe context in which they could

express some of the challenges they were experiencing in their relationship. This required facilitators to sensitively acknowledge feelings and struggles yet avoid development of a group counseling dynamic. Conflict between some of the dyad members was not unique to Mexico; these events were anticipated, and when an obvious tension between an adult and adolescent, or between two adults, occurred, a facilitator quickly and respectfully intervened.

► DISCUSSION

Intergenerational photovoice groups demonstrate potential for promoting the health of individuals and communities directly and indirectly through strengthening intra- and interfamilial relationships. Unlike other group programs or interventions that bring parents and their adolescent children together, such as family therapy (Bermúdez, Kirkpatrick, Hecker, & Torres-Robles, 2010; Northrup & Bean, 2007; Santisteban & Mena, 2009), photovoice projects appear to have an inherent appeal, likely associated with the artistic photography, participatory, or civic engagement elements of photovoice (Wang & Burris, 1997). Our study demonstrates the potential that photovoice, beyond functioning as a tool that fosters individual- and community-level change through action and policy change, also serves as a health-promoting tool by encouraging strength of relationships. Further research is needed to examine these hypothesized effects.

Parent-adolescent photovoice groups provide unique opportunities to bring together family members who often do not have other space to engage with one another. For some families who are not inclined to access programs purposefully to strengthen relationships or address relational challenges, photovoice offers a subtle attractive mechanism for indirectly encouraging healthy relationships while directly undertaking a project whose primary goal is to describe an issue and identify potential community-level, policy change solutions using photography. Health promotion practitioners should consider photovoice as a useful tool in their work with fragmented communities and youth who might benefit from purposeful strengthened connection to caring adults in their lives.

Existing health promotion initiatives often reach families with components that are delivered separately to parents or adolescents rather than together. This trend continues despite theoretical and practical awareness of ecological influences and subsequent need for strategies that intervene on multiple influencing factors in the life of an adolescent, or in a family (Bronfenbrenner,

1979; Grzywacz & Fuqua, 2000; Reifsnyder, Gallagher, & Forgione, 2005; Valk, Spruijt, de Goede, Larsen, & Meeus, 2008). Whether one is seeking to increase rates of certain behaviors (e.g., screening for chronic diseases) or reduce rates of others (e.g., substance use, obesity), there are immediate and distal benefits to implementing strategies that involve multiple generations within a family or community context (Wang et al., 2004).

Additionally, beyond the immediate benefits derived from photovoice groups specific to the topics addressed (e.g., healthy eating, reduced substance use), there are potential civic engagement, leadership, and capacity-building benefits (Gant et al., 2009; Hoyt & Kennedy, 2008; Molloy, 2007; Wilson et al., 2007). For example, when previous photovoice group participants become cofacilitators of future photovoice groups, they develop important leadership skills that have potential to transfer to other life and employment situations. Not only does this offer leadership development, but it also is a mechanism for fostering the sustainability of photovoice-directed health promotion efforts in a community.

Our study showed successful ability to recruit and retain intergenerational groups in a photovoice project. Participants' and facilitators' process feedback revealed perceived benefits that extended beyond inherent photovoice project goals into the relational realm, which is fundamental to health promotion efforts that emphasize strengthening protective factors while reducing risks. To our knowledge, this is the first study to establish the feasibility and promise of photovoice as a health promotion tool for intergenerational groups within a community. This is a critical step toward advancing the relevance of photovoice methods in health promotion efforts among youth and within communities that experience risk related to family insecurities and disruptions.

Recommendations and Implications

This study demonstrates promising benefits associated with intergenerational photovoice groups. Health promotion practitioners should consider using photovoice methods and, in particular, intergenerational photovoice groups when they want to specifically foster protective factors among the participants in addition to yielding expected community-level photovoice project outcomes and policy changes. There is potential for intergenerational photovoice groups to influence underlying relational risk and protective factors, such as parent-adolescent communication patterns, that have mediating and moderating influences on subsequent health behaviors. Critical to the success of these photovoice groups

is careful planning and implementation (Strack et al., 2010), including the selection of an effective facilitator (Garcia, Lindgren, & Pintor, 2011).

In sum, this study provides initial evidence to support use of intergenerational photovoice groups in health promotion practice efforts. Future research might compare outcomes of photovoice group interventions that are intergenerational with those that are not, follow participants over time to observe longitudinal trajectory effects, or implement randomized controlled designs to establish the intervention efficacy of photovoice for connectedness, civic engagement, and health behavior outcomes. Health promotion researchers and practitioners recognize the need for complex yet efficient strategies that respond to the complex underlying factors of problems. Photovoice projects characteristically include attention toward socioenvironmental contributors to ill health; intergenerational photovoice groups extend beyond traditional photovoice efforts and have potential to maximize health promoting outcomes by strategically bolstering protective factors at key ecological levels for individuals.

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