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FIELD NOTE

ADAPTING THE TOOLS TO THE FIELD: TRAINING IN USE OF FOCUS GROUPS

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The HEALTHCOM Project in Jordan has been unusual both in the nature of its institutional linkages and in its child survival interventions. The project is implemented by the Noor Al Hussein Foundation, a private voluntary organization sponsored by Her Majesty the Queen. The Jordanian Ministry of Health, the United Nations Relief and Works Agency (UNRWA), Save the Children, Catholic Relief Services, and local universities work closely with the project. Primary interventions have included effective breastfeeding and child spacing for the health of the mother and the child. Both interventions are complex: changes in breastfeeding behavior require reassurance and specific skills as well as new knowledge and beliefs. The concept of child spacing has strong political and religious overtones in the country, in addition to the usual emotional and personal sensitivities.

The HEALTHCOM methodology has been particularly useful in this environment. The approach relies on accurate and sensitive audience research for setting priorities, developing strategies and messages, and designing interventions. However, in Jordan we encountered a challenge common to many programs, i.e., adapting relatively sophisticated research tools so that they can be used responsibly by health and social workers who have no experience with qualitative research techniques or the purposes of formative research. Financial constraints made it impossible, even during the funding period, to contract research to the private sector. If the project is to sustain itself in future months and years, it will need reliable and affordable research resources.

INITIAL AUDIENCE RESEARCH

Our formative, or background, research on mothers' and health workers knowledge, attitudes, and practices regarding the target health behaviors included both quantitative and qualitative studies. For the qualitative studies we relied primarily on focus groups with caretakers of children under five. A focus group is a carefully planned discussion held in a permissive, nonthreatening environment, which is designed to provide in-depth information about how a certain group of people perceive a certain area of interest. Focus group members are led to interact with each other so that they respond

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to opposing ideas and comments and reveal many facets of a given issue. A focus group is considered a qualitative rather than quantitative research method because the information gives decision makers valuable insights into the target audiences' perspectives without providing statistical data.

EXAMINING THE QUALITY OF QUALITATIVE RESEARCH

We turned to our collaborative agencies to help us in setting up focus groups and to provide health educators to assist in moderating the groups. These initial groups were designed to collect information about breastfeeding and child spacing practices and thinking. The health workers were at a definite advantage because they knew both the subject content and the community, and had experience interacting with our target audiences. On the other hand, this group had little background in group dynamics, psychology, or in other related and useful fields. We also recruited interviewers who had been trained and supervised by the Annenberg School of Communication during HEALTHCOM's quantitative baseline study. We chose those who had shown the best rapport with the target audiences and the best grasp of the project purposes. However, many of the skills in which they had been trained (e.g., always asking the questions in the same way, directing the interview carefully, and so forth) are in fact antithetical to the process of conducting effective focus groups. An experienced focus group leader is nonjudgmental and facilitates wide ranging discussion on the chosen topics.

In later stages of the project, we again turned to focus groups for help in developing a series of messages on breastfeeding and child spacing to be broadcast on radio and television. The project used focus groups with Jordanian parents in order to evaluate the effectiveness of messages in various stages of their development (primarily by inviting their responses to proposed tapes and story boards). We began with research on the breastfeeding videos.

In preparation for the focus groups, we conducted training sessions for the new focus group moderators. Because of limited resources and a chronic lack of time, our plan called for several short (half-day) orientation sessions, then close monitoring and discussion after each field experience, with follow-up group sessions to share problems and to propose and test solutions. Some of the trainees had had previous training in focus group moderation in other projects, and we relied on them to help us model desired behavior.

The training produced mixed results. The logistics of conducting the groups improved noticeably over the first few days. Such arrangements can be crucial--such as the problem of choosing a quiet site, assembling the right numbers of the right people without their children, using the tapes and story boards in a clear way, and recording the sessions. In addition, the entire system showed marked improvement during the second pretesting cycle, which concentrated on radio spots. However, some problems remained. These were due primarily to the lack of supervision in the field and the skills levels of those previously trained. Improving the facilitation and reporting skills of the group leaders was extremely difficult.

The problems we observed in the field are probably common to many trainees who have little experience in conducting qualitative research. The most challenging "habits" we found hard to counter among our facilitators were:

- **Teaching or correcting participants.** Many of our facilitators were health educators or professionals who are accustomed to a teaching role and have trouble restraining themselves (when faced with an "uninformed" audience) from seizing the opportunity to inform.
- **Judging responses.** Many facilitators found it difficult not to make judgmental comments such as "good answer," or "we don't usually use that term."
- **Nervousness that results in being very directive of the process.**
- **Conducting a group interview rather than encouraging interaction.** This would happen easily if a facilitator went around the circle giving each participant permission to speak. The participants would then all wait to be called on and would speak to the facilitator rather than to each other.
- **Lack of objectivity about the product.** Many facilitators instinctively sought to confirm the materials, rather than to look for problems or areas for refinement.

- **Leading the group or putting words in their mouths.** For example, a facilitator might say, "Does the phrase 'increased suckling' mean nursing more often, or nursing longer each time?"
- **Lack of creativity in probing for greater richness of data.**
- **Asking directly for what they want to hear.** For example, a facilitator might say, "Are these women like those you know?" or "Does child spacing mean tranquility to you?"
- **Asking "yes" or "no" questions.**
- **Asking "why?"**
- **Difficulty in excluding authority figures that wished to take part in groups.** Quite often a local leader (physician, nurse, notable from a community) would want to be included in the focus group and the facilitator was uneasy in trying to prevent this.
- **Failure to show appreciation for participants' time and effort.**

In addition, several purely attitudinal problems undermined our ability to convey the importance or the complexity of focus groups to our trainees. A great deal of training in quantitative data collection had left this group with the conviction that qualitative methods are inherently inferior and/or so unscientific that maintaining standards is not important. Among some project members there persisted the conviction that experts should really be guiding decisions, rather than members of the target audience. In part, these attitudes stemmed from the failure of these individuals to understand that behavioral change is the purpose of the intervention, and that such change requires understanding and motivating the target audience.

PLANNING QUALITY TRAINING

To meet this challenging array of needs, we planned a major training effort before embarking on the next series of pretests for the final materials. We engaged two Arabic-speaking trainers with extensive experience in participative training as well as in public

health communication. A U.S. consultant from Applied Communication Technology (a subcontractor to the HEALTHCOM Project) provided specific focus group expertise and a commitment to the participative approach. With the assistance of the HEALTHCOM resident advisor in Jordan, the group became a team of four.

The Noor Al Hussein Foundation invited 16 representatives from the public health and communication organizations working with us to participate in the training. These included the Ministry of Health, UNICEF, UNRWA, Save the Children, Catholic Relief Services, and USAID. The trainees included four health educators, two physicians, three midwives, four social researchers, two nurses, and a project administrator. Their education ranged from completion of high school to advanced degrees. Because many of the participants anticipated designing audience research to meet their own needs as well for the immediate needs of our project, the training included skills for focus group planning and writing a focus group guide, as well as for facilitation and reporting.

The training program ran for four days. The trainers met in intensive planning sessions during the three days prior to the training program. Our previous experience conducting focus groups in Jordan and our thorough assessment of the needs and weaknesses of the participants provided an essential starting point for the design of this training. We chose a participative training model that we know can create long-term as well as immediate changes in attitudes, assumptions, and skills. Our common understanding of and experience with these methods allowed us to deviate as necessary from our agenda to pick up on what was actually happening in the sessions and to improvise in order to meet needs as they were revealed.

All of the training was conducted in Arabic. We took several special measures in order to accommodate the language difference between the trainers and the consultant, who had primary responsibility for planning and materials development. The consultant provided training notes on each module of the topics to be covered, and these were translated into Arabic in advance for the trainers. We participated in daily strategy sessions to discuss in depth the content and goals.

ESTABLISHING OBJECTIVES AND FORMAT

The first step in planning the training sessions was to establish objectives in relation to our participants' assessed needs. We divided these objectives into three categories, as detailed below.

SKILLS— Participants will be able to:

Conduct a focus group.

- Introduce the purpose of the group, explain procedures, establish ground rules;
- Set the appropriate tone to discuss sensitive topics;
- Lead the participants in introducing themselves and providing the personal information desired (if any);
- Move from general to specific topics;
- Cover the topics in the topic guide;
- Bring the group to a comfortable close.

Use effective moderating skills.

- Remain neutral, nonjudgmental;
- Demonstrate authority, provide discipline;
- Promote "give and take" exploration of the topics;
- Use appropriate body language;
- Use appropriate language and dress.

Handle difficulties caused by group dynamics or obstructive behavior.

- Calm down dominating personalities;
- Encourage participants who are reluctant to speak;
- Intervene when the group becomes too loud or too quiet.

Report findings:

- Make complete notes on responses to each topic;
- Note points that were universally agreed upon and points that revealed disagreement;
- Refrain from entering one's own opinion on the topic or unwittingly interpreting findings.

KNOWLEDGE— Participants will demonstrate an understanding of:

Why we use focus groups;
What guidelines to use in composing focus groups;
How to arrange logistics;
How to recruit participants.

ATTITUDES— Participants will demonstrate an awareness of:

The value of feedback from the target audience on concepts and messages;
The preferability of qualitative to quantitative research in certain situations;
The preferability of focus groups to either in-depth interviews or participant observation when it is useful to stimulate thinking and expressions of attitudes and motives;
His/her confidence in his/her ability to conduct focus groups.

These objectives governed the content and the format of our training modules. We divided the four days into seven two-and-a-half-hour training sessions on the following subjects:

- What is a focus group and why use one?
- Getting the focus group started.
- Developing the topic guide.
- Group moderating techniques.
- Planning and logistics.
- Handling difficulties in the group.
- Reporting findings.

Our schedule also included brief sessions for participants to share their expectations of the training, for daily evaluations, and for administering pre-tests and post-tests.

For each training objective we structured a learning experience that involved the trainees' active participation. Each module included a brief presentation to the whole group, with the help of flip charts and overheads. Exercises included role playing and simulation games to teach specific skills. For most of the exercises the large group was broken into two small groups, with a trainer assisting each. We used dyads to teach

listening skills and triads to teach topic guide development. We then met again in the large group to review what had been learned and to answer questions. The trainees spent well over half of their time practicing the skills, thereby gaining confidence and adapting the material to their own styles and needs in a supportive environment.

MAKING THE MOST OF MATERIALS

We prepared materials after agreeing upon objectives and format of the training program.¹ These materials consisted mostly of summaries of the important points of each training module. The summaries are brief, since they were intended as a support for group discussions and exercises. Learning relied primarily upon the participants' experiences in the training sessions, rather than upon their digestion of the written materials. A selection of these materials (translated into English) are provided in the appendix.² Each participant received a special folder with a complete collection of the summaries to serve as a guide, during training and during future practice, in applying the skills. Participants found these materials very useful.

ADAPTING THE METHODS TO THE REALITY

In the course of training we needed to continually adapt our approach and emphases to the needs of the participants. We knew that some compromises in "purity" of method would have to be accepted in order to meet the participants half way. We knew that the trainees did not have the backgrounds that would enable them to make full use of the method immediately, and that they would require much supervised experience to gain the desired facility. One of our greatest challenges was to decide what kinds of adjustments could be made in participants' initial efforts which would not compromise the validity of techniques and results.

Most of our trainees were educators, not researchers. A few were not up to the task of preparing a topic guide (questionnaire) or staying on top of a challenging group of participants. Professional focus group leaders are supposed to have well-developed conceptual skills, be able to deal quickly with complex contingencies, and respond effectively to a wide range of direct and not-so-obvious challenges to their role and intent. Some of the trainees found it difficult to create topic guides and questions which would elicit the information they were seeking without pointedly asking for that information.

We used several approaches to close the skills gap. We worked on some relatively simple methods of developing a topic guide and demonstrated how probing questions would bring forth the information they were seeking. Ultimately, we also agreed among ourselves that a satisfactory compromise was to allow them to ask direct questions at the end of the focus group session to cover information they felt had not been brought out yet during the discussion. In this way, they were not anxious about "missing" anything, so were more likely to facilitate a proper focus group environment.

We also discussed the special problems of using health educators who have a strong motivation to inform the audience. Finally, we agreed that when participants showed misunderstanding or lack of information about important health topics, the moderator would speak to them privately after the group discussion to provide the information that the educator felt they needed to have. This helped lower the leaders' anxieties on this score. Another option which we had used prior to the training was to use a very structured and detailed focus group guide that resulted in something approaching a group interview rather than a focus group. This had the advantage of allowing a number of people to respond to the material at once, and provided some useful discussion.

REMAINING ISSUES

During the planning and training sessions we wrestled with a number of issues which may be pertinent to others planning a similar activity. In some cases, we learned how future training could be conducted more effectively; in others we merely identified problems which can only be met through compromise.

How much time should be devoted to training? We were scheduled for a total of 24 hours of training. Both trainees and trainers felt that an extra six-hour day, bringing the total to five days, would have been helpful.

Should the trainees get some "field" practice? We planned to reconvene the training group once the trainees had been able to conduct an actual focus group. (Some, but not all, had led focus groups prior to this training.) This would have allowed trainees to reflect on their experiences and to get assistance in overcoming specific dilemmas. It would also have allowed us to monitor the results of adjustments we had made in training, as described in the section above. Unfortunately, plans to include newly trained participants in the next round of pretesting were sacrificed to program logistic demands. The follow-up meetings were held but were of greatest value to those who had

actually been able to moderate or observe groups during the interim. This follow-up device has excellent potential to evaluate and strengthen new skills.

How can trainees be helped to develop the skills of interpreting the data they collect?³ There are two aspects to this challenge: helping trainees develop the necessary analytical skills and helping them maintain the appropriate level of objectivity. For those involved in collecting qualitative data on their own project, the task of remaining objective, rather than seeking reinforcement for preconceptions, can be difficult. We were working with trainees who would be conducting focus groups for projects in which they served primarily as educators.

During the early planning sessions we decided to concentrate on helping the trainees conduct the focus groups and record the information. They would not be asked to interpret the findings. This allowed us to focus on the importance of objectivity. We gave one session on preparing a report for decision makers (who would then interpret the data). Commercial marketers generally frown on this approach. They believe it is important to have the same individual conduct the group, record the results, and interpret them, in order to prevent possible misinterpretation. However, given the constraints of our trainees' backgrounds, we believed the project would be better served with a report containing a thorough account of what was said in the focus group (backed up by an audio tape) than with a preliminary interpretation of the results.

EVALUATION AND REFLECTION

The trainees' enthusiasm and interest were high throughout the program. Of the 16 participants, only one missed a day because of a child's illness. At the close of each day, the trainees evaluated the day's activities. Satisfaction in four categories relevant to program goals ranged from 80 to over 90 percent.

The trainers also carefully evaluated progress among the participants. We observed the participants practice each stage in the moderating process: developing a topic guide to meet the needs of the project decision makers; setting up and organizing a group; warming up; handling problems in the group; moving to conclusion; and reporting the findings. One of our goals was to identify which individuals could be relied upon in the future to carry out quality focus groups for the project. We met afterward with the HEALTHCOM Project advisor and project staff to discuss implications for future research activities. Approximately one-third of the participants were prepared to conduct focus groups with little or no supervision. Approximately one-sixth had serious

difficulties with some aspect of the training. Most participants fell somewhere in the middle--they had the necessary capabilities but would need further follow up and supervision. We were not surprised by these results. Past experience has shown that conducting focus groups requires some social as well as analytical skills which come more naturally to some people than to others. Many types of qualitative research are as much art as skill, and it is important to recognize that some trainees will not acquire adequate fluency in them.

Certain skills proved more difficult for the group than others. Perhaps the most challenging task for these participants was learning to write a focus group guide or report adequately on their findings. We also found that many of the trainees needed help with skills for working in small groups, or in using instruction sheets to accomplish a task. The evaluation showed that participants still tended to believe the moderator should be "directive" in managing the discussion and our observation showed that, indeed, many displayed an excessive amount of control. This particular problem deserves careful follow up.

Observation and written evaluations showed participants were strongest in organizing and setting up groups, choosing appropriate members, understanding the role of formative research and pretesting in the communication process, and describing appropriate reasons to use focus groups. Although this degree of understanding is not sufficient for actually carrying out research, it is an essential level of awareness for those who can influence how much and how qualitative research is carried out in a given project. Many of the agencies who sent participants did subsequently set up groups for us and began to support our reliance on audience research.

Those participants who had the opportunity to apply their skills soon afterwards made steady observable improvement. Several are now being used by local and international advertising and marketing firms who have described their grasp of moderation skills and concepts as "outstanding" and "excellent."

CONCLUSION

The adaptations we made in this focus group training activity seemed to have created a workable compromise between skills available and the requirements of the methodology. Our approach permitted us to retain a sophisticated model--based on strong interaction with the target audience and careful probing--that provides an accurate and powerful research tool. We also knew that we could not accomplish

everything in these four days. We chose to concentrate on those skills we believed were within the grasp of the trainees. In doing so we also recognized the importance of follow up training, supervision, and appropriate delegation of responsibilities in conducting future research activities, in order to make the best use of these trainees' skills.

NOTES

1. To prepare the materials we relied heavily on two sources:

Debus, Mary. Handbook for Excellence in Focus Group Research. HEALTHCOM Project. 1988.

Breitrose, Prudence. "Focus Groups: When and How to Use Them: A Practical Guide." How-to Guides on Community Health Promotion series. Stanford Center for Research in Disease Prevention, Stanford University School of Medicine. date?

2. These materials are also available in Arabic from the HEALTHCOM Project.
3. See also field note entitled "Training Ecuadoran Health Communication Professionals in the Use of Qualitative Research Techniques." The task of training others to interpret qualitative data is particularly challenging. In most of the environments in which HEALTHCOM works, this subject is best dealt with singly and in a focused way, rather than in combination with skills training in data collection or recording.

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APPENDIX

Sample Training Materials

FOCUS GROUPS: AN INTRODUCTION

The purpose of this training program is to help you use focus groups to collect information about the people to whom you are providing service and/or conveying messages.

A focus group is a research tool that we use to find out about people's knowledge, attitudes and behavior.

It is a qualitative, rather than a quantitative research methodology. Of the three most common qualitative methodologies, a focus group is the intermediate one: it combines characteristics of the other two: in-depth interviews, and participant observation.

Like an in-depth interview, a focus group allows us to probe into attitudinal and behavioral dynamics.

Like participant observation, a focus group allows us to observe behavior and influences on behavior.

As with all research methods, focus groups must be used in accordance with some directing principles and rules.

We want to use this training program to adapt the use of focus groups to your situation and requirements--to retain what is critical about focus groups, while bending what we need to suit your constraints.

FOCUS GROUPS: A DEFINITION

What is a focus group?

A focus group is a carefully planned discussion

designed to provide information about how certain people perceive a certain area of interest

held in a permissive, non-threatening environment.

Focus group members are led to interact with each other

so that they influence one another
by responding to ideas and comments in the discussion.

When is a focus group used?

A focus group is used to observe perceptions, behaviors, attitudes and language of individuals as they are being influenced in a social setting.

Focus group interviews can be used in situations where time and cost are important considerations.

They are used for the purposes of:

generating ideas about services or products,
pretesting message components
pretesting message or package designs
identifying problems.

How is a focus group conducted?

A focus group is formed of six to ten relatively homogeneous people who don't know each other.

Information is solicited through pre-planned, open-ended questions in a comfortable environment.

Notes are taken on information obtained relevant to the area of interest and written up for decisions-makers to interpret.

FOCUS GROUP DEMONSTRATION #1:
HALF-TIME JOBS FOR MARRIED WOMEN

Information desired by the decision-makers:

Will women take jobs that are limited to half-time?

Under what conditions will they take a half-time job?

What would make such a job an attractive opportunity?

What do women perceive that they would gain by reducing their working hours to half-time?

What do women perceive they would lose by doing so?

Topic guide:

1. What do you think about married women working outside of the home?
2. What values and goals motivate you to work?
3. What is important in your life outside of your work?
4. What would you think of working half-time?
5. What would you think of an organization whose policy is to employ married women for only half-time?
6. How would you feel about working for such an organization?

FOCUS GROUP DEMONSTRATION #2:
FOCUS GROUPS

Information desired by decision-makers:

What do the group members know about focus groups?

What false assumptions or incorrect information about focus groups do they hold?

What are their attitudes toward using focus groups in their work?

Topic guide:

1. How do we know when we are communicating with other people?
2. How do we know we have communicated a message to a group of people such as the patrons of our clinic?
3. What are some of the obstacles to communicating clearly?
How can we overcome these obstacles?
4. What do you think about using focus groups to facilitate communications?
5. What do you like and dislike about using focus groups to get information about the people you serve or to whom you wish to convey information and advice?

GETTING THE FOCUS GROUP STARTED

Purpose:

To create a warm, non-threatening atmosphere in which participants are at ease and feel free to disclose their thoughts and feelings, even on sensitive subjects.

Physical preparations:

Have chairs arranged in a semi-circle, with yours facing the others.

Have a tape recorder ready to go at the press of the button.

Try to prevent disturbances; have an assistant take care of restless children away from the group; have the doors protected from intruders.

Discourage unwanted participants or observers.

Moderator's behavior:

Be relaxed, friendly and casual, as if you are a hostess or host.

Smile.

Instigate small talk (about the weather, for example, as you help participants get seated.

Answer individual questions to relieve any anxieties.

Avoid discussion of the topic until you are ready to address it.

Opening remarks:

Welcome participants and thank them for coming.

Introduce yourself (your name and your organization).

Tell group members that you have invited them because you want their opinions on (the general topic).

Explain that you are tape recording the session so that you can listen again to recall all their comments.

MAKE SURE THE TAPE RECORDER IS ON!

Ground rules:

Speak one at a time, loudly enough to be heard on the tape recorder.

Give your honest thoughts and feelings; negative comments will be helpful. There are no right or wrong answers.

Your opinion will not affect my feelings.

You may be assured of complete confidentiality.

Our session will last about one hour.

Introductions:

(Introductions are important; they serve several purposes:

- to "break the ice" and get everyone to speak;
- to increase group members' level of comfort with you and each other;
- to reveal information about them that is relevant to the topic;
- to make sure everyone speaks loudly enough for the tape to pick up.)

Ask each participant to tell her or his name and something about himself or herself (such as the names, ages and sexes of their children).

Don't ask questions that identify status differences among group members.

DEVELOPING A TOPIC GUIDE

Purpose:

To make sure that all the desired information is solicited in a manner that probes underlying motives, opinions, feelings, attitudes and values.

Preparation:

Two different sets of questions need to be developed:

questions that must be answered in order to provide the information that the decision-makers want;

questions used to stimulate participants' thinking; these comprise the topic guide.

First, develop the information questions:

Have one or more of the decision-makers discuss with you:

Who will use the information?

For what purpose?

What information is needed?

Make sure you explore all aspects of the decision-makers' concerns.

(If you are one of the decision-makers, be sure to answer the questions yourself).

Write a list of questions covering the information requested, and show the list to the decision-makers for their concurrence.

Second, develop the areas of questions for the topic guide:

Brainstorm a list of questions relevant to the topic.

Select those that will help you lead to the topic.

Move from general to specific questions.

Check your list of information questions to make sure that your topic guide questions are likely to cover the information you are seeking.

FOCUS GROUP MODERATING TECHNIQUES

Purposes:

To collect information about the true issues related to the topic area, and to observe participants' language and emotions associated with the topic area.

Moderator's behavior:

Present the topic, concept or product in a neutral way, don't reveal your opinion of its worth or importance.

Display authority in your role as a moderator; show that you know how to moderate the group, but

Don't display authority in regard to the topic; your expertise can intimidate participants.

Encourage participants to explore more deeply their thoughts and feelings:

use the five-second pause;

use probing questions;

use mirroring and repeating phrases, but

Don't encourage the direction or content of responses by

nodding your head, scowling, etc.;

using short verbal responses such as "right", "good", "no";

Be aware of body language:

your own: head-nodding, frowning, eye contact;

theirs: signs of alertness, confusion, anger, approval.

LISTEN with sincerity and interest.

Close the session without interrupting an active flow of discussion.

Thank group members for attending and participating.

PROBING QUESTIONS

What is a probing question?

A probing question is one which encourages the respondent to clarify her or his answer, giving more details about her or his thoughts or feelings. Probing questions often result in pushing the group's discussion to a deeper level, going beneath the surface of initial responses.

A probing question begins with "what" or "how". Questions that begin with "do you" or "are you" call for an answer of "yes" or "no", and do not lead anywhere. Questions that begin with "why" tend to put the respondent on the defensive. It is better to phrase a "why" question, such as "why do you like it?" with "what", such as "what are your reasons for liking it?", or "what about it do you like?".

Examples of probing questions:

PARTICIPANT SAYS:

It is good.
I like it.
I like the color.

I will be useful.
It works.

MODERATOR SAYS:

What about it is good?
What about it do you like?
What about the color do you like?

In what way will it be useful?
How can you tell that it works?

What do you think of...?
How do you feel about...?
Where do you learn about...?
What do you like best about...?
Can you tell me more about...?
What do you mean by that?
What makes you feel that way?
Can you think of an example of that?
I'm not sure I understand what you mean by....
What does the message say for you?

What does it say to you personally?
What were yo thinking as you heard it?
What stood out in your mind?
You mentioned something about....

(Note: Many of these examples of probing questions are taken from
Mary Debus' book, mentioned earlier.

GUIDELINES FOR PLANNING AND ARRANGING LOGISTICS

What kinds of people compose the focus group?

The focus group participants are representative of the target audience. Consider such characteristics (variables) as:

- age and gender
- income level
- educational level
- social class
- profession
- lifestyle
- family characteristics
- level of expertise in the topic area
- geographic region.

If there is a variation among any of these characteristics in your target audience, try to include participants with the whole range of characteristics, so that you will hear representatives of different points of view.

How many focus groups do you conduct on each topic?

Each group must be homogeneous, so that participants are talking to their peers, and feel comfortable disclosing information about themselves to "people like me".

Determine how many homogeneous groups compose your target audience. Does it include men and women? Married women with children and younger women, not yet married? People from the cities and from rural areas?

Conduct as many groups as necessary to be able to recognize that very little new information is coming forth; this may be as few as two, or as many as three or four of each homogeneous group.

How many participants do you have in each group?

Each group has six to ten participants, depending on:

the purpose of the focus group; whether you want to probe very deeply, in which case you want fewer group members, and

what your logistical constraints allow.

How long do the groups run?

Each group runs between 45 and 90 minutes, depending on:

the purpose of the group, how extensive the information you want is, and how deeply you want to probe;

how interested and talkative the members are, and

what your logistical constraints allow, including how difficult it is to ask participants to stay for more than 45 minutes.

What is the ideal setting of a focus group?

The setting depends on:

the purpose of the group: is the topic personal, and best handled in a home or other social environment, or is it professional, and best handled in an office or institutional environment?, and

what your logistical constraints allow.

The ideal setting is:

private
non-threatening
comfortable
free from distractions
convenient for the participants
amenable to tape recording
if possible, allowing observers to be present
without disrupting the group.

How do you seat participants?

Participants are seated in a semi-circle, with the moderator facing the semi-circle. This allows the moderator to make eye contact easily with all participants, and participants to make eye contact easily with most other participants. It prevents any participants from being seated next to the moderator-- where eye contact is ore difficult, and where a higher status may be projected.

Is it best to have one or two moderators?

One moderator, with careful planning and preparation, can handle all the tasks.

Only one moderator should pose questions and discuss the topic with the group.

A second person, if available, can help the moderator to:

- fend off distractions
- operate the tape recorder
- listen and observe body language
- contribute to the report on findings.

If you are conducting a series of focus groups, it would probably help you to have an assistant for the first few groups, until your job becomes routine.

How do you recruit participants?

Enlist the help of colleagues and others who know the target audience to select representative participants.

Personalize the invitation.

Make the experience sound interesting, worthwhile and enjoyable.

Remind invitees within 24 hours of the meeting time.

Help them get transportation, if necessary.

Offer additional incentives, if possible, such as:

- a meal or refreshments
- health promotion products
- money.

Remember...

The attention you pay to planning will influence the results of your focus group efforts. Allow yourself plenty of time to set up the groups, and enlist as much help as you can in doing so.

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HANDLING DIFFICULTIES IN THE FOCUS GROUP

Handling group difficulties

If the group becomes too boisterous and out of control:

remind them of the first ground rule: one person speaks at a time;

restate the question at hand and ask them to address only that question.

If the group becomes dull and unresponsive:

ask yourself:

are the issues perceived as irrelevant to their interests?

is the group so large that it inhibits spontaneous comments?

is the pace too rapid or too slow?

have you emphasized how important everyone's comments are?

try the following:

take a break and talk with individual participants;

ask direct questions that require short answers of everyone;

get up and move around.

Handling difficult participants:

Sometimes, individual participants cause problems in focus groups. Here are which frequently occur, and some suggested strategies for handling the problem:

The dominating participant: This person attempts to take over the group--initiates conversations, defends her or his position, searches to influence others, and must have the last word.

Avoid eye contact, or turn your body away from the dominating person. Call on other members of the group by name. If necessary, politely tell the dominating person that although her or his thoughts are very interesting, you'd like to have the ideas of other group members as well.

On occasion it may be necessary to ask a dominating participant to leave the group. This can be done by explaining to the person that "because you know so much about _____, we'd like to talk with you alone after the group session.

The timid participant. This person is hesitant to speak at all, may be generally shy, anxious about the group situation, or not feel her or his opinions are worthwhile.

Use eye contact to pull the timid group member into the discussion and to communicate interest in what she or he has to say. Observe the timid member closely to see when she or he is ready to speak. If necessary, find an easy, nonthreatening question and encourage a direct response. If the participant becomes too ill at ease, continue the discussion with other participants and come back to her or him later.

The expert participant. This is a special form of the dominating participant. Even if she or he is not attempting to lead the group, others will defer to her or him and their own opinions will be stifled.

Determine if the participant is a genuine expert or a pretend expert. If genuine, remind her or him that all comments are important and that others should be permitted to contribute, or ask the expert to respond only after others have been heard. It may also help to preface issues with "I know Hussein is probably aware of..."

If the participant is not really an expert, ask other group members to comment on her or his responses. It may even be necessary to be forceful and challenge her or him as much as the group will tolerate.

The verbose participant. This person goes on and on, seemingly without end or purpose--may be a compulsive talker, or may be excessively nervous.

Be more directive. Use probes to request specificity and concreteness. Direct the participant back to the topic at hand. It may be necessary to politely interrupt her or him. Remind the participant of the many topics you need to cover in a limited time frame. Do all of this carefully without alienating the participant.

The irrelevant participant. This person makes comments which don't relate to the topic area and can steer the group off the subject. She or he may be truly unknowledgeable, nervous or simply a poor listener.

Try restating the question or paraphrasing it. Consider coming back to the question at a

later point in time.

The incomplete participant. This person gives partial answers or even nonresponses, such as "I don't know." These participants are especially frustrating. Their behavior often comes from lack of confidence or unusually high anxiety.

Work on strengthening rapport early in the discussion in order to prevent this from happening throughout the group. Try to get elaboration through restatement. Use other probing techniques.

The confused participant. This person appears confused or overwhelmed during the group. She or he communicates this either verbally or nonverbal.

Acknowledge the situation ("You seem confused...") Try re-phrasing the question, or perhaps provide an example. Attempt to ask the question again later in the interview.

The overly positive participant. This person is glowingly positive in all responses. She or he may want to please you, to tell you what she or he thinks you want to hear.

Remind the participant of what she or he has been told during the warm-up: that you want to hear both positives and negatives. Try playing devil's advocate: (I've heard some people say just the opposite...). Try third person wordings ("What about other people that you know? How do you think they would feel?")

The negative participant. This person is negative in all responses. She or he may be using this interview to vent years of frustration and hostility. She or he may be determined not to tell you any favorable ideas or information.

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Be careful. Avoid reacting defensively. Try to defuse the participant by acknowledging her or his hostility or negativism ("You seem to be angry about this. That's okay, because I want to find out how you really feel..."). As above, try playing devil's advocate, or probing in the third person.

The hostile participant. This person attacks the moderator personally.

Again, use care. Try to defuse the participant by acknowledging the situation. Don't react defensively: Try a short period of silence. Put the onus on her or him to explain the reasons for the "attack".

The disrupting participant. This person disrupts the equilibrium of the conversation--may state that another group member's ideas are wrong or that the moderator's questions are stupid.

Attempt to re-equalize the discussion quickly. Ask other participants to comment on the disrupting participant's statement. (This may be dangerous if the disruptive statement embarrassed or angered someone). Or present an alternative point of view, "That's interesting but I've heard that some people feel..."). This gives other participants the opportunity to choose one side or the other and continue the discussion.

The questioning participant. This person continues to ask the moderator for her or his opinions and feelings.

Plead lack of experience or expertise on the subject. If that is inappropriate, acknowledge the situation ("Like anyone else, of course I have an opinion about this but our

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purpose today is to find out how you feel..."). If necessary, offer to give your opinions after the discussion is over. Another approach is to inquire as to the thoughts and feelings that led to the participant's questions. Try restating the question to the group.

(NOTE: The section on handling individual difficulties is taken almost directly from the Mary Debus Handbook cited above.)

REPORTING YOUR FINDINGS

Your responsibility is to describe what was said in the focus group. In most cases the decision-maker will interpret the meaning of what was said.

RAW DATA--DESCRIPTION--INTERPRETATION

In your report, describe the following:

- Responses to the questions of the topic guide.
- Descriptive phrases or words used by participants.
- Themes expressed by the majority of participants.
- Themes expressed by the minority of individuals.
- Enthusiasm or lack of enthusiasm of participants on each theme.
- Characteristics of participants.
- Characteristics of those participants who presented minority viewpoints.

You might follow the following procedure to prepare your report, but if your own thinking processes and report-writing procedures are different than this one, do what is comfortable.

- Immediately after the group session, write down impressions you want to recall.
- Listen one or more times to the tape and make notes.
- Write down particularly interesting words and phrases.
- Group the comments in accordance with the topic guide.
- Summarize particularly interesting themes or trends.

Take care to:

- Include all relevant information, whether or not you agree with it;
- Refrain from including your own opinion on the topic, or letting your opinion color what you say about others.

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