The Use of Focus Group Discussion Method in Nursing Research

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Abstract. Focus Group Discussion (FGD) method is a common approach used to collect data or information in qualitative research such as research in nursing. The main characteristic of this method is to use interaction data generated from discussions among participants. The main strengths of the FGD method are proven to be able to provide more accurate, in-depth, more informative, and more valuable data than other methods. However, the optimal implementation of this method is still debated as reported in much of the literature and the consensus of the FGD method as an ideal method for data collection has not been agreed upon by many research experts.

Keywords: FGD, Nursing, Research

1. Introduction

Focus Group Discussion (FGD) is a method of data collection that is commonly used in social qualitative research, is no exception in nursing research. This method relies on the acquisition of data or information from an interaction of informants or respondents based on the results of discussions in a group that focuses on conducting discussions in solving certain problems. Data or information obtained through this technique, besides being group information, also works as a group's opinion and decision. The advantages of using FGD methods are providing richer data and adding value to data that is not obtained when using other data collection methods, especially in quantitative research (Lehoux et al., 2006).

FGD as a method of data collection has various advantages and limitations. Nowadays, FGD is becoming popular as an alternative in collecting qualitative data in various researches, one of them is in the field of nursing. This is evidenced by the large number of nursing publications that use data collection methods through FGD methods.

This paper discusses the definition and purpose of FGD as a method of collecting data, identifying the characteristics of the FGD method, analyzing the various strengths and limitations of data/information obtained through the FGD method, and the use of the FGD method in nursing research.

2. Discussion

Definition and Purpose of the FGD Method

The definition of FGD method according to Kitzinger (1994) is to explore an issue/phenomenon specifically from the discussion of an individual group that focuses on joint activities among the individuals involved in it to produce a collective agreement. The activities of the individuals/ participants involved in the group discussion include talking to each other as well as interacting in giving questions, and giving comments to one another about their experiences or opinions on a social problem/issue to be defined or resolved in the group discussion.

In line with the definition above, Hollander, (2004); and Lehoux et al. (2006) define FGD method as a method for obtaining data/information through the social interactions of a group of individuals who in that interaction, fellow individuals influence one another. More specifically, Hollander, (2004) explains that the social interactions of a group of individuals can influence each other and produce data/information if they have similarities such as having common individual characteristics, similarity in social status, equality of issues/problems, and similarity of relations/social relations.

The FGD method is widely used by researchers to explore a range of life experience phenomena throughout the life cycle of a human through his social interactions within his group (Brajtman, 2005); (Oluwatosin, 2005); (Van Teijlingen & Pitchforth, 2006). The main purpose of the FGD method is to obtain data interaction resulting from a discussion of a group of participants/respondents in terms of increasing the depth of information to reveal various aspects of a life phenomenon so that the phenomenon can be defined and explained. Data from the results of interactions in group discussions can focus on or emphasize the similarities and differences in experience and provide solid information/data about a perspective resulting from the results of the group discussions.

The Characteristics of FGD

FGD method is a method of collecting research data with the final result providing results derived from the interaction results of a number of participants in a study, as is generally the case with other data collection methods. Unlike the other data collection methods, the FGD method has a number of unique characteristics, among others, a data collection method for the type of qualitative research and the generated data comes from the exploration of social interactions that occur during the discussion process carried out by the informants involved (Lehoux et al., 2006).

The characteristics of the implementation of FGD activities are carried out objectively and are external. FGDs need trained and reliable facilitators/moderators to facilitate discussions so that the interaction between participants is focused on problem solving. FGD method has characteristics of a sufficient number of individuals for one discussion group. One discussion group can consist of 4 to 8 individuals (Kitzinger, 1995); (Twinn, 1998) or 6 to 10 individuals (Howard et al., 1989).

The characteristics of problems/issues that can be obtained through FGD methods are issues/problems which promote an understanding of the various ways that shape the behavior

and attitudes of a group of individuals or to find out perceptions, insights, and explanations about social issues that are not personal, general, and non-threatening personal life (Lehoux et al., 2006). Thus, not all problems/issues can be collected through the FGD method.

Data collected through FGD method generally relates to various social events or issues in the community which can cause bad stigma for certain individuals or groups. The information needed from these individuals or groups is not possible to be obtained by other data collection methods. However, the FGD method is not appropriate for obtaining highly personal topics/data such as sensitive issues of personal life, health status, sexual life, financial problems, and personal religion (Kitzinger, 1995); (Lehoux et al., 2006).

Strengths and Weaknesses of FGD Methods

Many qualitative studies use FGD method as a data collection tool. As one of the data collection methods, FGD method has various strengths and limitations in providing data / information. As an example, FGD method provides more data than using other methods (Lehoux et al., 2006). The main strength of FGD method is the ability to use interaction between participants to gain a greater depth and wealth of denser data that is not obtained from in-depth interviews.

MacIntosh (1993) explains that the information or data obtained through FGD is richer or more informative than the data obtained by other data collection methods. This is possible because the participation of individuals in providing data can be increased if they are in a group discussion. However, this method is inseparable from the challenges and difficulties in its implementation. The optimal implementation of FGD method is still often the subject of debate among research experts and the consensus to agree on FGD method as an ideal methodology in qualitative research has not yet been achieved (McLafferty, 2004).

FGD method based on practicality and cost is a data collection method that is costeffective/inexpensive, flexible, practical, elaborative and can collect more data from respondents in a short time (Streubert, J & Carpenter, 2007). In addition, the FGD method facilitates the freedom of expression of the individuals involved and allows researchers to increase the number of their research samples. In terms of validity, the FGD method is a method that has a high level of face validity and is generally oriented towards research procedures (Lehoux et al., 2006).

FGD method also has some limitations as a data collection tool. In terms of analysis, data obtained through FGDs have a high level of difficulty to analyze and require a lot of time. In addition, varied discussion groups can add to the difficulty when analyzing the data that has been collected. The influence of a moderate person or interviewer also largely determines the final outcome of data collection (Leung et al., 2005). Furthermore, in terms of implementation, FGD method requires a conducive environment for the continuation of optimal interaction from the discussion participants (Lambert & Loiselle, 2008). Another limitation of the use of FGD methods can occur in general because researchers are often less able to control the course of the discussion appropriately.

The activities of individuals in asking questions and expressing opinions are quite varied, especially if there are individuals who dominate the group discussions so that they can influence the opinions of other individuals in the group. Here is the important role of researchers as trained and reliable facilitators in groups to prevent the above (Streubert, J &

Carpenter, 2007). In addition, Lambert & Loiselle, (2008) state that the use of FGD methods requires a combination with other data collection tools to increase the wealth of data and make the resulting data more valuable and more informative to answer the research problem.

The Use of FGD Methods in Nursing Research

FGD method is widely used in a variety of more complex social studies, none the least in the area of nursing that studies many clients from diverse social backgrounds. The use of FGD methods is widely reported in various topics, in the areas of nursing management practice and nursing education. At present, FGD method is widely used by nurse managers in evaluating various educational programs for patients (Leung et al., 2005). In the area of nursing education, (Howard et al., (1989) studied the evaluation of nursing students after graduating from education. MacIntosh, (1993) studied various distance learning strategies through teleconferencing activities for nursing students who explored in depth how the nursing students maintained their distant class participation. Furthermore, McKinley et al., (1997) also developed a measurement tool to evaluate the level of satisfaction of patients receiving excellent nursing services.

The use of FGD methods has also been reported in the area of nursing research to study life phenomena and social issues experienced by humans throughout their life spans. For example, the use of FGD methods in the area of community nursing has been used by Oluwatosin (2005) in developing assessment tools to study the health of a community. Powell et al., (1996) also used FGD methods to increase the validity of a mental health measurement tool. Other researchers namely Millar et al. (1996) had collected data on the level of satisfaction of nurses and clients with health services through FGD methods.

3. Conclusions

FGD method is one of the strategies to collect data that involves social interaction between individuals in a series of discussions. This method is proven to be widely used for data collection in various qualitative research projects as well as nursing research. Although FGD techniques may be very effective, fast, and economical in providing data/information, it is not always the most appropriate technique/way to collect data/information. FGD method requires a trained and reliable moderator to be able to facilitate discussion appropriately, its implementation requires a conducive environment, and varied discussion groups, and the results of data collection have a high level of difficulty to analyze. In special situations in nursing research, it is suggested using other data collection techniques/methods so that the provision of data becomes richer and more informative.

References

[1] Brajtman, S. (2005). *Helping the Family Through the Experience of Terminal Restlessness / Request PDF*. Journal of Hospice and Palliative Nursing Volume 7 - Issue 2. https://doi.org/10.1097/00129191-200503000-00010

[2] Hollander, J. A. (2004). The Social Contexts of Focus Groups. *Journal of Contemporary Ethnography*, *33*(5), 602–637. https://doi.org/10.1177/0891241604266988

[3] Howard, E., Hubelbank, J. H., & Moore, P. S. (1989). Employer Evaluation of Graduates: Use of the Focus Group. *Nurse Educator*, *14*(5), 38–41. https://doi.org/10.1097/00006223-198909000-00019 [4] Kitzinger, J. (1994). The methodology of Focus Groups: the importance of interaction between research participants. *Sociology of Health & Illness*, *16*(1), 103–121. https://doi.org/10.1111/1467-9566.ep11347023

[5] Kitzinger, J. (1995). *Qualitative Research: Introducing Focus Groups*. British Medical Journal. https://www.ncbi.nlm.nih.gov/pubmed/7633241

[6] Lambert, S. D., & Loiselle, C. G. (2008). Combining individual interviews and focus groups to enhance data richness. *Journal of Advanced Nursing*, 62(2), 228–237. https://doi.org/10.1111/j.1365-2648.2007.04559.x

[7] Lehoux, P., Poland, B., & Daudelin, G. (2006). Focus group research and "the patient's view." *Social Science and Medicine*, 63(8), 2091–2104. https://doi.org/10.1016/j.socscimed.2006.05.016

[8] Leung, C. M., Ho, G. K. H., Foong, M., Ho, C. F., Lee, P. K. K., & Mak, L. S. P. (2005). Smallgroup hypertension health education programme: A process and outcome evaluation. *Journal of Advanced Nursing*, 52(6), 631–639. https://doi.org/10.1111/j.1365-2648.2005.03640.x

[9] MacIntosh, J. A. (1993). Focus groups in distance nursing education. *Journal of Advanced Nursing*, *18*(12), 1981–1985. https://doi.org/10.1046/j.1365-2648.1993.18121981.x

[10] McKinley, R. K., Manku-Scott, T., Hastings, A. M., French, D. P., & Baker, R. (1997). Reliability and validity of a new measure of patient satisfaction with out of hours primary medical care in the United Kingdom: Development of a patient questionnaire. *British Medical Journal*, *314*(7075), 193–198. https://doi.org/10.1136/bmj.314.7075.193

[11] McLafferty, I. (2004). Focus group interviews as a data collecting strategy. In *Journal of Advanced Nursing* (Vol. 48, Issue 2, pp. 187–194). https://doi.org/10.1111/j.1365-2648.2004.03186.x
[12] Millar, B., Maggs, C., Warner, V., & Whale, Z. (1996). Creating consensus about nursing outcomes. I. An exploration of focus group methodology. *Journal of Clinical Nursing*, 5(3), 193–197. https://doi.org/10.1111/j.1365-2702.1996.tb00249.x

[13] Oluwatosin, A. (2005). Focus Group Discussion An Essential Tool in Community Health Nursing Research. *West African Journal of Nursing*, *16*, page 30-35. https://www.scirp.org/(S(351jmbntvnsjt1aadkposzje))/reference/referencespapers.aspx?referenceid=1 917906

[14] Powell, R. A., Single, H. M., & Lloyd, K. R. (1996). Focus groups in mental health research: Enhancing the validity of user and provider questionnaires. *International Journal of Social Psychiatry*, *42*(3), 193–206. https://doi.org/10.1177/002076409604200303

[15] Streubert, J, H., & Carpenter, D. R. (2007). *Qualitative research in nursing Advancing the humanistic imperative* (Fifth Edit). Scientific Research Publishing. https://www.scirp.org/(S(351jmbntvnsjt1aadkposzje))/reference/ReferencesPapers.aspx?ReferenceID =961159

[16] Twinn, S. (1998). An analysis of the effectiveness of focus groups as a method of qualitative data collection with Chinese populations in nursing research. *Journal of Advanced Nursing*, 28(3), 654–661. https://doi.org/10.1046/j.1365-2648.1998.00708.x

[17] Van Teijlingen, E., & Pitchforth, E. (2006). Focus group research in family planning and reproductive health care. In *Journal of Family Planning and Reproductive Health Care* (Vol. 32, Issue 1, pp. 30–32). https://doi.org/10.1783/147118906775275299