Conducting focus groups with children and young people: strategies for success

Faith Gibson

Senior Lecturer in Children's Cancer Nursing Research
UCL Institute of Child Health & Great Ormond Street Hospital for Children
NHS Trust

Abstract   Focus groups have become a popular and widely used method in qualitative research across the diversity of healthcare. Their use however has been applied mainly to research with adult participants. Only in the last 10 years have we witnessed an expansion in their use with children and young people. This paper describes briefly the characteristics of focus groups before focusing exclusively on the methodological and practical concerns when conducting focus groups with children and young people. Focus groups require considerable preparation and skill to run. Strategies are detailed in this paper to achieve two important outcomes, successful data collection and a positive experience for participants.

Keywords   focus groups, children, young people, methodological concerns, practical strategies

Introduction

Focus groups are popular and widely used in qualitative research across the diversity of healthcare. Their history, use and development can be traced in many authoritative texts (Bogardus, 1926; Merton and Kendall, 1946; Krueger, 1994; Morgan, 1996; Morgan and Krueger, 1998; Greenbaum, 1998; Stewart and Shamdasani, 1990; Barbour and Kitzinger, 1999; Fern, 2001; Puchata and Potter, 2004). This literature for the most part focuses on adults as participants.

Only in the last 10 years have we witnessed an expansion in the number of publications in which they are used with children and young people. The majority of activity is in health education and health psychology, with a total of 93 empirical articles identified in a search undertaken between 1982–2002 (Heary and Hennessy, 2005). Diversity in practice is apparent, with focus groups used in exploratory studies, programme development and evaluation, developing and adapting questionnaires, and to explore children's views and perspectives on a variety of topics, including sensitive topics such as adolescent sexual health. Accompanying this trend in use, methodological issues are beginning to emerge. The question 'can I use focus groups with children and young people' can now be answered more confidently.

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The question 'how do I run a focus group' remains more difficult to answer as the many 'how to' text books so often draw on experience working with adults. This does not mean that this body of literature is not helpful, far from it. But, using focus groups with children and young people is different. In highlighting the difference we must recognise the many similarities, and hence why the body of work detailing the focus group method is an excellent resource. This paper does not attempt to summarise this body of work, but rather refer to it alongside the author's personal reflections of using focus groups with children and young people. The use of focus groups involves the sequential steps of preparation, implementation, analysis and interpretation (Carey, 1994). This account focuses only on the first two steps, preparation and implementation.

Characteristics of focus groups

Krueger (1994: 6) defines a focus group as 'a carefully planned discussion, designed to obtain perceptions on a defined area of interest in a permissive, non-threatening environment'. It is one form of group interview, with the distinguishing feature of group interaction (Kitzinger, 1994), used to encourage in-depth discussion (Carey, 1994). Although this method is used to reflect the views of individual group members, it upholds the view that attitudes and perceptions do not develop in isolation (Morse and Field, 1996). The aim of a focus group is not to develop consensus but to produce qualitative data that provides insight into the attitudes, perceptions, motivations, concerns and opinions of participants (Kingry et al., 1990; Krueger, 1994), by generating a collective consciousness (McElroy, 1997).

Focus groups employ an interviewing technique with discussion taking place under the guidance of a moderator. The moderator facilitates discussion in a non-directive and unbiased way, using pre-determined questions (Kingry et al. 1990). A second moderator is often present, acting as note taker, observing group interactions, supervising recording equipment, but not participating in the ongoing discussion. Focus groups generate narrative data. Analysis is directed by the intent of the study, as well as the skills, time and commitment of the researchers (Morgan, 1993). The process of analysis is systematic and verifiable (Kingry et al., 1990), as well as reflective of the group context (Carey and Smith, 1994).

Running a focus group

The consensus would seem to be that focus groups require considerable preparation and skill to run. Consideration is given here to factors that will increase success and go some way to ensure a positive experience for participants.

Early planning

Having selected focus groups as the chosen method, detailed planning centred on goals and design will ensure a productive session (Morgan, 1998). The number of focus group sessions should be decided in advance. Consideration needs to be given to both practical issues, such as budget and timeframe, as well as substantive issues, such as research question and range of children and young people to be included. Sample and sampling strategy will be determined by the research question, but accomplishing it may require some creativity and flexibility. Engaging children and young people in the planning of research has the potential to produce more interesting recruitment materials and help with scheduling that is more reflective of a

young person's diary (Kirby, 2004). Morgan (1995) argues that recruitment is the single most common source of failure in focus group research. A sampling strategy must encompass over recruitment and thought given to sustaining engagement with participants once recruited.

Location also requires some thought, balancing accessibility and familiarity with context issues such as ownership of the space and the research relationship. The contribution of children and young people to a research study may increase the knowledge of potential participants. This may influence uptake that converts into attendance. If providing an interesting space might influence uptake, such as a museum, zoo, or arts centre, this will need to be factored into the budget as interesting often equates to expensive.

The skills of a research team moderating focus groups will have influenced choice of method: nonetheless further training or a refresher period observing an expert in the field might be advisable. The style and format of group discussion requires some thought to standardise coverage and analysis as well as allowing for an accurate timetable of events to be shared with participants at the recruitment stage. Decisions about approaches to recording need to be factored into the planning process. Ethical committees will need evidence about the consenting process and handling of data that will be specific to written notes, and audio/video recording. The approach to recording is an important inclusion in information sheets as familiarity and confidence with various methods will vary in children and young people and may lead to unnecessary anxiety.

Other supplementary materials needed for the group also require some thought, specifically where activities are included. Anticipate generating potentially large amounts of rich and dynamic data, and hence give considerable thought to the analysis plan, that includes a systematic approach, time frame and reporting. Finally, allow sufficient time for piloting both to minimise the necessity for new data collection and to avoid collecting excessive amounts of data.

Group composition factors

The increasing resource of 'how to' books reveals an often didactic approach to group size and composition (Kitzinger and Barbour, 1999). Age should dictate the size of your group. Working with younger children (6–10 years), groups of four to six engendered lively discussion and manageable activity (Kennedy et al., 2001). Larger groups of up to eight are possible with older children (Horner, 2000). But too large a group may limit all children participating (Green and Hart, 1999; Roose and John, 2003). It is more difficult to recommend the least number of participants, as even with four young people in one of our studies rich data was still possible (Edwards et al., 2003). Probably four to five participants are ideal with younger groups (Morgan et al., 2002). The tension regarding size is not to be too small otherwise parallel interviews may result, or too large for a moderator to maintain the focus of discussion (Hennessy and Heary, 2005). Unlike research involving adults (Fern, 1982) the effect of group size with children and young people has not been described.

Variation in age in groups must also be considered. There should only be 1–2 year age difference between participants, since style, ability, sensitivities and level of comprehension and abstraction differ substantially at different ages (Kennedy et al., 2001). There is less evidence regarding the lower age limit for children and the reliability of the focus group method. Consensus would seem to be that they are unsuitable for children under 6 years due to limited social or language skills (Heary and

Hennessy, 2002), but using age for inclusion criteria might not always be helpful. Using developmental cognition might be more appropriate. This will rely on knowledge of your potential participants. We know that chronically ill children, for instance, have much more experience communicating with healthcare professionals (Broome and Richards, 2003): and may therefore be able to participate in a focus group even when quite young.

Age is only one of the composition factors to be considered. Culture, social status, ethnicity, gender and personality are also important individual characteristics that can be controlled or varied in a group (Fern, 2001). Gender is more often the focus for discussion with homogeneity often recommended (Heary and Hennessy, 2002). However, both single and mixed gender groups have been successful (Hill et al., 1996). Not surprisingly a number of authors suggest that the nature of your research should influence your decision about gender and group composition. Less clear, in terms of advantages or disadvantages of the method, is the recruitment of friendship groups, through youth clubs or schools, or groups of children and young people already well acquainted through sharing a particular health condition?

Ultimately, these factors should guide your planning but should not hinder imaginative approaches as rarely can researchers control, or even want to control for all characteristics. Often practicalities of recruitment and last-minute dropouts become prioritised over group composition when scheduling and flexibility are stretched to reach your ideal sample size: another reason for planning in detail your recruitment and sampling strategy.

Geographic location and scheduling

There are endless possibilities where focus groups can be held. Choice is somewhat dependent on age-stage and physical abilities. For example, for younger children, new environments and strange adults can be anxiety provoking (Kennedy et al., 2001). For children with disabilities who need to use wheelchairs, access may become the priority in your decision. Safety, whatever age group you are working with is crucial. Transport, the need for an accompanying adult, detailed directions and accessible facilities at the location are important to clarify well in advance to ensure suitability for each participant. Budget constraints might mean that healthcare research is undertaken in a hospital setting and might disadvantage the group by asserting the patient–professional relationship. If necessary, holding groups away from patient areas in 'office space' may reduce this problem. The use of schools for some groups may seem an ideal option, as participants are 'insiders' and hence the power imbalance between participants and researchers maybe reduced (Morgan et al., 2002; Broome and Richards, 2003; Hill, 2005). But familiarity can also become a distraction as well as influence a type of behaviour normally associated to that particular setting such as waiting for permission to speak by raising a hand (Green and Hart, 1999). Distractions for the researcher should also be avoided such as windows overlooking high traffic areas, telephones and busy wall decorations (Dilorio et al., 1994). If possible a pre-visit is recommended. However, best plans may still unravel when the unexpected happens, as in one of our studies where a choir was practicing in the next classroom and in another where people using the restaurant were able to use toilet facilities in an upstairs area we had negotiated for our own use.

Scheduling creates another set of challenges when working with children and young people who naturally have very busy lives. Working around a school timetable, homework, exams, holiday periods and after school activities is difficult enough.

Likewise for those young people in employment working around work hours and social activities can also be difficult. Add to these issues hospital appointments or hospital admissions when undertaking health service research and it is not surprising that the flexibility of a research team will be tested. Evening groups are not always an alternative option, particularly for young children as fatigue after school may affect concentration (Kennedy et al., 2001). Weekends may seem the best alternative but only where family patterns allow attendance. We have reimbursed the whole family to travel to a venue, thus minimising disruption to family time as well as offering a treat to siblings of a day in London. More applicable to young people might be to reimburse a friend to accompany them. Offering choice where possible is the preferred approach to scheduling, but anticipate a logistical nightmare to plan. Other more creative solutions may be on-line focus groups (Stewart and Williams, 2005) or telephone focus groups (Hurworth, 2004).

Creating the right environment

Making children and young people feel welcome and reducing their anxiety about participating begins at the stage of recruitment. Successful early engagement will establish a way of working and interacting with children and young people throughout your study. Both verbal and written communication should establish a relationship based on respect and valuing their contributions. It will be important to put participants at their ease as soon as they arrive at the venue. Use of first names and informal introductions to other participants and to the venue will be important. Family members should also be introduced and welcomed as they will need to feel confident that they are leaving their child in safe and comfortable surroundings. Information such as provision of food and drinks, and the time to collect their child should all be reaffirmed. Mobile phone contact should be established, to reassure both family members and participants. The facility for children and young people to leave the group before it concludes must be in place. There are many reasons why they may chose to leave, not all of which can be anticipated in advance. Creating early opportunities for making choices and participate in decisions will establish a supportive relationship in which they will feel able to speak out and express their needs (Shier, 2001). A further strategy is to have a member of your research team available if they do decide to leave the group, this foresight might reassure family members that their child's need's will be attended to at all times. This role is also useful to attend to the needs of late arrivals, and thus limits 'other things' that could distract the moderator.

Room size, light, temperature and seating arrangements can all affect the group discussion (Krueger, 1998). Ensuring comfort, encouraging an informal atmosphere, minimising distractions and maximising interactions must all receive some attention. Refreshments must be provided and be available throughout the period of the meeting, or used strategically to break up a session. Seating arrangements should be planned in advance to maximise interactions among the participants and maximise observer involvement (Dilorio et al., 1994). A circular arrangement may be best and permits the group moderator(s) to sit among participants projecting a non-authoritarian climate. Choosing to sit on chairs or on the floor will be an age-dependent question: whatever you think will give a relaxed and informal atmosphere. The inclusion of a table is personal choice, but it can make children and young people feel less self-conscious (Hennessy and Heary, 2005). Seating provides another opportunity to introduce an element of choice.

Once seated and general introductions have taken place we have found ice-breaker's to be another useful method to put children and young people at their ease, with other participants as well as the moderators. Ice-breakers serve a number of functions. They give everyone an opportunity to practice saying something in the group, make participants feel relaxed and establish an environment in which sharing and listening are valued. The format of ice-breakers is varied, although they must be age specific and ensure some continuity to the design of the actual focus group. How much time you have available might well influence how creative, active and participatory you want the ice-breaker to be. In our research we have had success with a pencil and paper chart that asks children general questions to promote a free flow of communication, such as who is your favourite band, what is your favourite TV programme (Doswell and Vandestienne, 1996). In another study where we wanted to encourage early group activities, we used a similar format to a the BBC radio programme 'Desert Island Discs' asking participants to chose what three items they would take to the island, then working with the whole group to agree which three items they would take between them (Gibson et al., 2005a). Involving oneself in the ice-breaker is often helpful in order to breakdown the adult–child relationship more often associated with a classroom setting or professional relationship. Fun and movement can create a relaxed environment, promote group cohesiveness and might well influence the quality of the discussion that follows.

The moderator

The skills and personality of the moderator cannot be over-emphasised (Kennedy et al., 2001). Their skills will influence the success of the discussion and the quality of the outcome (Krueger, 1998). The moderator is not neutral; they are a person, a member of a racial group, an age category and a gender: any one of these factors can inhibit or promote openness within the group (Krueger, 1994). Matching the characteristics of your moderator to the group is one suggestion for controlling for these effects (Fern, 2001). This may be a solution for market research that may not transfer to your research. A further solution is working with children and young people as researchers and co-researchers (Kirby, 1999; Ruland et al., 2006). Being mindful of these factors and 'knowing' your participants is the most important strategy. Setting one apart from other authority figures we have found to be the most useful approach. This does not entail trying to 'mimic' your participants in terms of appearance or trying to transcend your adult identity, which would be inappropriate in the context of adult-controlled research (Morgan et al., 2002). A child-friendly repertoire, including patience, warmth, humour, respect, active listening and flexibility are skills found to be particularly useful. Being non-judgmental and adaptable are also qualities that will promote participants' trust in the moderator and increase the chance of open and interactive dialogue (Gibbs, 1997).

Hennessy and Heary (2005) outline three important functions of the role: to make the group feel comfortable and at ease, to keep the group discussion focused on the topic and ensure all children and young people have the opportunity to contribute, as well as seeking clarification to ensure an accurate account of their view is captured. Mastering success to moderate the four important phases of the group, which are beginnings, openings, discussion and wrap-up, is an art in itself (Stewart and Shamdasani, 1990; Kennedy et al., 2001). Effective moderators need to apply knowledge of interviewing techniques and tactics, leadership skills and group dynamics (Stewart and Shamdasani, 1990). This knowledge needs to be supported

with skills, experience and confidence in working with children and young people. Remaining mindful of non-verbal signs, fatigue, discomfort and boredom also feature in the moderator role.

Training in the use of focus groups and observing experts running groups with children and young people are two important aspects of development. Experts can make the process look easy. The complexity and difficulty of the task should not be underestimated. Effective moderating skills are well described in many of the available texts (Krueger, 1994, 1998; Fern, 2001). If a number of moderators are expected to be involved in data collection, a training manual will be useful to maintain consistency in approach (Freeman et al., 2001). Additionally, preparing yourself mentally before the actual group is also important, remaining free from any thoughts and distractions, anxieties, or pressures that limit your ability to think and respond quickly (Krueger, 1998). Overall, you need to be relaxed, confident and familiar with the questions you are asking. If you are running a number of focus groups with the same assistant moderator requesting feedback on your performance might be a useful exercise for refining and modifying your approach.

Introducing the group

As many children and young people may not have participated in a focus group, although 'circle time' in schools is fairly commonplace, clarity from the start is crucial. A standard statement read aloud to each group is highly recommended to ensure each group receives the same information and nothing important is missed out. Decreasing performance anxiety is the role of the standard statement. The format and nature of the group discussion will need to be outlined in this statement, alongside reminders about confidentiality and what this means in a way that children will understand. Some ground rules are helpful such as avoiding talking at the same time, how to attract attention when wanting to speak, and that there are no right or wrong answers as this is not a test (unlike classroom work). Making it clear why they have been asked to participate, the aim of the discussion and how long the group will last are all important issues to remind about at this stage. Explaining the role of the moderator and assistant moderator is important to reduce any suspicion children may have of 'strangers', particularly strangers who are not speaking and scribbling in a notebook as is often the role of the assistant moderator. Other methods of recording also need to be explained and verbal permission to use taping equipment sought. Details about how the focus group will end, whether the assistant moderator is to provide a summary, and how you will de-brief are also important points. The key points of your statement can be displayed on flipchart paper, you might also choose to engage your participants at this stage and ask if they have anything to add to the ground rules.

Conducting and recording the discussion

The initial opening question and the sequencing of questions that follow must be well thought out. A pre-determined structure, listing the topics to be discussed, that allows for flexibility and space for participants to offer contributions on topics important to them, particularly for young children, is preferred to working strictly through a series of questions. Exploring emerging issues and diversity of view requires the moderator to be spontaneous and adaptable. Approaches to presenting questions should also be considered, with the use of 'what' or 'how' questions preferred to 'why' questions and those that initiate 'yes' or 'no' responses. Relevant, sensitive probes for explanation, checking meaning and clarification are helpful, aimed at individuals as well as the

whole group. Using phrases such as, 'what does everyone else think', 'does anyone think something different' as opposed to directing a question at an individual who may be shy is a preferred method. Or going round each member of the group and calling on the children by name can be a useful strategy with young children who might be excited and all talking at once (Kennedy et al., 2001). Using children's names also aids transcription, most important when children will have moments of speaking over one another. As far as possible using the terms they use is helpful as long as meaning is checked out first, this will ensure a shared understanding of the discussion. Giving clear messages that the moderator wants to hear a full range of views requires management to address dominant participants and draw out reticent participants. At one end of the spectrum is the young child that is excited and keeps jumping up and down to speak and interrupts everyone else and at the other is the young person who makes no natural response to a question and when probed is monosyllabic: both require a skilled moderator to respond sensitively, using both verbal and non-verbal language of engagement. The role of the assistant moderator will be to capture this observational material and emotional climate as well as the spoken word.

In addition to written notes you might select to use audio-tape or video recording equipment. Choosing the least intrusive method might be preferred for young children. Additionally, your decision might be based on your skills of data analysis where experience of using and analysing video material is less developed. The aims of your study may once again influence your decision. Confidence in whatever equipment you decide to use will be important in the now techno-confident world of children you will want to at least appear to know what you are doing, especially when things go wrong! Familiarity, pre-testing and back up systems all help to increase confidence and avoid recording failures.

Using exercises and activities

A further decision to be made in the planning stage is the inclusion of exercises or activities. Their inclusion is an excellent strategy to maintain children's concentration and interest as well as enabling participants to work together (Hennessy and Heary, 2005). They can also be helpful as a fun warm-up session when children first arrive at a group. Your decision will be based on the way in which you want the discussion to be organised, reflective of your study and overall aim. Time available will be an important factor. Younger children can be kept focused on an activity for about 45 minutes to one hour, whereas older children and young people, with good moderator skills, will maintain focus for about 90 minutes. The inclusion of activities can lengthen the concentration period. They can also provide young children with a different way to express their ideas and for researchers to access children's meanings (Morgan et al., 2002), especially in areas of sensitive questioning (Thomas and O'Kane, 2000). A variety of techniques encompassed more often within participatory research methods are available, such as drawing, role-playing, puzzles, visual prompts and fantasy wishes (Kennedy et al., 2001; Coad and Lewis, 2004; Veale, 2005). Particularly helpful and adaptable to many settings is the National Evaluation of the Children's Fund (NECF, 2005) 'evaluation cookbook'. One example from a research study was Hill et al. (1996) who used very creative and developmentally appropriate techniques to explore children's emotional experiences and wellbeing. In one of our studies we used drawings from a young man with cancer which depicted his thoughts on fatigue to prompt young people to reflect on what fatigue might mean to them. Similar activity based approaches might be used to evaluate participant's own views of

participating in focus groups. A 'secret box' in which participant's post their views is just one approach to bear in mind (Punch, 2002).

Rewards and recognition for participation

Recognising that children and young people, like adults, have economic lives requires they should be compensated for their participation (Morgan et al., 2002). Good practice is to reimburse in full travel expenses for participants and family members. Incentives to participate are more controversial. Although focus group experts such as Morgan (1995) recommend the use of incentives to aid recruitment, their use in research with children is not so straightforward. Some guidance is now available instructing researchers to consider both type and level of incentive based on age, degree of burden and the potential to coerce (Rice and Broome, 2004). If incentives are to be used they must be detailed in the ethics submission and stated in the consenting process. Financial reward may in fact not be the most appropriate incentive. You might consider asking children of similar ages what would be the most effective incentives to participate in a study. Less controversial is a token of thanks, offered to children following participation, and not disclosed at the stage of recruitment. They key word here is offer as we have known some young people refuse.

Thanking children for their contribution at the conclusion of the group is an important message that shows respect. Similarly receiving feedback about the results of a study in an appropriate format also values their participation. In one study we used regular newsletters to keep participants informed of progress (Gibson et al., 2005b). Children have commented frequently about the lack of feedback they receive, such as one young person who had been treated for cancer: 'I have taken part in lots of studies, but I never hear anything about what happened, that's so annoying' (personal communication). This is another opportunity to work with children and young people to design feedback that is relevant, interesting and appealing. In one study we worked with a reference group of children who commented on both recruitment and feedback materials, with a definite benefit to both style and content (Gibson et al., 2005b).

Working within an ethical framework

Numerous guidelines are now available to steer both novice and experienced researchers when working with children and young people (Neill, 2005). The question of ethics is not however unique to this method. Specific to the method are two factors, that disclosures by participants are shared with group members and not only a research team, and that intense group discussion may give rise to stress or distress in individuals (Smith, 1995; Hennessy and Heary, 2005; Goodman and Evans, 2006). Safeguarding participants in focus groups is a priority. The ongoing consenting process is one place to emphasise these issues. What disclosure and confidentiality mean will need to be discussed with children and young people, their understanding checked and recorded in research notes (Ungar et al., 2006). Once explained to parents/family members they can support the research team in explaining the terms using real examples from their own lives, which will make it easier for young children to grasp.

Avoiding stress or distress cannot be guaranteed. Both participants and family members will need to be reassured of how you will identify and monitor stress levels, how you will intervene and manage any situation that arises. Assuring participants and others in the consenting process about moderator training, experience working with children and young people, and the role of debriefing to discuss reactions to

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discussions will help to alleviate any worries. Having a third person from your research team available to be with participants for a period outside of the group if anyone appear to be upset can also be reassuring.

Conclusion

Focus groups offer a valuable, versatile, interactive, fun and developmentally effective method for use with children and young people. But conducting groups is not without its challenges; some have been highlighted in this paper. Greater attention needs to be given to the reporting of specific methodological issues and context associated with young participants to enable application to a range of study settings and diverse groups. Children's evaluation of the method also warrants some attention to ensure that participating in research is a positive experience for both children and young people.

Acknowledgements

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Dr Faith Gibson Senior Lecturer in Children's Cancer Nursing Research, PhD MSc (Cancer Nursing) RGN RSCN Oncology Certificate Cert Ed RNT FRECN, in the Centre for Nursing and Allied Professions Research. Focus of research includes:

1. Improving process and outcomes of care for children/young people with cancer and their families.
2. Improving assessment and management of symptoms.
3. Improving skills of the nursing workforce to deliver cancer care.

E-mail: Gibsof@gosh.nhs.uk