FOCUS GROUP DISCUSSIONS NTD Research Methods

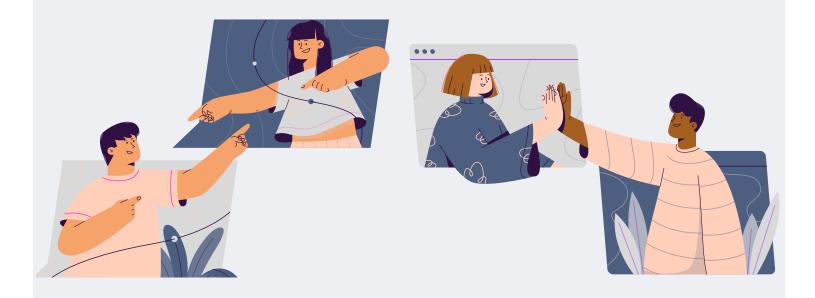
WHAT IS IT

FGDs rely on group interactions to stimulate discussion on research issues. They are led by trained facilitators and have up to 10 participants.

The purpose of focus groups is to better understand how a particular group thinks or feels about an issue, idea, product, or service. The aim is not to reach a consensus but to uncover a broad range of perspectives and experiences.¹

WITHIN NTD

HOW TO USE IT



iCHORDS

SAMPLING STRATEGY

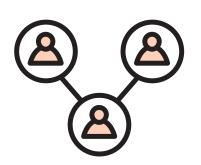
Focus groups can consist of up to 6-10 participants with similar backgrounds or experiences relative to the research issue. Researchers should be aware of power dynamics when forming groups in order for participants to feel comfortable disclosing information.

Social Factors



These include access barriers, incentives for implementers to deliver interventions, local understanding of disease, political factors, and livelihood patterns.²

Community Response



FGDs provide insight into compliance and resistance towards NTD programs. Masong et al. revealed that women denied MDA treatment due to fears of forced sterility, resonating with local anxieties behind the intention of development projects.³ FGDs are a means to identify knowledge gaps and doubts among communities.

Protocol Adapted From: https://besjournals.onlinelibrary.wiley.com/ doi/full/10.1111/2041-210X.12860

FACILITATION

Facilitators must be well trained to ensure even participation, preserve careful wording of questions, maintain a neutral attitude, adapt to the flow of the discussion, and summarize the session to reflect opinions evenly and fairly.

Consider having one facilitator and one observer to transcribe interactions. Audio recordings of the interview are recommended but consent must be granted by the participants.

ANALYZING DATA

Group interactions such as non-verbal cues, overlapping discussions, and quiet conversations should be included in the verbatim transcripts. Different strategies can be used to organize and analyze interview data. Refer to IDI sheet for more information

REPORTING RESULTS

Participants should know how findings will be used. Reporting should use stratifiers, such as m/f, position/role, and age, to ensure participants remain anonymous.



KEY STUDIES

- Coverage, compliance, and some operational issues of MDA during the programme to eliminate lymphatic filariasis in Orissa, India https://onlinelibrary.wiley.com/doi/full/10.1111/j.1365-3156.2004.01247.x
- Should I get screened for sleeping sickness? A qualitative study in Kasai province, Democratic Republic of Congo https://pubmed.ncbi.nlm.nih.gov/22272367/
- The Role of Personal Opinions and Experiences in Compliance with MDA for Lymphatic Filiarsis Elimination in Kenya https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3501492/

WHY USE IT

FGDs characterize **challenges**, **norms**, **values and realities** from group perspectives, allowing interventions to be designed in a way that meets community needs. It can provide a Interactions from participants sharing their views, hearing the views of others, and refining their own views can increase the **clarity**, **depth**, **and detail** of the discussion otherwise unattainable from individual interviews.¹

voice to marginalized and vulnerable populations often left behind.

Focus Group Discussions	
ADVANTAGES	DISADVANTAGES
 Synergistic group interactions Generate a wide variety of data in a timely manner Allow groups to highlight issues important to them Flexible and adaptable Can used in combination with other methodologies 	 Disproportionate speaking times Participants may be uncomfortable sharing in front of others Difficult to maintain confidentiality in group settings Large quantity of data acquired can be time-consuming to transcribe

References

- 1. Hennink MM. Focus group discussions. Oxford University Press; 2013.
- 2.Bardosh K. Global aspirations, local realities: the role of social science research in controlling neglected tropical diseases. Infect Dis Poverty [Internet]. 2014;3(1):35. Available from: https://doi.org/10.1186/2049-9957-3-35
- 3. Christine Masong M, Ozano K, Tagne MS, Tchoffo MN, Ngang S, Thomson R, et al. Achieving equity in UHC interventions: who is left behind by neglected tropical disease programmes in Cameroon? Glob Health Action [Internet]. 2021 Jan 1;14(1):1886457. Available from: https://pubmed.ncbi.nlm.nih.gov/33641612