

Learning to be a Qualitative Researcher as a Tool: Experience from Focus Group: An Integrative Review

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Abstract

**Purpose:** The objective of this article is to describe how to be a good tool in qualitative research.

**Background:** Health professionals are currently using focus-group interviews as a method for collecting qualitative data that is growing in popularity.

**Design:** An integrative review was conducted to review and integrate literatures. All of the studies provided answers to describe how to be a good tool in qualitative research. In addition, the PICO (population, intervention, control, and outcomes) format was applied for this study. First, the population was clinical and education providers. Second, intervention was procedure to be qualitative researcher. Third, procedure to be quantitative researcher was compared with the existing one. Lastly, outcome was the effect of procedure to be qualitative researcher (Elkins, 2010).

**Methods:** CINAHL Complete, Researchgate, SAGE Premier 2014, ProQuest Dissertations & Theses Global, Oxford University Press E-Journals, Wiley Online Library, SpringerLink and books written in English published from 2001 to 2015 were used as the sources for the studies by using a combination of set vocabulary and key words.

**Findings:** At total of 36 articles were found to meet the inclusion criteria. Most of the aforementioned studies used academic journals (51 %;  $n = 18$ ), while 17 (49%) books. Due to the diverse nature of the research methodology, the findings of the review in the present study are presented as a descriptive summary (Whittemore & Knaf, 2005).

**Conclusions:** Qualitative researcher is a help tool for qualitative research focused on complex issues involving human behavior and felt needs. Hence, the main goal of qualitative research is its contribution to understanding social phenomena based on the opinions and experiences of group participants.

**Keywords:** Focus group, Qualitative Research

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## INTRODUCTION

In general, qualitative research is the instrument used to examine subjective human experiences through the use of non-statistical analysis methods (Borbasi & Jackson, 2012). Qualitative research also involves naturalistic inquiry in the exploration of complicated human experiences (Moxham, 2012). Permission must be sought before commencing data collection. Next, the researcher needs to devise effective qualitative sampling strategy with the development of suitable digital and paper methods for recording the data obtained. Finally, the data needs to be stored with consideration given to potential ethical issues (Creswell, 2013). In cases where the research is successful in identifying the key or primary occurrence in the study, a similar set of qualitative research skills is required. Thus, the researcher needs to raise qualitative research questions aimed at interpretation with the research participants as experts. In addition, the researcher needs to gain an understanding of vital issues concerning the rigor or strength of qualitative research. This includes credibility, trustworthiness, and common validation strategies. As novice qualitative researchers, PhD students need to learn the methods for collecting data from focus group discussions or interviews. The present paper was written with the objective of addressing methods for learning how to

become a qualitative researcher serving as an instrument based on the researcher's experiences in conducting focus group interviews for the first time.

## METHODOLOGY

An integrative review was conducted to review and integrate literatures. All of the studies provided answers to describe how to be a good tool in qualitative research. In addition, the PICO (population, intervention, control, and outcomes) format was applied for this study. First, the population was clinical and education providers. Second, intervention was procedure to be qualitative researcher. Third, procedure to be quantitative researcher was compared with the existing one. Lastly, outcome was the effect of procedure to be qualitative researcher (Elkins, 2010).

The involved searching for full-text articles in online databases were found in the CINAHL Complete, Research gate, SAGE Premier, SAGE Premier 2014, ProQuest Dissertations & Theses Global, Oxford University Press E-Journals, Wiley Online Library, SpringerLink and books written in English. The researcher then used keywords to analyze the data yielded by the focus group and qualitative research. Limitations were set for the search, which means that only peer-reviewed academic journals and books written in English published from 2001 to 2015 were used. The primary topics had to

involve qualitative studies and research methodology. The reviewed produced 69 articles that were reviewed by the researcher and 36 articles selected for use in the study. Moreover, the author's experiences in working as a novice qualitative researcher were further applied to support the data yielded by the aforementioned search and literature review.

### CONCLUSION

In this article, the researcher has addressed the steps involved in learning how to become a qualitative researcher instrument by examining related research yielded by the researcher's literature review in the experience as a PhD student. The present paper involved a review of 36 studies exploring the experiences and impact of the focus group process and methodology. One of the researcher's key roles in the focus group process is his/her ability to examine issues in detail by motivating participant discussions. Nevertheless, researchers should never forget that focus groups yield optimal results when all participants enjoy comfort in their discussions. Sensitive focus group discussion topics present unique and daunting challenges with the potential for negative outcomes without the facilitation of a peer to enhance group trust and assurance. Qualitative researcher is a help tool for qualitative research focused on complex issues involving human behavior and felt

needs. Hence, the main goal of qualitative research is its contribution to understanding social phenomena based on the opinions and experiences of group participants.

### DISCUSSION

#### Qualitative Research Tool

Qualitative research is based on numerous theoretical perspectives such as critical perspective, post-positivist, constructivist, interpretive, postmodern and feminist (Liamputtong 2013; Borbasi and Jackson 2012; Jirojwong et al 2011). Qualitative studies generally employ methods resulting in text rather than digital output with the researcher as the research tool. A number of researchers, namely, Roman and Rallis (2003), Creswell (2007) and Carpenter and Suto (2008), described the universal characteristics of qualitative research as follows: 1) occurrence in the natural world, 2) based on participant interpretation, 3) context-centered, 4) focused on comprehensive descriptions and dimensions of reality, 5) use of mixed methods, 6) developed rather than prearranged, and 7) essentially interpretive.

According to characteristics of qualitative research, qualitative studies generally employ methods resulting in text rather than digital output with the researcher as the research instrument. Thus, qualitative

researchers are frequently required to shed light on the researcher's role in the qualitative process (DeWalt & DeWalt, 2010). Qualitative Research procedures require the researcher to be involved at every phase the study. This role begins with the definition of a design concept for the interviews, transcription, analysis, verification and reporting on the aforementioned concept and emerging themes. Hence, humans are vital components to the process whenever qualitative research instruments are involved (Fink, 2000).

Qualitative researchers have a duty to play diverse roles during the research process. One issue of controversy, however, is the idea that qualitative research involves in-depth handling of sensitive topics in addition to other risks incurred by both participants and researchers. Thus, there is a dire need for the availability of definitive protocol for the use both parties involved whenever necessary. Predicting the issues likely leading to distress can be a daunting task. Therefore, researchers need adequate training about how to predict potentially disturbing situations. One of the qualitative researcher's primary duties involves minimizing erroneous observation with the exertion of efforts to determine the facts. Thus, researchers need to keep updating investigation skills in methodology as they discover innovative techniques aimed at

improving the quality of studies on health and sociology.

As mentioned above, qualitative researchers are frequently required to shed light on the researcher's role in the qualitative process (DeWalt & DeWalt, 2010). Qualitative research procedures require the researcher to be involved at every phase the study. This role begins with the definition of a design concept for the interviews, transcription, analysis, verification and reporting on the aforementioned concept and emerging themes. Consequently, qualitative researcher is vital component as a tool in the process of qualitative research.

#### Tool Development

Generally speaking, qualitative research employs written or templated data collection guidelines covering headings, open-ended questions within each topic, and probes for following up on critical questions. Hence, data collection guidelines need to be developed for individual studies as a means of addressing specific research questions. Guidelines for data collection need to be developed in combination with experts on the issues and methods involved. Thus, content accuracy, clarity, validity, appropriate language and length are ensured. A quickly designed data collection guideline with inconsistent data collection methods (e.g., via interviews, focus group interviews or

discussions or observation) can yield erroneous data with a low degree of credibility and confirmability. Whether the researcher's data collection strategy involves observation, interviews, or analysis of preexisting text, a rigorous qualitative article needs to address which data collection strategy was employed (Tong, Sainsbury, & Craig, 2007).

#### Qualitative Researcher Characteristics

In preparing for the group process, qualitative researchers need to study the research topic, develop guideline questions, select and recruit group members. Venues, tape-recording equipment, and leader preparation are also required. To prepare the setting, qualitative researchers should create a relaxed, comfortable setting conducive to discussion and data collection with a secure environment where all participants are aware of the process and expectations. In developing a guide for the moderator, the qualitative researcher needs to divide the content into the following three sections: engagement questions, exploration questions and exit questions. With exit questions allow the researcher/moderator can determine whether or not he/she has gained an accurate understanding and whether or not any information that should be included was missed. The group size usually ranges from four to twelve and the researcher is left with the task of determining the optimal group size

which depends on participant background, issue complexity and moderator expertise (Krueger, 2006).

As a group, qualitative researchers tend to share the following traits: 1) firm commitment to exploring issues based on perspectives of participants instead of personal agendas; 2) extensive interactions with participants; 3) recognizing society as a whole; 4) sensitivity to personal history; 5) use of multi-faceted reasoning and logic and 6) reflexive in performing and interpreting research findings.

#### Qualitative Research Rigor

Research quality, or what is called rigor, involves the application of a systematic approach to research design, data analysis, interpretation and presentation. Frequently referred to as trustworthiness, goodness and validity, rigor is the term applied to evaluating research quality as a whole (Creswell, 2012; Hays & Singh, 2012) and determines which materials are available readers. Some examples include researcher characteristics, conceptual framework, contextual factors, research paradigms and traditions, research goals, research questions, data collection methods and procedures, and coding and data management processes.

It also enables the researcher to apply the changes aimed at ensuring the

credibility of research findings when necessary (Finlay and Ballinger, 2006; Gilgun, 2006). Previous studies have demonstrated that reflexivity can be employed as an instrumental guideline for the research process that limits both researcher bias and subjectivity (Jootun et al, 2009; McCabe and Holmes, 2009; Lambert et al, 2010). According to Houghton et al (2013), reflexivity is a strategy allowing qualitative researchers to meet various criteria on rigor such as data credibility.

In the course of conducting research, qualitative researchers frequently need to channel a naturalistic context through proper responses such as sympathy in order to elicit the disclosure of frequently sensitive, in-depth data from participants (Sim and Wright, 2002). Reflexivity is an instrument that allows researchers to gain awareness of personal attributes potentially influencing the qualitative research process. Thus, quality of the information yielded by an interview or discussion is generally dependent. Adept interview skills involve asking well-aimed, strategic questions prompting the respondents with a desire to disclose their secrets or share experiences. Building rapport is an essential interview skill that involves asking sincere, open-ended questions. In this process, the researcher's questions also need to be sufficiently clear in order to ensure that the participant

understands. Smooth transitions between different interview segments or topics are also vital (Patton, 2015).

#### **The Role of the Researcher in Conducting Focus Group**

In recent years, focus group interviews have become an important method for obtaining qualitative data in health-related studies that has been growing in popularity. In literature, the definitions of focus group are numerous and varied. A focus group can be defined as a group of people invited by the researcher to participate in an exchange of individual experiences in a group discussion setting. In this sense, focus groups become a form of group with mutual trust in exchanging interview dialogue and interaction related on a particular research topic where questions and responses are exchanged between the researcher and participants (Freeman, 2006). Hudson (2002) asserted the focus group process as a useful means of exploring user/consumer views that is growing in popularity. Lane (2001) asserted that one or more participants could dominate the discussion. Lastly, focus groups have also been defined as an essential element where people have a chance to exchange lifetime knowledge and experiences on a number of issues or topics.

As a rule, focus groups are geared toward compiling in-depth knowledge about

attitudes, receptions, beliefs and opinions of different people on a specific topic or issue. In gaining an understanding of people's opinions about any given topic, the participant's perspectives and experiences can contribute to informing health providers in general. More specifically, however, the group process informs about practice. Hence, focus groups are also employed as a means of generating constructs and hypotheses in addition to in-depth understanding of phenomena studied and clarification in the interpretation of certain behaviors. Moreover, the focus group researcher can gain data for application to quantitative research such as questionnaire development (Then, 2000).

In focus groups, the moderator is a key component with strong influence over data collection that is both prolific and accurate. Many times, moderators are researchers who explain a topic of discussion to the group and help focus group members to engage in the discussion. Moderators also encourage group interactions through guided discussions (Barbour 2007; Hennink 2007; Stewart et al. 2007; Bryman 2008; Krueger & Casey 2009). Although the moderator's task is to encourage active engagement in discussion, moderators who lack experience can affect data collection quality.

According to Richard Krueger (1944), a number of factors are responsible for determining focus group quality (Krueger & Casey 2009) as follows: 1) clarity of purpose. 2) suitable physical and socio-political environments; 3) proper physical environment, e.g. location conducive to maximum group interactions; focus groups also need to be free of intimidation and potential conflict among the group members, moderators and researchers; 4) sufficient time and budget resources; researchers conducting focus group discussions might need to exercise particular caution because group work is considerably more complex than individual work; 5) carefully recruited participants meeting set inclusion criteria; 6) skilled moderator possessing group interaction skills; 7) effective questions (too many questions lead to no time for follow-up to clarify, thereby affecting data quality; 8) respect for group members (if group members sense disrespect or a failure to address their needs, they will be unwilling to engage in free expression or full disclosure; such circumstances have negative effects on the information obtained).

Furthermore, leadership skills are essential in fulfilling the role of the researcher/moderator in conducting focus group interviews/discussions and can also determine the usefulness of qualitative research data. In the group process, good

moderators have open, caring dispositions, good listening skills, ability to capture verbal nuances and non-verbal cues with the additional skill of addressing emerging themes in the focus group. Moderators also require the skill of non-defensively redirecting the group to the research objectives with the aims of addressing potential conflicts in the group and validating comments made (Doody et al., 2013).

Another key task carried out by the moderator involves setting the direction for the group discussion. As the leader of group discussions, the moderator finds him/herself faced with a daunting challenge. Although anyone can be called a moderator, not every person can perform the task well. This leads to several characteristics that describe a good moderator (Barbour 2007; Hennink 2007; Stewart et al. 2007).

Good moderators require sensitivity to participant needs with no bias concerning participant responses. They also need to have respect for group members with an open-minded approach to the discussion and sufficient knowledge about the topic at hand with excellent listening, leadership and observation skills in addition to a certain degree of tolerance and flexibility. Participant interactions serve the following purposes: 1) spotlighting the structures of participant priorities, attitudes, language and

comprehension; 2) encouraging participants /informants/respondents to create and examine individual/personal questions; 3) supporting a wide range of communication skills from participants; 4) identifying group norms or socio-cultural values; 5) offering interpretation of the social processes in the focus group to articulate knowledge; 6) encouraging disclosure of sensitive topics and permitting constructive critique and 7) facilitating discussion about potentially unaddressed ideas and experiences in the discussion/interviews and expanding on participant perspectives in the course of group debate.

Apart from moderator, assistant moderators carry out background roles that do not involve recording notes on participant and moderator expressions, listening for talking points to be re-discussed or clarifying/expanding upon any of the data provided. Regardless, assistant moderators can serve as key contributors to putting the puzzle pieces together on information produced by the discussions/interviews or addressing missed questions (Marie Napolitano and colleagues 2002). A recorder (or note-taker) represents yet another integral part of focus group discussions or interviews (Barbour 2007; Hennink 2007; Stewart et al. 2007). The wide arrange of daunting challenges already faced by moderators prevents them from recording or taking

notes. Some of these non-verbal expressions can include boredom, approval, interest, resentment, impatience and anger, etc.

In the researcher's experience as a novice qualitative researcher, focus groups have been used as an instrument for gaining in-depth data on student experience with end-of-life care. In the present study, the inclusion criteria required that participants be three-year student nurses with experience in the topic of interest. The homogeneous group size was six participants. Based on the findings, the researcher found homogeneity to facilitate participants in disclosing information with familiar acquaintances. The researcher arranged the setting, time and venue for the focus group discussions for participant comfort, ease and accessibility. The researcher designed the questions to be answered by the participants. The questions were open-ended, general, and geared toward gaining an understanding of the central phenomenon studied.

The moderator's role is vital to developing rapport with participants. In addition, the data collected was made rich and valid based on beliefs, experiences, and perceptions. The researcher focused on emerging ethical issues throughout the course of data collection. The researcher began by explaining the introduction and researcher-participant agreements. Next, the researcher I explained the research

objectives and how the rights of the informants would be protected. The researcher acted as a facilitator in hearing and capturing data. Moreover, the researcher encouraged participation from all group participants. Lastly, the researcher drew conclusions from the discussion and expressed appreciation to all participants. Due to the sensitive nature of the end-of-life topic, the researcher made certain that the activities would draw good participation as an aid to future improvements in the field of end-of-life care.

In taking field notes, the researcher gained an understanding of the note-taker's definition as a research assistant. In the capacity, the researcher facilitated the moderator in conducting the focus group discussions by recording key data including identification of verbal and nonverbal cues, behavior, tone of voice and eye contact during the focus group discussions. One significant experience gained by the researcher occurred when one of the student nurses cried as she attempted to answer a sensitive question about her experience in caring for end-of-life patients. In the researcher's opinion, researchers/moderators require the ability to handle unexpected occurrences in order to achieve focus group goals. Moreover, the researcher found some student nurses to observe the note-taker who was their instructor. The note-taker's authoritative position as a nursing instructor

was one of the psychological factors affecting participation. Thus, the researcher would like to suggest that researchers/moderators need to consider participant-researcher relationships and their effect on the quality of data collected.

The researcher's learning experience has indicated that key success factors of focus group discussions/interviews include commitment, communication, and a good environment. Focus group involves making contact, selecting participants, scheduling dates, times and venues to facilitate participants. The researcher also needs to plan questions geared toward in-depth discussions. The primary goal of focus groups is to gain specific information with certain characteristics and similar knowledge from multiple participants on a particular topic. Thus, people in a group may be more willing to express opinions if they perceive a similarity or kinship with other participants. In this way, the characteristics of focus group participants are decided based on research objectives and usually consist of biographical factors (age, gender, educational attainment and knowledge or experience of the research topic). The participants in the group process must be willing to contribute the information needed. Hence, the participant commitment facilitates the flow of the discussion.

As the second factor in this process, communication involves group dynamics and

interactions aimed at gleaning information on a specific topic of focus issue. Group discussions involve a collective activity where members debate, discuss, inquire and comment on the experiences and opinions of others. Consequently, the researcher/moderators should have effective communication in introducing the group members, conducting the group and closing the discussion.

The third factor involved in the group process involves creating a good environment. The moderator's interpersonal skills have direct impact the group interactions as they occur. Thus, moderator's have a duty to create a good setting by selecting optimal times, good venues and environments conducive to disclosure and sharing.

In learning about the group process, the researcher discovered certain advantages to the focus group as follows: 1) Opportunities for direct contact; 2) Allowing opinion sharing; 3) Collection of rich data; 4) Use of the researcher as a research instrument; 5) Validation and clarification of beliefs and behaviors emerging in the course of discussion. Moreover, the researcher discovered certain limitations to the focus group process as follows: 1) Sensitive issues results in limited disclosure; 2) Inadequate control has impact on unrelated issues; 3)

Data analysis complexity presents difficulty in transcribing data.

In summary, the researcher would like to confirm the benefits of the focus group process. Regardless, effective focus group processes requiring a sense of kinship through common experiences shared in an enjoyable, supportive and informative setting. Chances to express opinions on research topics gives participants a feeling of importance and empowerment. Focus groups can make great contributions to nursing due to the group process design aimed at yielding in-depth understanding of the experiences and views of group participants. Lastly, focus groups serve as an essential instrument in qualitative research.

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#### REFERENCES

- Barbour, R., 2007, *Doing Focus Groups*, Sage Publications, London.
- Borbasi, S. & Jackson, D. (2012). *Navigating the Maze of Research*. Chatswood, Sydney: Mosby Elsevier.
- Bryman, A., 2008 *Social Research Methods*, 3rd edn, Oxford University Press, Oxford
- Carpenter, C. and Suto, M., 2008, *Qualitative Research for Occupational and Physical Therapists: A Practical Guide*, Blackwell Publishing, and Oxford.
- Creswell, J.W., 2007, *Qualitative Inquiry and Research Design: Choosing Among Five Approaches*, 2nd edn, Sage Publications, Thousand Oaks, CA.
- Creswell, J.W. (2012). *Qualitative inquiry and research design: Choosing among five traditions* (3rd ed.). Thousand Oaks, CA: Sage.
- Creswell, J. W. (2013). *Qualitative inquiry and research design: Choosing among five traditions*. Thousand Oaks, CA: Sage Publications.
- DeWalt, K.M., & DeWalt, B.R. (2010). Participant observation: A guide for fieldworkers. *Choice Reviews Online*, 49(01). doi:10.5860/choice.49-0366
- Doody, O., Slevin, E., & Taggart, L. (2013). Focus group interviews part 3: Analysis. *British Journal of Nursing*, 22(5), 266-269. Doi:10.12968/bjon.2013.22.5.266
- Doody, O., Slevin, E., & Taggart, L. (2013). Preparing for and conducting focus groups in nursing research: Part 2. *British Journal of Nursing*, 22(3), 170-173. doi:10.12968/bjon.2013.22.3.170

- Elkins, M. Y. (2010). Using PICO and the brief report to answer clinical questions. *Nursing*, 40(4), 59-60.  
doi:10.1097/01.nurse.0000369871.07714.39
- Finlay L, Ballinger C (2006) *Qualitative research for Allied Health Professionals: Challenging Choices*. John Wiley & Sons, Chichester.
- Freeman, T. (2006). Best practice' in focus group research: Making sense of different views. *Journal of Advanced Nursing*, 56(5), 491–497.
- Gilgun, J.F. (2006) Commentary: Encouraging the use of reflexivity in the writing up of qualitative research. *International Journal of Therapy and Rehabilitation*, 13(5): 215.
- Hays, D. G., & Singh, A. (2012). *Qualitative inquiry in clinical and education settings*. New York, NY: Guilford Press.
- Hennink, M.M., 2007, *International Focus Group Research: A Handbook for Health and Social Sciences*, Cambridge University Press, Cambridge. .
- Houghton, C., Casey, D., Shaw, D., & Murphy, K. (2013). Rigour in qualitative case-study research. *Nurse Researcher*, 20(4),12-17.  
doi:10.7748/nr2013.03.20.4.12.e326
- Hudson, P., Aranda, S., & McMurray, N. (2002). Intervention development for enhanced lay palliative caregiver support - the use of focus groups. *European Journal of Cancer Care*, 11(4), 262-270. doi:10.1046/j.1365-2364.2002.00314.x.
- Jirojwong, S., Johnson, M., and Welch, A. 2011. *Research Methods in Nursing and Midwifery*. Sydney: Oxford University Press.
- Jootun D, McGhee G, Marland G (2009) Reflexivity: promoting rigour in qualitative research. *Nurs Stand* 23(23): 42–6.
- Krueger, R. A. (2006). Is it a Focus Group? Tips on How to Tell. *Journal of Wound, Ostomy and Continence Nursing*, 33(4), 363-366.  
doi:10.1097/00152192-200607000-00003
- Krueger, R.A., & Casey, M.A. (2009). *Focus groups: A practical guide for applied research*, 4 th edition. Thousand Oaks, CA: Sage.
- Lane P, McKenna H, Ryan A, Fleming P (2001) Focus group methodology. *Nurse Res* 8(3): 45 – 59.
- Lambert, C., Jomeen, J., & Mcsherry, W. (2010). Reflexivity: A review of the literature in the context of midwifery research. *British Journal of Midwifery*, 18(5), 321-326.  
doi:10.12968/bjom.2010.18.5.47872
- Liamputtong, P. 2013. *Research Methods in Health*. South Melbourne: Oxford University Press.

- Mccabe, J. L., & Holmes, D. (2009). Reflexivity, critical qualitative research and emancipation: A Foucauldian perspective. *Journal of Advanced Nursing*, 65(7), 1518-1526. doi:10.1111/j.1365-2648.2009.04978.x
- Moxham, L. 2012. Nurse Education, Research and Evidence-Based Practice. In A. Berman, S. J. Snyder, T. Levett-Jones, M. Hales, N. Harvey, Y. Luxford, L. Moxham, T. Park, B. Parker, K. Reid- Searl and D. Stanley (eds), *Kozier and Erb's Fundamentals of Nursing* (2nd edn Vol. 1). Frenchs Forest, Sydney: Pearson Australia.
- Napolitano, M., McCauley, Beltran, M., & Philips, J. (2002). The dynamic process of focus groups with migrant farmworkers: The Oregon experience. *Journal of Immigrant Health* 4 (4), 177-182.
- Patton, M. Q. (2002). *Qualitative Research and Evaluation Methods*, 3rd ed., Thousand Oaks: Sage Publications.
- Patton, M. Q. (2015). *Qualitative research and evaluation methods*. Thousand Oaks, CA: Sage Publications.
- Rossman, G.B. and Rallis, S.F., 2003, *Learning in the Field: An Introduction to Qualitative Research*, 2nd edn, Sage Publications, Thousand Oaks CA.
- Shamdasani, P.N. (2015): *Focus Groups - Theory and Practice*, third edition, California: Sage.
- Sim, J., & Wright, C. (2002) *Research in Health Care: Concepts, Designs and Methods*. Nelson Thornes, Cheltenham.
- Stewart, D.w., Shamdasani, P.N. and Rook, D.W., 2007 *Focus Groups: Theory and Practice*, 2nd edn, Sage Publications, Thousand Oaks, CA.
- Then, K.L. (2000). *Cardiovascular risk factors in adolescents: An exploratory descriptive study* (Doctoral dissertation). University of Alberta, Edmonton, AB, Canada.
- Tong, A., Sainsbury, P., & Craig, J. (2007). Consolidated criteria for reporting qualitative research (COREQ): A 32-item checklist for interviews and focus groups. *International Journal for Quality in Health Care*, 19(6), 349–57. doi:10.1093/intqhc/mzm042
- Whittemore, R., & Knafl, K. (2005). The integrative review: Updated methodology. *Journal of Advanced Nursing*, 52(5), 546-553. doi:10.1111/j.1365-2648.2005.03621.x