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Exchanging focus groups for individual interviews during qualitative data collection: a discussion

Abstract

Background: Focus group data are created through interactions between participants while in individual interviews, the dialogue is between the participant and researcher, whose questions set the agenda. Focus groups and individual interviews are therefore used for different reasons and produce different data. However, sometimes researchers exchange focus groups for individual interviews, during data collection.

Aim: The aim is to discuss the rationale for focus groups, consider reasons for exchanging focus groups for interviews during qualitative data collection and any implications for research quality.

Discussion: The article first considers the unique features of focus groups and how these contrast with individual interviews. The reasons why individual interviews are added into studies designed for focus groups are then considered, based on the researcher's experience and a selection of research studies. Researchers showed flexibility, adapting data collection plans to include particular individuals, but they could have provided a clearer rationale for using focus groups and for changing research designs during data collection.

Conclusion: Researchers should rationalise their choice of research methods and, to enhance quality, adopt a transparent and systematic approach with a clear account of the research process and explanations about any changes to original design plans,

Implications for practice: Researchers should recognise the differences between focus group and interview data, reflect on their rationale for using each method and justify data collection decisions. If recruitment is likely to be difficult, researchers intending to use focus groups could include individual interviews within their initial research design.

Introduction

In focus groups, the interactions between participants create the research data and stimulate further discussion, while in individual interviews the researcher's questions set the agenda for the participant's responses about their perceptions and experiences. Therefore, focus group and individual interview data differ, but sometimes researchers exchange focus groups for individual interviews during data collection. This article starts with the key features of focus groups, in contrast to individual interviews, and then explores the reasons for exchanging or adding individual interviews during data collection, with examples from the researcher's own experience and from other studies. The article then discusses the importance of providing a clear account of the research process with explanations about changes to the original design plan. Finally, there are suggestions for researchers planning focus groups to carefully consider any possibility of adding individual interviews if recruitment issues arise, and how they can preserve the study's quality through a transparent and systematic approach.

Key features of focus groups and interviews

Both focus groups and individual interviews elicit participants' views and experiences and are often used in qualitative research; either can be the sole data collection method, or may be included in a multi-method design. Focus groups are a particular form of group interview that exploits group dynamics (Freeman 2006); data created through the interactions provides insights into public discourse: not just *what* people think but *how* and *why* (Kitzinger 1994). The participants' interactions can thus reveal multiple understandings, common views and experiences (Ivanoff and Hultberg 2007) and the focus group's more natural social environment leads to unique data that may not be accessed through individual interviews (Kreugar 1994).

The interactions within focus groups stimulate further ideas for discussion through a 'synergistic sparking-off' between group members' (Cleary et al. 2014, p.474). For example, Box 1 presents some data from a focus group with Emergency Department staff discussing

their difficulties in caring for people with dementia from care homes, who are accompanied by staff who do not know them. The data includes different viewpoints on the same issue and could represent a typical discussion about this topic. The exchange illustrates how participants may challenge each other's views (Kidd and Parshall 2000) and the interactions convey how the sharing and comparing process often has a 'Yes but' quality (Morgan 1997, p21). In contrast, data from an individual interview would not include such challenges or range of experiences. However, there is a risk of domination by one or more participants, and hierarchies within the group could affect disclosure, so skilled facilitation is necessary (Sagoe 2012). Table 1 summarises other features of focus groups and interviews, highlighting some differences.

Box 1 Focus group extract (Source: Author's data)

P1 It is mind blowing to believe that a patient is put into an ambulance with whatever their problem is and they come with a carer from the home who goes: 'I don't know', 'I don't know'.

P2 They say: 'I've been told to take this person to A&E'.

P1 And in the end you ask them to ring up the home and ask the various questions like: have they rung the nearest relative to say that they are with us, are they allergic to anything? It's simple things, we're not talking about anything major.

P3 They don't even know why they've been brought in.

P4 I have seen that from the other side in the fact that if you've got two nurses and two HCAs working on a night shift in a busy home and you've got one HCA who knows all the patients and how to run it with nurses, and then one HCA doesn't know how to do it, who are you going to send to the hospital?

P2 Inform the agency nurse before they move.

P5 Yes but you need to handover accurately otherwise there's no use them [care home staff] coming at all and you can keep them at the home.

Table 1 Comparison between focus groups and individual interviews

Feature	Focus groups	Individual interviews
Participants' views	A more realistic representation of real life as people are influenced by others and their opinions may change accordingly (Kreugar 1994).	Assumes that people know their views and that opinions are formed in isolation (Kreugar 1994).
Environment	Artificially set up discussions, usually based away from the natural environment (Greenbaum, 2003)	Can occur in the natural environment, especially within an ethnographic design (Greenbaum, 2003)
Power dynamics	Reduce the researcher's power and control (Wilkinson, 1999). Discussion between participants carries on independently from the facilitator, as much as possible (Ivanoff and Hultberg 2006).	Closer communication between the participant and interviewer who has more control (Morgan 1997)
Comparison of participants' views	Discussion offers direct evidence about similarities and differences in participants' views and experiences (Morgan 1997)	Differences and similarities between individuals are revealed during data analysis. (Morgan 1997)
Depth of data	Limited depth about individual participants' views and experiences (Morgan 1997), although the interactions prompt new thinking so there may be	Can enable extended and in-depth individual narratives (MacNaghten and Myers 2004),

	more in-depth discussion of the subject overall (Sagoe 2012)	
Sensitive topics	Some individuals may not wish to disclose in a group, due to confidentiality concerns, but others may be more willing to disclose as they feel safer in a group (Sagoe 2012)	Some individuals may be more willing to discuss sensitive topics (Sagoe 2012)

Kitzinger's (1994) and Kreugar's (1994) seminal work on focus groups continues to be influential but their differing perspectives have led to varied views about best practice, particularly the selection of group participants (Freeman 2006). Kitzinger (1994) emphasised the interaction between participants in focus groups, suggesting that pre-existing groups provide a natural social context for developing ideas. For example, in Box 1, the participants' views about transfers of residents from care homes developed during the discussion as they shared experiences. In contrast, Kreugar (1994) advocated procedures, like randomisation, to reduce selection bias and ensure representative samples. Such a stance aligns with market research goals, where focus groups were traditionally used (Ivanoff and Hultberg 2007). However, in qualitative research, for focus groups, or interviews, participants are usually selected purposively to meet particular criteria and thus meet the research aim (Holloway and Galvin 2017).

Exchanging or adding individual interviews into studies designed for focus groups

In a study, based in London, England, that aimed to investigate staff perspectives about a film used to improve dementia awareness, the research design included a series of focus groups with different staff groups (Author et al. 2016). The aim was for 6-10 participants in each focus group, but in reality the range was 2-14 participants. There is no clear evidence about the best size for a focus group, but they typically include 6-10 participants (Kreugar

(1994); size and membership characteristics can be adapted to meet research needs (Sagoe 2012). A barrier to recruitment was that staff at one busy hospital could not leave their wards to attend. Determining data saturation for a focus group is challenging (Hancock et al 2016); in this study, researchers were concerned that new themes might have emerged from nurses who could not attend. Alternatives to increase participation were online (Stancanelli 2010), or telephone focus groups (Smith et al. 2009; Koskan et al 2014). However, senior hospital staff did not consider these were practical alternatives, as it was unlikely that staff would be available at the same time and have undisturbed access to computers or telephones. Therefore, some individual interviews were added to ensure wider staff inclusion, and provide confidence that these specific staff groups' views did not contrast sharply with the focus group data. The focus group topic guide, comprising open questions with prompts, was used for the individual interviews too.

To illustrate how the data differed between the focus groups and the individual interviews, Table 2 presents an extract from a focus group of outpatients' nurses, with an emotive and evolving discussion between the participants. In contrast, in the interview data extract with a ward nurse, the researcher used a probe to elicit an example from the interviewee. Nevertheless, in terms of themes, in both extracts participants were talking about how the film engaged them with the experience of the person with dementia who is in hospital.

Table 2 Contrasting focus group data with interview data	
Focus group data extract (group of outpatients nurses)	Interview data extract (Ward nurse)
<p>P1 I think it's [a] shock they treat individuals like that, especially when she's in the hospital, when she's lost in the hospital, that one I wanted to scream out.</p> <p>P2 Could no one see that she was lost?</p>	<p>Interviewee: I think one thing for me that I remember mostly is being able to have a look from outside what's going on, to kind of I guess make you realise the little things that you could be doing to kind of help, and it's a lot easier to see it from outside rather than if you're involved in that situation.</p>

<p>P3 Like when she went in and they asked if a student could come in and observe but they didn't explain.</p> <p>P1 And reception, the way the reception was, I was getting really angry, regardless of if she's got dementia you can't treat another human being like that, she clearly looked confused and lost.</p> <p>P4 It was the first time I could see everything from the point of view of a person with dementia</p>	<p>Interviewer: Yes. What sort of little things?</p> <p>Interviewee: So, for example, when she's in the waiting room and she's waiting for her appointment she looks a little bit concerned, a little bit confused about where she is, she's constantly looking around, she looks a little bit stressed, and I think if we see somebody like that we can actually step in, even if we're not from that department, just to double check that she's okay.</p>
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A search was conducted for some recent examples of other healthcare studies where interviews had been added in or replaced focus groups. Using the Cumulative Index of Nursing and Allied Health Literature, the search parameters included recent studies (2012-2017), with the key words of 'focus group' AND 'interview' in the abstract. For each article, the abstract was reviewed first, to ensure the study had actually included both individual interviews and focus groups. For those articles meeting this criterion, the methods section was then reviewed to identify studies where it appeared that individual interviews were added into a design using focus groups alone, or were used instead of planned focus groups during data collection. The reasons for adding individual interviews and any acknowledged effects on the dataset, were then reviewed. Table 3 summarises the studies identified, with topic, methodologies and numbers of focus groups and interviews. Only one study included a theoretical rationale for use of focus groups (Ceballos et al. 2015), referring to interactions and referenced to Kitzinger (1994). No studies included discussions about how the interview data differed from the focus group data.

Table 2 Examples of studies that exchanged, or added in, interviews to study designs for focus groups

Authors	Topic	Methodology	Focus groups	Interviews
Robinson et al. (2012)	Professionals' views and experiences on advanced care directives in dementia and palliative care	Qualitative	14	18
Carroll et al. (2014)	Views of women from low socio-economic groups in Ireland on their choice to feed their infants artificial milk, and to elicit factors that might encourage breast feeding in the future.	Qualitative, descriptive	2	6
Hunter and Magill-Cuerden (2014)	The ways in which UK adolescent mothers conceptualise their decisions to breastfeed and experience breastfeeding in their communities	Qualitative	4	2
Ceballos et al. (2015)	The feasibility of a Spanish language cancer survivor group.	Mixed method (phase 1 qualitative)	Not clear	2
Riggs et al. (2015)	The sociocultural influences on child oral health in the migrant population in Australia	Participatory, qualitative	11	7

Robinson et al. (2012) conducted focus groups in specific professional groups but they stated that: '*Where professionals were unable to attend, individual semi-structured*

interviews were offered' (p402). It did not appear that this option was in the original research design. Their table of data collection and participants showed three individual interviews with solicitors but no focus groups, while for the ambulance service participants and social workers, data were collected only through focus groups. For all other professional groups, there was a mixture of interviews and focus groups. Robinson et al. (2012) stated that the study's strengths were the wide range of professionals included but there was no mention of any benefits of the focus group interactions.

Carroll et al. (2014) originally planned to hold five focus groups with six women in each but only two women attended the first two. The other interested participants had other children and could not attend a focus group. The researchers therefore switched to individual interviews via telephone (six interviews). The discussion and interaction between the two women in the small focus groups meant the duration was longer (42-68 minutes), than the individual telephone interviews (10-16 minutes). Nevertheless, Carroll et al. (2014) stated that both data collection methods led to rich data. In a further study that focused on young mothers and feeding decisions, Hunter and Magill-Cuerden (2014) set up six focus groups: four had 2-5 participants but only one person attended for the other two and then they held individual interviews instead as '*it was important to capture all possible data to give voice to this vulnerable and minority group*' (p.47). Their rationale aligns with the views of Kitzinger and Barbour (1999), who identified the importance of demographic diversity, and advocated making particular efforts to include voices that might be excluded. Hunter and Magill-Cuerden (2014) identified in their limitations that the study had a small self-selecting sample.

The remaining two studies included participants who were non-English-speaking, with interpreters involved. Ceballos et al.'s (2015) study aimed to design, develop and investigate the feasibility of a Spanish language cancer survivor group. Focus groups were the 'primary data collection method' but two individual interviews were included due to 'unexpected changes in participant schedules'. There was no explanation as to whether the interviews occurred because only one person attended a planned focus group or whether they were

organised with individuals who could not attend a focus group. There was no further information about the interview data and any impact on the overall data set. Riggs et al.'s (2015) study included migrants from Iraq, Lebanon and Pakistan, with data collected mainly through focus groups. However, they conducted individual interviews with women who requested to speak to the researcher individually, or when the researcher wanted to explore emerging themes or alternative views. No further detail was given about these individual interviews, but they did not appear to have been in the original research design.

Discussion

Focus group theorists, such as Kitzinger (1994), emphasised the uniqueness of focus groups being their interaction, with the creation of data through discussion, in contrast with data collected through individual interviews. However, in the studies reviewed, there was no discussion about any potential effects of exchanging focus groups for individual interviews on the overall dataset or the study's quality. In most studies, the researchers did not offer any theoretical rationale for focus groups, so possibly the uniqueness of focus group data was unrecognised. The reasons for adding individual interviews were: recruitment challenges, with certain participants unable to attend focus groups (Baillie et al 2016; Robinson et al. 2013; Carroll et al. 2014); only one person attending an organised focus group so researchers proceeding with an individual interview (Hunter and Magill-Cuerden 2014); participants requesting individual interviews;(Riggs et al.'2015); researchers following-up emerging focus group themes with individual interviews (Riggs et al. 2015).

All studies reviewed included participants who could be difficult to recruit: busy professionals (Baillie et al. 2016; Robinson et al. 2012); mothers with young babies (Carroll et al. 2014; Hunter and Magill-Cuerden 2014); and minority ethnic groups, who required interpreters (Ceballos et al. 2015; Riggs et al. 2015). Researchers adopted a flexible approach to include particular individuals in their samples, potentially enriching the dataset. However, to promote quality, researchers need to provide transparency about the research process, and demonstrate a systematic approach to data collection and analysis, with any changes from

the original plans explained and justified (Meyrick 2006). Adding individual interviews appeared to be a change from the research design, which was generally justified but could have been explained better. In a further illustration of inadequate transparency, a review of 240 studies, which used focus groups, found unclear, or a complete lack of, explanation for the numbers and sizes of focus groups in their studies (Carlsen and Glenton 2011).

Geography, time, and resources can pose barriers to face-to-face focus groups (Ross et al. 2006). While such factors can affect recruitment for individual interviews too, these are generally easier to arrange, involving only two people, with potential for flexibility about venue and time (Kitzinger and Barbour 1999). Both Kreugar (1994) and, more recently, Eklöf et al. (2017), recommended that researchers should proceed with focus groups when only small numbers attend but neither discussed what to do if only one person attends a planned focus group. Barbour (2007) asserted that including some individual interviews within an overall focus group design may be 'a pragmatic decision' in some circumstances, for example, to recruit people who cannot attend planned focus groups. However, researchers must then consider how the individual interview data 'fit' with the overall dataset drawn from focus groups, ensure they are transparent about the process followed and that they can justify the changed approach. Box 2 includes some key points to consider, while planning focus groups, to prepare researchers for scenarios where they might add individual interviews.

Box 2 Planning for the possibility of adding individual interviews to a study design with focus groups

- Be clear about the rationale for including focus groups rather than individual interviews
- Maximise focus group attendance, including personalised reminders (Kreugar 1994)
- Be realistic about barriers to attendance and consider whether online or telephone focus groups might increase attendance, and their advantages and disadvantages

over face-to-face focus groups (see Stancanelli 2010; Smith et al. 2009; Koskan et al. 2014).

- Consider what to do if either a) only one person attends a focus group or b) recruitment problems prompt the addition of individual interviews: would the topic guide be appropriate for individual interviews too? Does the research ethics committee application, and participant information sheet, include the possibility of individual interviews?
- If adding individual interviews, how will these data be included in analysis?
- How will you justify your changed data collection plan and explain your decisions?

Conclusion

Both focus groups and individual interviews are widely used in qualitative healthcare research. Focus groups can generate rich data through interactions but it is not always easy to predict recruitment and attendance, so individual interviews may be added to ensure inclusion of particular individuals' views. Planning for the possibility of focus group recruitment problems could promote a more systematic approach if individual interviews are added in to the design. It is important to reflect on the rationale for using either or both focus groups and individual interviews, and provide adequate detail about decisions made, thus demonstrating transparency and a systematic approach, alongside adaptability and flexibility during the research process.

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