



Using Focus Groups to Test a New Program

INTRODUCTION

Focus groups have many uses. They can be used in the early stages of a program's development to gain an in-depth appreciation of the needs of a target audience and how to deliver that program. However, focus groups can be used at various stages of the evaluation of the program. This PA Example describes how focus groups were used to test a new program, i.e., to gain an in-depth understanding of how the new program was perceived by the target audience, stakeholders and the instructors. This process is called formative evaluation.

STUDY TEAM

Lynn James, Snyder County, Central Region
John Byrnes, Philadelphia County, Southeast Region
Nancy Ellen Kiernan, Extension Evaluation Specialist, University Park

PROGRAM

In its first year, the Family Fitness Child Overweight Prevention Program targeted 8 to 11 year-old children that had a BMI (Body Mass Index) of 85% or higher, and their parents and grandparents (if caregivers).

The program had many facets. It encompassed a nine week, 1½ hour after-school program for the children. Additional sessions every other week during this period were held for the parents and children together. Parents were provided with a four-part Learn-at-Home series to read and use before they began their session. The Learn-at-Home series included activities to do with the children. The activities were based on the same themes as the after-school sessions for the children.

The target audience was obtained by collaborating with school nurses. The nurses measured all the children's heights and weights to assess their BMI in the school (now as required by PA law). The nurses mailed a cover letter and a program brochure to parents of the target audience, recommending participation in extension's Family Fitness Child Overweight Prevention Program, conducted by Family Living Extension educators.

IMPACT OBJECTIVES

The long-term objective of this program was for children who were either overweight or at-risk for being overweight, to *maintain their weight* while they grew over the following months, thus keeping their BMI stable.

EVALUATION RATIONALE

The program was innovative in five ways. The program included

- motivational interviewing in family and student group setting with a facilitated discussion
- school nurses, a new direct collaboration partner
- a new target audience and their parents
- a new curriculum
- a new marketing approach.



We conducted a formative evaluation of how the program was implemented to obtain information from the stakeholders on how to improve it and obtain the greatest program impact in the future. We wanted to learn about aspects of the program that we had not thought of in regard to the delivery methods, the marketing, and evaluation instruments, and any other impact we had not thought of to measure in our evaluations.

DATA COLLECTION

We conducted five focus groups with the key groups: the children and their parents at three pilot sites, all of the school nurses, and all of the extension educators. Focus groups offer methodological advantages over surveys: they employ open-ended questions, allowing participants to identify an array of insights as to what worked well in the program, what needs to be improved and how it can be improved in the future; stimulate recollection of ideas previously unexpressed or forgotten (Patton, 2002) and create less of a burden. The focus group questions used in this formative evaluation for the children and parents, the school nurses and instructors can be obtained from the Principal Investigators.

Not all eligible children, those with a BMI of 85% or more and their parents, accepted the invitation to participate in the program. To investigate the barriers to their participation in the program, the extension educator developed a short mail survey to inquire why they did not sign up; the results of this aspect of the study are reported elsewhere.

SAMPLING

As the number of pilot sites, participants, nurses and educators was limited, there was no need to sample.

SELECTED FINDINGS

The children and parents, the nurses and the instructors provided a range of views about many aspects of the program, some aspects expected, but others a welcome surprise. When focus group participants discuss ideas that are not expected, the validity of the focus group as an evaluation method is enhanced because one of the primary benefits of qualitative data collection methods like focus groups is that researchers can learn about things they would not have thought about in their ivory tower, or, have not read in the literature (Patton, 2002; Salmen, 1989).

Below are selections from the focus groups. They demonstrate what you can learn about a program using focus groups with stakeholders. These selections fall into three groups: the benefits of the program, some challenges, and the future of the program. Participant names have been changed to protect confidentiality.

Benefits of the Program

Parent Ruth: “It was an icebreaker for me . . . this gave me an opportunity to look more seriously at this health thing. I think I may have been blinded . . . So now I can communicate with her [my daughter] better. Every day Mr. Softee comes around in the ice cream truck. She wants to go get ice cream. Now she can’t have an ice cream cone everyday. Before I would make sure she had her money for the ice cream. It’s not healthy. We can’t have ice cream everyday.”

program impact for a parent

Parent Beverly: “I found the ‘discussion days’ [parents and children together] were extremely exciting because it taught me how to talk to my children about their weight and making better choices without having them coming home crying. . . we could talk about this in a comfortable setting and learn how to do better. We all worked together without insulting anyone with rude comments. Others explained things to me and I was able to ask questions of the facilitator without feeling dumb . . . I felt comfortable, not intimidated.” [two other parents agreed]

program impact and benefit of the program process for parents



Parent Margaret: “I liked them [the parent-children discussions]. It benefits us. It makes us do things together, such as shop and exercise. We can cook together and do different new things.”

program impact for a parent

Moderator: “I would like you to think about the family fitness goal tree. . . Tell us one word you chose [to describe this activity] and why you chose it.”

benefit of the program process for parent

Parent Marcia: “I picked ‘communication’ because it [the activity] helped Christopher and I talk about healthy eating and what we can hope to achieve from going to this program in setting goals for the future which is what this program is all about.”

Parent Lorraine: “. . . the program . . . was very worthwhile because doctors do not always comment on weight in children’s visits. Chris’s doctor didn’t say at his last check up anything about his weight- so I’m glad the school is doing this [sending letters] . . .”

benefit of the program process for parent

Child David: “. . . it taught me, like, umm there’s another way to get into life and you want to make the right choice to go into life because if you don’t make the right choice then it’s kind of hard to change the way that you are.”

personal benefit to an overweight child

Child David: “I like . . . the way we got to make the food instead of the people running the program making the food. . .”

benefit of the program process for overweight children

Child Karen: “I learned exercise can be fun, not boring.”

Child Adam: “I learned you can exercise and have fun - I liked all the games, running jumping.”

Child Charlie: “I learned it [exercise] gives you energy.”

Nurse Kate: “I can think of a few kids that were in our group who would’ve been a little bit uncomfortable [if they were with non-overweight kids], because they get made fun of in the school yard and all, I think they felt safe in the group with everyone that was struggling together.”

benefit of the program process for the school nurse

Parent Theresa: “It made me very aware that we never ever eat together, or exercise together at once, as a family. . .”

program impact for a parent

Program Challenges

Nurse Cindy: “I have had some negatives from parents that think their child, their children, don’t have a problem even if they’re in the 99 percentile. And even, they’ve talked to some of their doctors and they’re like, ‘Well our doctor says they don’t have a weight problem,’ so I personally took a lot of grief from some parents. . . they’re like, ‘Well, this is how we are; this is how we’re built. . .’ They don’t see a problem with it.”

challenge arising from the BMI analysis and the mailing from the school nurse

Future of the Program

Parent Abby: “I think that it was good that she [my daughter] heard from other people on how . . . important healthy foods and exercise is. It helped from someone else because you are more attentive to it . . .” [two other parents agreed]

what to retain in the program



Parent Karla: “I think an hour would have been fine but they seemed to be more like an hour and a half and I think an hour for going over things would’ve been enough. Or to break them up. It was a long time.”

what to modify in the program

Child Camille: “. . . kids could tell other kids it’s really fun . . .”

Parent Abby: “. . . share that prize ahead of time so kids know what they can work towards. . .”

how to market the program in the future

Child Camille: “. . . put up signs in each class and around schools and people could sign up. “

Parent Beverly: “I liked the first session . . . The children came home all excited and these days it’s hard getting children excited about anything these days, especially something that’s good for them. So that was a big help.”

what to retain in the program

Parent Lorraine: “. . . there should be a general invitation to all people since everyone can benefit from knowledge about nutrition and exercise.”

what to modify in the program

Nurse Aida: “I think one of our biggest problems is our educational level of our parents. We have struggled with that all year, trying to get this program up and running. . .”

what to modify to reach the parents of the target audience

Nurse Raina: “. . . I’m wondering if it needed to be on a lower grade level of reading for some of the families that we’re maybe targeting, . . . just too much print and too small of print. . .”

what to modify in the program

Nurse Raina: “I think it’s tough to schedule [the program], period . . . I agree with the one evening a week and having some how combined the adult and the child sessions, I think that would be helpful . . .”

what to modify in the program

Nurse Kendra: “The only other thing I can suggest is . . . inviting everybody. You know health, nutrition, exercise and activity are an issue for everybody, so maybe by just including everyone in the district more people, more overweight people might get involved, too, because their friends are there.”

what to modify in the program

Nurse Kate: “I am not sure, I mean I think activity and all is an issue for everyone, but I can think of a few kids that were in our group who would’ve been a little bit uncomfortable, because they get made fun of in the school yard and all, I think they felt safe in the group with everyone that was struggling together.”

disagreement with suggestions as what to modify

Nurse Raina: “. . . the time of the year . . . start this in January and right after the Christmas holidays, that gives us time to sort of beat the bushes and advertise it, get some awareness to kids, and then have the program without the other interferences of softball and soccer, and spring sports and stuff that we want kids to be in, too.”

what to modify in the program

CONCLUSION

The selections indicate the range of information you can obtain about a new program using focus groups to listen to the stakeholders. Following this formative evaluation, all the results were evaluated by the Family Fitness Program Team and selected changes made in the program in the second year.



APPLICATION TO OTHER EXTENSION PROGRAMS

Test a new program by using focus groups to learn how the participants and other stakeholders perceive the implementation and impacts of the new program. The stakeholders in your new program could also include the instructors, volunteers, and those who market the program. The data will reinforce what you are doing well, and indicate where improvements may be needed. Focus groups often provide ideas that a program planner would not have considered.

REFERENCES

Patton, Michael Q. (2002) *Qualitative Research and Evaluation Methods* (3rd ed.). Thousand Oaks, CA: Sage Publications.
Salmen, L.F. (1989) *Listen to the People*. N.Y.: Oxford Univ. Press.

OTHER RESOURCES

Brown, J. L. and N.E. Kiernan. (2001) Assessing the subsequent effect of a formative evaluation on a program. *Evaluation and Program Planning* 24(2): 129-143.

Focus Groups: 4-H and Youth Development. Tipsheet #29:
<http://www.extension.psu.edu/evaluation/pdf/TS29.pdf> .

For further information about the evaluation, please contact Lynn James (lxj11@psu.edu) or John Byrnes (jxb70@psu.edu). This Web site is copyrighted by the Pennsylvania State University. The information may be used for educational purposes but not sold for profit.