

## **PARTICIPANT SELECTION FOR FOCUS GROUP DISCUSSIONS**

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### **1. PURPOSE**

Qualitative research is the process of collecting descriptive data regarding a specific topic from individuals by means of individual interviews or focus group discussions (FGDs). Systematic participant selection is vital to attain and evaluate a representative set of perspectives, experiences, and opinions.

### **2. INTENDED USER**

Implementation science teams and study enumerators.

### **3. RESPONSIBILITIES**

All DeWorm3 implementation science team members should understand and follow this SOP prior to conducting qualitative research. It is the responsibility of the site's Principal Investigator to ensure that all study staff and implementation science teams comply with this SOP.

### **4. DEFINITIONS**

- 4.1. **Stakeholder:** individuals who influence or are affected by community-wide MDA for STH
- 4.2. **Child participant in focus groups:** Individual 12 to 15 years of age
- 4.3. **Adult participant in focus groups:** Individual 18 years of age or older

### **5. REQUIRED MATERIALS**

- 5.1. Stakeholder Identification Worksheet
- 5.2. FGD reminder card

### **6. PROCEDURE**

- 6.1. Community members, community drug distributors (CDDs), and health centre staff will participate in FGDs at study baseline, midline, and endline. All other stakeholder levels will participate in individual interviews.
- 6.2. Community members, CDDs, and health centre staff will be selected to participate in focus groups from four intervention clusters.
  - a. At baseline, these four clusters should be randomly selected from the 20 intervention clusters.
  - b. At midline and endline, these clusters should be comprised of the two clusters with the highest MDA coverage and the two clusters with the lowest MDA coverage during the preceding round of MDA.
- 6.3. Community members
  - a. Community member FGDs will take place in the same four intervention clusters as CDD and health centre staff FGDs.
  - b. 15-20 community members should be randomly selected by qualitative research teams to participate in one of four FGDs that will be conducted separately for: local leaders (5 participants), female adults (5 participants), male adults (5 participants), and children (5 participants). Thus, there will be 16 community member FGDs conducted in each site at baseline, midline, and endline.
  - c. At baseline, community members will be randomly selected to participate from a pool of individuals who attended outreach/sensitization meetings at the chiefs/headmen's residence. The first five randomly approached individuals from each demographic strata who agree to participate will be invited to attend FGDs the following day (or soon thereafter). No more than one individual per household may be selected to participate in focus group activities.
    - i. For children, parents should be approached. The first five randomly selected

parents who agree for their children to participate in an FGD should be invited to bring their children to the FGD the following day (or to an FGD scheduled soon thereafter).

- d. At midline and endline, community members of each demographic strata will be randomly selected from household lists. No more than one individual per household may be selected to participate in focus group activities.
  - i. Data managers should randomly select these individuals, and may choose to do so at the same time as random selection occurs for prevalence surveys.
- e. Upon agreeing to participate, individuals should be provided FGD reminder cards that provide details regarding the date, time, and venue of the FGD.

**6.4. CDDs**

- a. CDD FGDs will take place in the same four intervention clusters as community member and health centre staff FGDs.
- b. 10-15 CDDs will be randomly selected to participate in one of two FGDs. Each focus group will have 5-8 participants.
- c. At baseline, CDDs will be randomly selected to participate in FGDs from a pool of CDDs who attend training activities. The first 15 randomly selected individuals who agree to participate will be invited to attend FGDs on a pre-determined day.
- d. At midline and endline, CDDs will be randomly selected from the pool of CDDs who participated in the prior round of MDA. The first 15 randomly selected individuals who agree to participate will be invited to attend FGDs on a pre-determined day.
- e. Upon agreeing to participate, the selected CDDs should be provided FGD reminder cards that provide details regarding the date, time, and venue of the FGDs.

**6.5. Health centre staff**

- a. Local MOH/health centre staff (including CDD supervisors, if not health centre staff) will be selected for FGDs from the same four intervention clusters as community member and CDD FGDs.
- b. 5-10 staff members should be purposively selected by the site implementation science team to participate in one FGD in each cluster.
- c. The individuals who have been most highly involved in delivery and supervision of the intervention should be selected as expert informants.

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<b>Principal Investigator</b>	<b>Signature</b>	<b>Date</b>	
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