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EXPERIENCE REPORT | RELATO DE EXPERIÊNCIA



Online focus group for qualitative research data collection: experience report

Grupo focal on-line para a coleta de dados de pesquisas qualitativas: relato de experiência

Grupo de enfoque en línea para la recopilación de datos de investigación cualitativa: reporte de experiencia

ABSTRACT

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Objective: to report the process of developing an online focus group as a data collection technique in qualitative research. **Method:** this is an experience report on the development of an online focus group for data collection with teaching nurses linked to the supervised internship of Primary Health Care at a public university in the interior of Ceará, carried out in March 2020. **Results:** the planning phases of the synchronous online focus group were: (1) structuring of the approach; (2) construction of the guide instrument; (3) group composition; and, (4) development of the group process. This provided accessibility, participant adherence, cost reduction, less participant abstention and speed to collect, record and analyze data. A satisfactory result was obtained, standing out as a concrete possibility of data collection technique in qualitative research. **Conclusion and implications for practice:** the data collection strategy through the online focus group can contribute to the construction of knowledge in the health sector and nursing to carry out qualitative research.

Keywords: Data Collection; Knowledge; Nursing; Qualitative Research; Technology.

RESUMO

Objetivo: relatar o processo de desenvolvimento de grupo focal on-line como técnica de coleta de dados em pesquisas qualitativas. Método: trata-se de relato de experiência do desenvolvimento de um grupo focal on-line para a coleta de dados com os enfermeiros docentes vinculados ao estágio supervisionado da Atenção Básica em Saúde de uma universidade pública do interior do Ceará, realizado em março de 2020. **Resultados:** as fases de planejamento do grupo focal on-line síncrono foram: (1) estruturação da abordagem; (2) construção do instrumento-guia; (3) composição do grupo; e, (4) desenvolvimento do processo grupal. Este oportunizou a acessibilidade, a adesão dos participantes, a redução de custos, a menor abstenção dos participantes e a rapidez para coletar, registar e analisar os dados. Obteve-se resultado satisfatório, destacando-se como uma possibilidade concreta de técnica de coleta de dados, em pesquisas qualitativas. **Conclusões e implicações para a prática:** a estratégia de coleta de dados por meio do grupo focal on-line pode contribuir para a construção do conhecimento na área da saúde e Enfermagem para a realização de pesquisas qualitativas.

Palavras-chave: Coleta de Dados; Conhecimento; Enfermagem; Pesquisa Qualitativa; Tecnologia.

RESUMEN

Objetivo: reportar el proceso de desarrollo de un grupo focal en línea como técnica de recolección de datos en investigación cualitativa. **Método:** este es un relato de experiencia sobre el desarrollo de un grupo focal en línea para la recolección de datos con enfermeras docentes vinculadas a la pasantía supervisada de Atención Primaria de Salud en una universidad pública del interior de Ceará, realizada en marzo de 2020. **Resultados:** las fases de planificación del grupo focal en línea sincrónico fueron: (1) estructuración del enfoque; (2) construcción del instrumento guía; (3) composición del grupo; y, (4) desarrollo del proceso de grupo. Esto proporcionó accesibilidad, adherencia de los participantes, reducción de costos, menor abstención de los participantes y rapidez en la recolección, registro y análisis de datos. Se obtuvo un resultado satisfactorio, destacándose como posibilidad concreta de técnica de recolección de datos en la investigación cualitativa. **Conclusión e implicaciones para la práctica:** la estrategia de recolección de datos a través del grupo focal en línea puede contribuir a la construcción de conocimiento en el sector salud y enfermería para realizar investigaciones cualitativas.

Palabras clave: Recolección de Datos; Conocimiento; Enfermería; Investigación Cualitativa; Tecnología.

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INTRODUCTION

The focus group is a practical and low-cost informationgathering strategy used in several areas of knowledge. It can be conducted in person or online. The latter is analogous to a face-to-face focus group; communication and interaction occur in a virtual environment.^{1,2}

While the methodological strategy aims to stimulate reflection and discussion on a specific theme and stands out for enabling group interaction. The operationalization of the group allows the researcher to identify the different analytical perspectives and explore how facts are articulated, confronted, censored, and altered in group interaction,² as the diversity and depth of group responses make it possible to have detailed information.³

Group sessions can be held in any environment that promotes hospitality, privacy, and social interaction.⁴ With the rise of the Internet, the spread of Digital Information and Communication Technologies (ICTs), and the increase in knowledge combined with the ease of access to digital resources, the use of the virtual environment is a growing trend for the development of healthrelated research.⁵

With the increasing use of the internet by individuals of all age groups and audiences, researchers have used virtual data collection in quantitative and qualitative research. The dissemination of research information, especially in the Nursing area, demonstrates the ease of dissemination through the flexibility and dynamics of forming networks of users who share common experiences and ideas in order to provide new forms of knowledge construction and data collection.⁴

However, the use of ICT does not ensure that a judicious use occurs, especially in the educational environment, since the methodological techniques used by researchers for data collection are paramount to ensure the quality of information and understanding of the investigated phenomenon.^{4,6}

Data collection in a virtual environment was intensified as of March 2020, with the Coronavirus Disease Pandemic (COVID-19) caused by the new coronavirus, as a result of the adoption of restrictive sanitary measures and the social distancing that also impacted Higher Education in the areas of teaching, research, and extension.⁷

Virtual environment research has gained greater visibility and usability to explore and investigate phenomena in the objects of study with the growing theoretical, methodological, and ethical discussions.⁴

Therefore, the current scenario requires, whenever possible, to conduct research in a non-presence way and, thus, the need to qualify researchers to conduct data collection in a virtual environment is evident. Moreover, given the benefits of conducting studies online, it is essential that researchers are familiar with the methods of data collection in this modality, as well as with its facilitating and complicating factors.^{5,7}

Therefore, in the area of scientific research, there was a need for the National Research Ethics Commission to issue guidelines (Circular Letter no. 1/2021-CONEP/SECNS/MS) on the processes in the realization of this axis in a virtual environment to preserve the protection, safety, and rights of the participants.⁸

Thus, the proposal to develop an online focus group as a data collection technique in qualitative research is presented. Through previous active searches, it was identified that the technique is little explored in the scientific literature of Nursing in its virtual application, where it is appropriate to analyze it as an alternative data collection technique, considering its use in Nursing research as a relevant means of obtaining data.

The purpose was to report on the process of developing an online focus group as a data collection technique in qualitative research.

METHOD

This is an experience report on the development of the online focus group technique for data collection with nine nurse teachers, distributed in two online focus groups with, respectively, four and five participants. This activity was developed in the supervised internship in Primary Care linked to a public university in the interior of Ceará, Brazil.

The experience was lived by two undergraduate students and a Nursing professor of the institution mentioned above while they were developing their final paper, with data collection applied in March 2020 (period of the COVID-19 pandemic). The results emerged from the experiences of the first, second, and sixth authors about the instruments used for the development of the synchronous online focus group.

The focus group was planned in four adapted phases: (1) structuring the approach; (2) building the guiding instrument; (3) group composition; and, (4) developing the group process.⁹

The data were organized and exposed in four categories, according to the phases described above, and discussed according to the pertinent literature.

RESULTS

Chart 1 presents the planning stages of the synchronous online focus group.

First phase: structuring the approach

At this stage the locus of the study was decided, opting for two online and synchronous focus groups using the social network WhatsApp® due to its daily use by participants and researchers.

For the choice of location for the online focus group sessions, a neutral environment was considered, conducive to interactions and adherence of the participants. Therefore, in this experiment we used a private WhatsApp® group with access limited to people added by the creator/administrator, allowing members to send photos, videos, voice messages, and emojis and receive them instantly.

Practical knowledge about the application of focus groups with the use of technology was obtained, observing its potential and limitations, conditioned to the understanding and use by the participants. Chart 1. Planning steps for the synchronous online focus group. Iguatu (Ceará), Brazil, 2020.

Planning:
✓ Virtual environment meeting.
✓ Development of the online focus group script.
\checkmark Evaluations of the structure and organization in an attempt to make necessary changes.
One month earlier:
✓ Issuing an invitation in digital format to participants.
✓ Obtaining consent from the participants.
\checkmark Providing a characterization form to the participants.
\checkmark Scheduling a day and time to conduct the online focus group.
One day earlier:
✓ Forwarding reminders of the online focus group schedule.
On the day:
\checkmark Online moderators 10 minutes before the scheduled time.
\checkmark Adding the day's participants to the online focus group.
\checkmark Availability of information about the online focus group.
\checkmark Opening of the online focus group at the scheduled time (4:00 pm).
\checkmark Posting the questions in an image, with time for answers, keeping the focus on the discussion.
✓ End of the online focus group discussion.
\checkmark Thanking the participants.
✓ Removal of participants from the online focus group.
\checkmark Evaluation of the mediators.
$\sqrt{0}$ Organization of the collected material by downloading the data for analysis

 \checkmark Organization of the collected material by downloading the data for analysis.

Source: Elaborated by the first author.

Second phase: construction of the guiding instrument

With the online focus groups, the goal was to identify the main factors associated with the care practice for the effectiveness of the cervical cytopathological exam and the relevance of developing technologies for health education on the topic.

Thus, the group interview guide instrument was developed with 10 questions (Chart 2) based on previous readings on the theme, selected in a non-systematic way with the search conducted in February 2020 in Google Scholar, Virtual Health Library (VHL), and in the Scientific Electronic Library Online (SciELO).

During the implementation, a query was observed (question 01) about the nomenclature commonly defined for the exam by women and professionals. For example, pap smear, preventive exam, or cytological exam. Two answers did not correspond to what was expected to be achieved with the question. This limitation was considered in the second application of the group. Given the limitations, it was noted the need for a previous test of the interview application in an attempt to avoid these biases, however, this was not performed.

Some questions were adjusted, including: "tell me more about what is the reason", "what is the justification", with the intention of getting answers that would meet the proposed objective.

In this phase, the importance of clear writing, close to the participant's cultural reality, was perceived, in order to facilitate the understanding and the obtaining of an adequate response to the theme.

Third phase: group composition

At this stage, the research participants were defined. The recruitment was by convenience, including participants with common characteristics: development of CC prevention activities, familiarity with and use of the WhatsApp® application.

Nurses, preceptors of the supervised internship in Primary Care (PC) of the undergraduate course in Nursing at a public university in the interior of Ceará, who had a gynecological consultation at least six months ago were included, and those who were on vacation, certificate or maternity leave were excluded, as well as those who did not fill out the online characterization form or did not effectively participate in the online discussion. Chart 2. Semi-structured script of the online focus group. Iguatu (Ceará), Brazil, 2020.

Exam Nomenclature:
(1) How do you title the cervical cancer (CC) prevention test? What about the women?
Remarks on performing the exam:
(2) How do women report experiencing/experiencing the preventive exam?
(3) What feelings are observed in women before, during, and after the exam?
Performing the exam:
(4) Do you provide information about the exam before performing it? About what?
(5) In your opinion, what causes women not to have the exam?
(6) Do you implement any means to encourage the performance of the exam?
(7) What could be done to improve the adherence of women to this exam?
(8) What is your opinion about health promotion on this topic?
Educational game:
(9) Would you use an educational game as a guide for health education on this topic? Why would you use it?
(10) What content would you suggest to compose the educational game?

Source: Elaborated by the first author.

The invitation to participate occurred through messages sent by the WhatsApp® application. The contacts were made available by the university. Fifteen nurses were approached to participate in the study. Despite the approach strategies, ten participants returned, of whom only one did not show up, resulting in nine nurses.

If the participant did not respond within 48 hours, a new message was forwarded telling them how important their participation was. The maximum waiting time for a response was 72 hours. For those who agreed to participate, a link was left for them to fill out the Google Forms® form for group characterization and scheduling, the Free and Informed Consent Term (FICT), and the Post-Enlightened Consent Form (PECF). An online focus group reminder message was sent 24 hours and one hour before the start.

The form contained the variables: sex, institution and year of graduation, time since graduation, time working in Primary Care, titles, number of jobs, weekly working hours, and participation in courses on the subject.

It was evident that the use of technology for the application of the focus group facilitated the access and dissemination of information, obtaining the participants through a social network widely used nowadays.

Fourth phase: development of the group process

The online focus group sessions were organized following the steps: preparation, presentation, development, and closure of the group. In the preparation, the mediators went online (collection day) and added all the participants to the group, while in the presentation, they provided the objectives of the work, and explained the online focus group technique and ethical aspects. The online focus groups took place on a previously agreedupon day and time. Two focus groups were held with only one meeting, according to availability, one with five and the other with four participants, lasting an hour and forty-five minutes in both meetings. The minimum number of participants recommended was four per group.¹⁰

The moment began with a welcome, the disclosure of the objective of the event, and the provision of information and rules (Chart 3).

The queries presented were about the rules: the moment of discussion and the application of the emojis, which were cleared up by the researcher before data collection began.

The online focus groups were conducted by three mediators: the researcher, a professor, and a nursing student, who were previously trained about their functions by the professor. The researcher and the student mediated the moment, and the teacher performed the external observation (who does not manifest him or herself) to capture the reaction of the participants.

To facilitate reading, the questions were made available in images, and in both groups, only one person chose to use oral communication through audio. Aware of the exposure of the questions, the nurses were stimulated to talk about their conceptions of the questions.

When considering the need to evaluate the participants' emotions, the emojis feature was used. The mediators requested emojis at the end of each question, but participants could use this resource without restrictions. To standardize the meaning of each emoji, an image was made available at the time of the information (Figure 1).

The development was guided by the script of questions, and at the end, the group participants were removed from the

Chart 3. Information and rules made available. Iguatu (Ceará), Brazil, 2020.

INFORMATION AND RULES

✓ At 4:50 pm it will be open for messages to answer possible questions.

✓ The debate will start at 5pm.

✓ It will last an average of one hour.

✓ It will be conducted by three mediators.

 \checkmark For the development of the debate, some questions related to the prevention of cervical cancer and the relevance of developing technologies to promote women's health on this issue will be proposed.

 \checkmark The participants will be able to insert "emojis" into the text to simulate expressions, feelings, and emotions they experience.

✓ Participants will be asked to answer the questions, and they can discuss the opinions of others.

 \checkmark The questions will be available as a picture.

 \checkmark Discussions may be conducted in text and audio at the discretion of the participant.

✓ If there is no discussion of the issues raised, the mediators may make comments or ask questions of the participants. These will be in text and bold.

 \checkmark Before ending each question, at the request of the mediator, participants will be asked to send an emoji representing their expression on the subject discussed.

 \checkmark To begin the discussion of each question, the following emoji will be inserted "" and to end "".

✓ After the end of the online focus group, the participants will not be able to send messages to the group and will later be removed intending the effectiveness of the research.

Source: Elaborated by the first author.



Figure 1. Emojis and their respective meanings. Iguatu (Ceará), Brazil, 2020. Source: Elaborated by the first author.

group and the mediators (academics) and the observer (teacher) evaluated the collection in an attempt to identify the weaknesses in the script, the organization, the mediation, and the observation, and thus improve the subsequent online focus group. The collection technique reported was an opportunity for participants to express their opinions freely and, simultaneously, to be directed by mediators in interactions, enabling the sharing of experiences. Thus, the objective proposed by the research was achieved, and the discussions allowed a critical reflection on the research object.

The advantages of the online focus group strategy when compared to the face-to-face application were: cost reduction, convenience and participants from different places (researcher and participants do not need to travel to a physical location), lower abstention rate of participants, speed to collect, record and analyze the data, familiar environment (known social network). Disadvantages were: no face-to-face interaction, lack of typing skills (more skilled participants played a more active role in the discussion), and delayed response (loss of attention or lack of concentration).

The online focus group allowed mediators to develop competencies in terms of organization, logistics, moderation of discussions, and rules. These contributed to obtaining satisfactory data for analysis. Thus, it stands out as a concrete possibility of a data collection technique in qualitative research.

DISCUSSION

Although the focus group has often been used in a face-to-face format, in recent decades, with the improvement of information and communication technologies, this tool has been used in a virtual environment, requiring operational adaptations.¹¹

According to the results mentioned in this study, the essential procedure for conducting focus groups is the construction of a script, to direct data collection, as well as to avoid deviation from the research focus.¹² The script must be in a semi-structured format, flexible, brief, and containing key points or questions to the research, making it a natural and dynamic dialogue. One of the strategies to avoid bias in the script is to conduct a pilot group to observe if it meets the research proposal.¹³

Online focus groups can be conducted asynchronously or synchronously. In asynchronous sessions, participants can read the posted comments and contribute their own contributions at any time. Synchronous sessions are conducted in real-time, with all participants participating simultaneously,¹⁴ an option used in this study to ensure an advantageous experience due to the instantaneous interaction.

When choosing the program for data collection, it is preferred to be free, allowing communication in an instantaneous way, as well as for the participants to be familiar with the technology, its features, and tools. Nowadays, there are several tools that can be used: discussion forums, websites, blogs, chats, Facebook®, Instagram®, Twitter®, YouTube®, Zoom®, Google Meet®, Telegram®, and WhatsApp®.¹⁰

The WhatsApp® application used in this research allowed the discussion to occur in real-time and the messages were sent, immediately received, and answered by the members, using the typing or audio resource, being automatically recorded on file. Thus, the chosen social network presents itself as a useful technology, so that its features and tools are known by both moderators and participants.¹⁵

As was done in this research, the invitation to participate should be clear, objective, without technical details, and made

the subject to be addressed clearly in the online focus group, where detailed information was provided in the FICT to deliberate on their decision to participate or not in the group. To avoid insufficient numbers of participants (fewer than four), sending a reminder the day before may prevent unforeseen events and give the researcher the opportunity to revise dates or obtain other participants.¹⁶

The participants must present the following common aspects: competence in the area of the theme under study and be capable of using the virtual communication tool. It was verified in this study, that productivity was obtained with the participation of four members in one group and five in another. The number tends to vary between four and eight members, depending on the experience of the researcher, in order to avoid flaws in the process. The literature presents a variation, but what seems to be the consensus is not to recommend a group with more than 12 people, due to the difficulty of maintaining the focus and the participation of all members.¹⁴

A percentage of 10% to 50% of non-participation or dropouts is expected. For this reason, over recruitment is recommended, i.e., the invitation of 20% more people, ensuring the minimum number of participants, without considerably increasing the group, in case all attend.¹³ When using the online focus group, the low dropout rate is noteworthy, a fact that is evident in the results of this research.

The online focus group mediators, in addition to knowing the research objectives, are responsible for guiding, organizing, and stimulating the participants, in order to collect the maximum amount of information. The observer, on the other hand, has the role of helping the moderator in conducting the group and taking note of the main verbal and especially non-verbal expressions.^{14,17}

The duration obtained through the aforementioned application was adequate for the collection of data on the topic. Ideally, it should last at least one hour, but not more than two.¹³ Not always a single session can provide enough diverse data for a robust analysis. In this sense, the same participants can be invited for a second meeting. However, an unscheduled second session may result in some participants dropping out.¹²

In this study, the data obtained in a single meeting per group was sufficient to reach the proposed objectives, which justifies holding a single meeting per group.

Another important point about the online focus group concerns the stimulus materials with the inclusion of free association resources, pictures, drawings, photographs, and videos, to start and/or stimulate a certain debate.¹⁷

As for the use of emojis, this resource can be used to overcome the lack of manifestations of emotions that can be easily perceived when the focus group is face-to-face. By inserting them in the text, participants can simulate expressions, emotions, and feelings towards the subject under discussion,¹³ facilitating the compression of their experiences, as well as identifying discomforts related to the research.¹⁷ This experiment proved successful in facilitating the identification of non-verbal expressions during the development of the online focus group. Given the above, in scientific Nursing investigations, faceto-face or virtual focus groups favor the exploration of themes that require interaction from the studied population, enabling the understanding of daily practices, actions, and reactions to facts and events, behaviors and attitudes that directly or indirectly influence health and disease.¹⁸

CONCLUSION AND IMPLICATIONS FOR PRACTICE

To develop the online focus group technique, planning is necessary, allowing the effective achievement of the research object, by having a direct impact on the result of the data collected. Thus, it is important for the researcher to understand the topic of the study, the process of conducting the study, and the methodological rigor of the technique to support the development of the script, the location, the participants, and the structure of the online focus group.

The data collection strategy through the online focus group can contribute significantly to the construction of knowledge in health and Nursing. Therefore, it is valid the appropriation of this data collection practice by nurses when conducting qualitative research.

A limitation of the study is the lack of scientific evidence in the area of Nursing that provides knowledge about the technique of data collection by online focus groups. Thus, it is suggested that future studies be conducted, addressing the various perspectives of this theme.

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