Tool 3.9: Sample Focus Group Guide

VOCAL MMTP Focus Group Guide
(2 ½ hours)

Facilitator Note: This focus group guide is split into different sections. Each section has a rough time allotment and a brief italicized introduction to make participants familiar with the topic, followed by a set of questions for you to ask. You should start each section by reviewing the introduction and then asking participants to answer the questions. Each section has one or more main question along with follow up questions. You do not need to read the script verbatim. Feel free to use your own words and be natural and conversational.

Welcome and Overview (5 minutes)
Hello everyone. Thank you for coming out today. My name is _____ and I work with VOCAL and the New York City AIDS Housing Network. You’re here today so that we can hear from you about your experiences with methadone clinics in New York City and your suggestions for how methadone programs can be improved.

Have you any of you heard of VOCAL before? (Pause. If yes, then…) 
• What have you heard?
• What do you know?
• For those of you who haven’t heard of us, VOCAL and NYCAHN is a community-based organization, led by low-income people who are living with HIV/AIDS, former and active drug users and formerly incarcerated.
• Based in part on what we learn from you today, and a survey we have been doing for the past couple of months, we’ll be writing a report about how to improve methadone maintenance programs in New York City.
• The report will be used to fight for improvements to Methadone programs.
• You should be aware that we will not use your name in the report unless you want us to and we will ask you to sign a form to give consent that you want to participate in this focus group and share your experiences.

Ground Rules (10 minutes)
Our Focus group today will last about 2.5 hours. There are 7 sections and each will take anywhere from 15 to 30 minutes, along with an opening and closing section.

A Focus Group is different from a support group or a workshop. I will be leading the discussion and will be asking specific questions that we need to answer today. I know that there is a lot of other stuff to talk about besides the questions I ask today, but for this focus group we will need to stick to the questions I ask. For all other questions and issues, we can talk about it after we are done with the focus group.

We need everyone to stay for the entire discussion. You will be provided with car fare when we are done with the focus group. If you cannot stay for the full two hours, you can feel free to leave at this time. Also, please try NOT to get up and leave the room unless you have to.
Please respect everyone’s point of view and let each person finish speaking before offering your own opinions. We’re not looking for a “right or wrong” answer, only everyone’s different experience and opinions. I would like to hear from everyone in the group, and would like for everyone to feel comfortable in speaking. So please respect each other and this discussion, no matter what you may hear. We are not here to judge anyone.

I will be facilitating this discussion with a set of questions. Please answer these questions directly. If people are going off topic or talking for too long, I may need to cut you off for sake of time and so that everyone gets a chance to speak.

I will also be recording the discussion so that we can capture what you say to use for our report. I am going to ask that you say your first name each time before you speak so that we can tell when different people are speaking when we listen to the tape.

We will NOT use your name unless you want us to. If you do not feel comfortable now that you know more about this, please feel free to leave at this time. In a minute, I will hand out consent forms to sign to let me know that you are ok with everything I just said and that you want to participate in this discussion.

To recap, in order that we have a productive meeting today, we should all follow these rules (Facilitator note: should be written on butcher paper, go through them very quickly):

• You must stay for the whole discussion  
• Please try NOT to get up and leave the room during the discussion  
• Everything we hear today MUST be kept private.  
• No names will be used in the report unless you want us to use yours.  
• Say your name each time before you talk. This is for the notes. 
• Respect everyone’s opinions. We are not here to debate with anyone.  
• All of your answers, ideas, feelings and opinions are important.  
• If you are talking too much, stop.  
• If you are not talking enough, speak up. 
• ONE MIC: Please do not interrupt anyone. 

Wait until someone is done speaking before offering your opinion.  
• If you have questions that are not specific to the focus group, please wait until the end.

Facilitator Note: hand out consent forms and have everyone sign. At this point you can turn on the recorder.

Introductions and Opening (5 minutes)

Let’s start with a round of introductions. We’ll go around the table and everyone can say very quickly (1 minute or less):

• Your name?  
• Which Methadone clinic do you go to and how long have you been going there?  

The Good and the Bad (15 minutes)

We know that you all have a bunch of different programs and meetings that you go to. For this focus group, we are focusing on your Methadone Maintenance program. Now we want to hear what works and what doesn’t work at your methadone clinic. Please be as specific as possible.

• What are the two best things about your methadone clinic and what are the two biggest concerns that come to mind when you think about your methadone clinic?

Facilitator Note: The note taker should write down the concerns on butcher paper and let people know these concerns are very important, that VOCAL is writing this report to hopefully correct some of these concerns, but right now we are here to answer specific questions and we must stick to our agenda.

Policing (15 minutes)

Introduction: When doing our surveys we found that a lot of people are being stopped, frisked and harassed by the police outside of their methadone clinics. People that we talked to have said that this sometimes causes them to miss a dose of methadone or has other negative impacts on their treatment.

• Describe your relationship with security at your program.  
• How does this relationship effect your treatment?  
• What is your experience with the police near your methadone clinic?  
• Have you seen other people being stopped and frisked by police near your clinic? What happened?
• What impact do you think the police presence at or near your clinic has on your treatment?
• Have you ever missed a dose because of the police? Please explain what happened.
• Do you think people are less likely to come to the clinic because of the police? Why?

Hepatitis C (30 minutes)
Introduction: In doing our surveys we have heard from a lot of people that have Hepatitis C. We know that this is a silent epidemic and that there is a very high rate of Hep C among people that go to methadone clinics. We are concerned that people don’t have the knowledge they need, given the high rates of Hep C. We are also concerned that clinics are not doing what they need to be doing to address this problem.
• So far in our survey we found that only 31% of people said they tested positive, but we know that 60-85% of ppl in MMTPs are positive. Why do you think people are saying they have not tested positive?
• If you come into the clinic already knowing you’ve tested positive how does the medical staff or your counselor respond?
• Is it possible that people are confused and don’t know their status? Why?
• Does the clinic always tell you your status?
• What kind of information or services does your methadone clinic have for Hep C?
• Is it easy or hard for you to talk to your counselor or doctor about Hep C? Is it easy or hard to get information from them about Hep C? Please explain your answer.
• Have you tried to talk to your counselor or doctor about Hep C? What was their response? What was their attitude towards Hep C?
• What kinds of information do you think your methadone clinic should have? What do you think you need to help you access treatment or care for Hep C?
• What questions do you have about Hep C?
• Are you concerned about Hep C? Why or Why not?
• Where do you get information about Hep C?
• Do you get treatment for Hep C?
• Where do you go? Who referred you there? What kind of information are you given about your treatment?
• Were you ever told that you can’t have treatment because you are still using or for any other reason? Please explain what happened.

Methadone Dosing (15 minutes)
• When was the last time you missed a dose of methadone? Please explain what happened and why you missed the dose.
• What did you do when you missed the dose? Did you have to get methadone somewhere else? Did you use? Please explain.
• What did you counselor or doctor do after you missed the dose?
• How did this impact your treatment?

Overdoses (15 minutes)
While doing our surveys, we have had a lot of people tell us that they had seen someone overdose. We also know that overdosing is a big problem in our community and overdose deaths have exceeded homicides. There is a drug that can reverse overdoses called NARCAN. Distributing this drug could reduce the number of deaths due to overdose.
• Have you ever heard of NARCAN? What have you heard? Do you know if NARCAN is available at your methadone clinic?
• Do you think NARCAN should be readily available at your methadone clinic? Why or Why not?
• Do you think that people that go to methadone clinics should be trained to administer NARCAN to help prevent overdoses? Why or why not.
• Who here has seen someone overdose? Please tell us about what happened.
• Where were you?
• Who were you with?
• What happened to the person that overdosed?

Syringe Exchange (15 minutes)
One really effective way to reduce the harm of using injection drugs is to safely exchange and dispose of the needles you use. Needle exchange programs are widely accepted as effective way to reduce HIV transmission. We are going to ask you your opinion about having the option to exchange or dispose of your needles at your methadone program.
• Do you think it would be helpful to have a place to dispose of needles and get clean needles at your clinic? Why?
• Have you ever participated in a syringe exchange program?
• Did it help reduce your risk for HIV/AIDS or manage your drug use?

The Future/Solutions (15 minutes)
Lastly, we’ve talked a lot about some of the issues at your methadone clinics. Now, let’s talk about a way to fix those problems. We want to hear your ideas and solutions about how to improve services and treatment at methadone clinics.
• If you were the director of your methadone clinics, what programs and policies would you change or create?
• How would you involve patients in the decision making at the clinic?
• What type of staff training would you provide?
• What types of education and services would you provide for patients?

Summary and Wrap Up (10 minutes)
Give a 2-3 minute summary of what has been said.
• Did I accurately sum up what was said?
• Is there anything else you’d like to say?
• Did we miss anything?

Thank you all for participating in this focus group and for expressing your opinions here today. We learned a lot about your experiences. This information will be extremely helpful in writing the report and in shaping our campaign to fight for better methadone clinics.

Thank you so very much for your time!