ABSTRACT

Objective: to investigate the main scientific studies using the Focus Group method with elderly users of the Unified Health System (SUS), identifying their main methodological procedures and research limitations. Method: we searched the CAPES portal on the ScienceDirect, SciELO, Scopus Web of Science and PubMed/MedLine databases, using the keywords "Focus Group", "Elderly" and "Health", using Methodi Ordinatio to rank and select the articles. Results: eight articles were selected in the last stage. The articles were filed and classified by author, year, title, journal, objectives, problem, methodology, suggestions and results. Conclusion: the focus group method, used in groups of elderly people, is very relevant if applied with the rigor and care that the method and the subject/object of study demand. Its limitations refer mainly to its small sample size and the absence of certain criteria in its application.

DESCRIPTORS: Focus Group; Elderly; Health;
RESUMO

Objetivos: investigar principais trabalhos científicos utilizando método Grupo Focal com população de idosos usuários do Sistema Único de Saúde (SUS), identificando seus principais procedimentos metodológicos e limitações de pesquisa. Método: busca-se no portal CAPES nas bases ScienceDirect, SciELO, Scopus Web of Science e PubMed/MedLine, com as palavras-chave “Grupo Focal”, “Idoso” e “Saúde”, utilizando Methodi Ordinatio para ranqueamento e seleção dos artigos. Resultados: oito artigos, selecionados na última etapa. Realizou-se fichamento dos artigos, classificando-os quanto autores, ano, título, periódico, objetivos, problema, metodologia, sugestões e resultados. Conclusão: o método Grupo Focal, utilizado em grupos de idosos, tem muita relevância se aplicado com devido rigor e cuidado que o método e o sujeito/objeto de estudo demandam. As limitações do mesmo se referem principalmente a amostra reduzida e a ausência de alguns critérios em sua aplicação.

DESCRITORES: Grupo Focal; Idoso; Saúde;

RESUMEN

Objetivos: investigar los principales estudios científicos que utilizan el método de Focus Group con ancianos usuarios del Sistema Único de Salud (SUS), identificando sus principales procedimientos metodológicos y limitaciones de investigación. Método: búsqueda en el portal CAPES en las bases de datos ScienceDirect, SciELO, Scopus Web of Science y PubMed/MedLine, utilizando las palabras clave “Focus Group”, “Elderly” y “Health”, utilizando Methodi Ordinatio para ranqueado y seleccionar los artículos. Resultados: en la última etapa se seleccionaron ocho artículos. Los artículos fueron archivados y clasificados por autor, año, título, revista, objetivos, problema, metodología, sugerencias y resultados. Conclusiones: el método de grupos focales, utilizado en grupos de personas mayores, es muy pertinente si se aplica con el rigor y cuidado que el método y el tema/objeto de estudio exigen. Sus limitaciones se refieren principalmente a su pequeño tamaño muestral y a la ausencia de ciertos criterios en su aplicación.

DESCRITORES: Grupo Focal; Anciano; Salud;

INTRODUCTION

Concern about the health management of the elderly has been growing in recent decades. According to IBGE (2018), Brazil’s elderly population has continued to age in recent years. It surpassed the 30.2 million mark in 2017, according to the National Continuous Household Sample Survey.1-2 Ageing is a continuous and irreversible process, often perceived with more negative than positive aspects. However, perceptions of this stage are subjective, influenced by the experiences and context in which the individual is or has lived.3 It has become a phenomenon that increasingly deserves attention as a way of improving quality of life and giving new meaning to its social relevance in a society that is aging in large proportions.4 According to Lima4, it is necessary to involve the participation of older people in all organizational, political, social and cultural spaces to promote active and healthy aging.

The health needs presented by users are shaped by the interpretation they give to health and illness, an interpretation that is influenced by countless biological, social, psychological and economic determinants and conditioning factors, in a constant process of subjectivity formation.5

Care must be planned taking needs into account. And health services must be prepared to deal with them, understanding meanings about their nature at the intersection of subjects, involved in a way that seeks to promote the subjects’ autonomy.5 Programs aimed at the elderly aim to offer support for the aging process to occur without significant damage and their independence preserved.6 Furthermore, the importance of knowing how the elderly perceive their health is justified, since it can have a direct influence on their concept of well-being and quality of life.7 Brazilian Basic Health Units (BHU), through the formation of groups, work in such a way as to extend care.8

The group, as a health intervention tool, can serve as a transforming agent when used as a space for expressing thoughts, feelings, exchanging experiences, health education, coexistence and socialization. The interlocutor is recognized as the holder of knowledge which, although different from technical-scientific knowledge, is not delegitimized. They are in a continuous exchange of knowledge, emotions and information.9

In order to investigate processes of adherence to therapeutic treatments, considering that clients have knowledge about the most viable means of implementing interventions, it is essential to delve deeper and deeper into knowledge.10 In view of the arguments and demands for epistemological depth, it can be seen that within the scope of qualitative approaches in social research, the focus group technique has been progressively more widely used.11 The initial interest in
group interviews came from the ease of obtaining data with a certain level of depth, in a short period of time, among the rapid approach techniques used by epidemiologists and health educators.\textsuperscript{12}

The focus group technique requires analytical efforts that (re)interpret it and work in line with citizens’ demands, placing it in a prominent position in the methodological field.\textsuperscript{13} Social scientists aim to observe the process through which specially selected participants respond to research questions, in order to later theoretically interpret the data.\textsuperscript{12}

This study contributes to understanding how this methodology has been applied to the elderly, from the perspective of health and public policies in this sector, and how the procedures used make it possible to give meaning to the discourse of the elderly, considering the participation of this population to evaluate their own health issues and life project.

The Focus Group (FG) is a robust instrument for searching for and understanding the subjectivities of elderly people’s health. This study aims to investigate the main scientific studies using the FG method with elderly users of the Unified Health System (SUS), identifying its main methodological procedures and research limitations, guided by the question: what are the main procedures and limitations of the FG method, carried out with elderly users of the SUS?

\section*{METHOD}

This study was based on the systematic review methodology Methodi Ordinatio, proposed by Pagani, Kovaleski and Resend\textsuperscript{e}\textsuperscript{14}, expressed as a methodology for Systematic Literature Review and Construction of the State of the Art. It is a Multi-Criteria Decision Aid (MCDA) tool, which allows articles to be ordered based on three variables: impact factor, number of citations and year of publication. From now on, the InOrdinatio equation is applied (it considers all three variables) to generate a ranking of the articles in the portfolio.\textsuperscript{14}

Initially, searches were carried out on the CAPES portal, using multidisciplinary databases containing full texts and free access: ScienceDirect, SciELO, Scopus, Web of Science and PubMed/MedLine. Table 1 shows the number of results in the databases.

Table 1 shows the search terms: "Grupo focal", "Idoso" and "Saúde". Four papers were found in ScienceDirect, 33 in Scielo, 20 in Scopus, none in Web of Science and one in Pubmed. Totaling 58 results.

Duplicate articles and those without a title/author were excluded, leaving 50 papers, which were then exported to Excel, where the Methodi Ordinatio was calculated, generating a ranking.\textsuperscript{14}

After reading the titles and abstracts, the exclusion criteria were papers whose object/subject of study was not specifically the elderly population and Focus Group methodology. No time cut-off was used. The search was restricted to scientific articles, excluding dissertations, theses, reviews and abstracts.

After skimming through the twelve selected papers, four articles were eliminated because they did not refer to the practices of the Unified Health System (SUS) with the elderly. The publications were classified according to data obtained from the Qualis classification table, taken from the Sucupira platform.\textsuperscript{15}

Table 2 shows the ranking (classification according to the InOrdinatio equation), author, title, journal in which it was published, impact factor, year of publication, number of citations, result of the InOrdinatio equation and Qualis classification.

Eight articles, selected in the last stage, were systemati-cally read in full, in chronological order. The articles were filed and classified by author, year, title, journal, objectives, problem, methodology, suggestions and results.

\begin{table}[h!]
\centering
\caption{Search results}
\begin{tabular}{lcccccc}
\hline
\textbf{Termos de busca} & \textbf{ScienceDirect} & \textbf{Scielo} & \textbf{Scopus} & \textbf{WOS} & \textbf{PubMed} & \textbf{Total} \\
\hline
"Grupo Focal" AND ("idosos" OR “idoso”) & 4 & 33 & 20 & 0 & 1 & 58 \\
Duplicatas & & & & & & 8 \\
Sem informação & 4 & & & & & 46 \\
\hline
\end{tabular}
\end{table}

Source: Prepared by the authors
Focus group: systematic review of methodological principles for assessing the health of the elderly person

**DISCUSSION AND RESULTS**

We tried to identify the relationship between the methodological procedures carried out and what the literature proposes. Mainly considering consistency with the principles of humanization in healthcare.\(^\text{16}\)

Tables 1 and 2 show the general characteristics of the articles. Percebe-se, pelos títulos do Quadro 1, variedade das temáticas, apesar dos sujeitos/objetos de pesquisa de todos os trabalhos serem pessoas idosas e como recurso metodológico ter sido realizado GF. Nota-se que o ponto em comum entre eles é a manifestação das opiniões e percepções dos sujeitos.

The titles in Table 1 show a variety of themes, despite the fact that the subjects/objects of all the studies were elderly people and that the methodological resource used was FG. It can be seen that the point in common between them is the expression of the subjects' opinions and perceptions. FG is a research technique in which the researcher gathers together, in the same place and for a certain period of time, a certain number of people who are part of the target audience of their investigations, with the aim of collecting, through dialogue and debate with and between them, information about a specific topic.\(^\text{13}\)

According to these authors, situations suitable for applying the FG technique are those in which, in order to achieve the research

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**Table 2 - Ranking table of selected articles (in chronological order)**

<table>
<thead>
<tr>
<th>Ranking</th>
<th>Autores</th>
<th>Artigo</th>
<th>Journal</th>
<th>FI</th>
<th>Ano</th>
<th>Ci</th>
<th>In Ordination</th>
<th>Qualis</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Lopes, M.A., de Rosso Krug, R., Bonetti, A. and Mazo, G.Z.</td>
<td>Barreiras que influenciaram a não adoção de atividade física por longevas</td>
<td>Revista Brasileira de Ciências do Esporte</td>
<td>0,8</td>
<td>2016</td>
<td>48</td>
<td>60</td>
<td>B1</td>
</tr>
<tr>
<td>27</td>
<td>Bulsing, R.S. and Jung, S.I.</td>
<td>Aging and death: Perception of elderly women from a support group (Envelhecimento e morte: Percepção de idosas de um grupo de convivência)</td>
<td>Psicologia em estudo</td>
<td>0,2</td>
<td>2016</td>
<td>9</td>
<td>21</td>
<td>B1</td>
</tr>
<tr>
<td>1</td>
<td>da Schenker Miriam, C.D.H</td>
<td>Avanços e desafios da atenção à saúde da população idosa com doenças crônicas na Atenção Primária à Saúde</td>
<td>Ciência &amp; Saúde Coletiva</td>
<td>1,336</td>
<td>2019</td>
<td>66</td>
<td>87</td>
<td>A2</td>
</tr>
<tr>
<td>11</td>
<td>Santana Nayara, S.L.C.B.B.T.J.</td>
<td>Corpo e saúde: concepções de um grupo de idosos de Práticas Corporais de uma Unidade Básica de saúde em Goiânia</td>
<td>Saúde e Sociedade</td>
<td>0,349</td>
<td>2022</td>
<td>0</td>
<td>30</td>
<td>A2</td>
</tr>
</tbody>
</table>

Source: Prepared by the authors
objectives, it is necessary to gather the impressions, visions and conceptions of the world of the target audience through debate.

Below, in addition to the descriptors, Table 2 lists the main objectives and methods used in the studies. Although they are not the focus of this study, they are related to the methods and aligned with the purpose of the research.

One of the most important steps when planning a FG is to establish its purpose. The planning of this activity must take into account a set of elements that guarantee its full development: the necessary resources, with special emphasis on the group moderators; defining the number of participants and groups to be held; the profile of the participants; the selection process and the duration.\(^\text{16}\)

Like other techniques, focus groups are not capable of illuminating the methodological paths of social research on their own, nor are they capable of conditioning or influencing the choice of objects and objectives. On the contrary, its choice is conditioned by the theoretical-methodological orientation of the research, the object of investigation and the real need for data and information to be collected.\(^\text{13}\)

As the subject of this study, the methodological procedures applied in the research will be covered in detail by topic, in the chronological order of the aforementioned works.

1) Location

The physical space is a key factor in the successful development of the technique; the wrong choice could compromise the

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**Table 1 - General characteristics of the articles**

<table>
<thead>
<tr>
<th>Author and Year</th>
<th>Title</th>
<th>Journal/place of study</th>
<th>Subject/object</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jênifa Santos</td>
<td>Elderly adherence to hypertension treatment and nursing interventions</td>
<td>Rev Rene Fortaleza – CE</td>
<td>27 elderly people were evaluated, 6 agreed to take part.(^\text{19})</td>
</tr>
<tr>
<td>Raquel Florêncio</td>
<td>Therapeutic factors identified in an Elderly Health Promotion group</td>
<td>Revista da Escola de Enfermagem Goiânia/GO</td>
<td>Participants/ coordinators two groups. 17</td>
</tr>
<tr>
<td>Célida Oliveira</td>
<td>The health/disease process and the family health strategy: the user’s perspective</td>
<td>Revista Latino-Americana de Enfermagem Maceió/AL</td>
<td>Group of elderly people with hypertension and diabetes mellitus.(^\text{18})</td>
</tr>
<tr>
<td>Thereza Moreira</td>
<td>Barriers influencing the non-adoption of physical activity by older women</td>
<td>Revista Brasileira de Ciências do Esporte Florianópolis/SC</td>
<td>69 women, aged 80 or over, participating in community groups.(^\text{19})</td>
</tr>
<tr>
<td>Débora Santos</td>
<td>Aging and Death: Perceptions of Elderly Women in a Community Group</td>
<td>Psicologia em Estudo Taquara/RS</td>
<td>7 elderly women participating in a community group.(^\text{20})</td>
</tr>
<tr>
<td>Elanei Tenório</td>
<td>Identifying needs and possible solutions: elderly people in Primary Health Care have their say</td>
<td>Saúde em Debate Natal/RN</td>
<td>Primary health care users. Three groups: 12, 7 and 12 participants.(^\text{4})</td>
</tr>
<tr>
<td>Mérica Brêda</td>
<td>Advances and challenges in primary health care for the elderly population with chronic diseases</td>
<td>Ciência &amp; Saúde Coletiva Rio de Janeiro/RJ</td>
<td>Elderly people with or without family members/caregivers.(^\text{21})</td>
</tr>
<tr>
<td>Silvana Mishima</td>
<td>Body and health: conceptions of a group of elderly people in Body Practices at a Basic Health Unit in Goiânia</td>
<td>Saúde e Sociedade Goiânia/GO</td>
<td>Appro Ximately 30 members of the Sports and Leisure group. 5 elderly people took part in the focus group.(^\text{22})</td>
</tr>
<tr>
<td>(2013)</td>
<td></td>
<td></td>
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<tr>
<td>(2014)</td>
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<td>(2020)</td>
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<td>(2021)</td>
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<td></td>
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<tr>
<td>(2022)</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Study data
### Table 2 – General characteristics of the articles

<table>
<thead>
<tr>
<th>Author and Year</th>
<th>Descriptors</th>
<th>Objective of the study</th>
<th>Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>(2012)</td>
<td>Nursing; Hypertension; Elderly; Patient cooperation.</td>
<td>To assess adherence to hypertension treatment among elderly people in a group and to describe nursing interventions with this clientele.</td>
<td>A collection instrument was used to assess adherence to treatment; a Focus Group technique was used to investigate nursing interventions and Collective Subject. Discourse was used to organize the speeches.</td>
</tr>
<tr>
<td>(2013)</td>
<td>Elderly; Group Structure; Health Promotion; Health Services for the Elderly; Geriatric Nursing</td>
<td>To identify therapeutic factors present in a health promotion group for the elderly.</td>
<td>Descriptive exploratory study; qualitative approach, data collected through focus groups, submitted to content analysis, thematic modality.</td>
</tr>
<tr>
<td>(2014)</td>
<td>Family Health Strategy; Health Promotion; Community Health Nursing; Nursing.</td>
<td>To analyze the meanings attributed by Primary Health Care (PHC) users to their health/disease process and the services they use.</td>
<td>Qualitative research using the Focus Group technique to interview groups of PHC users. Discourse analysis was used to analyze the meanings.</td>
</tr>
<tr>
<td>(2016a)</td>
<td>Barriers: Motor activity; Human aging; Elderly 80 years and over</td>
<td>To identify barriers that influence long-lived elderly women not to adopt physical activity practices.</td>
<td>Exploratory descriptive study with five active focus groups and five physically inactive groups. Data interpreted using thematic content analysis.</td>
</tr>
<tr>
<td>(2016b)</td>
<td>Elderly people; aging; death.</td>
<td>To identify conceptions about aging and death among participants in a social group. To examine the inclusion of elderly women in the group and their expectations for the future.</td>
<td>Qualitative research. Data collection, Focus Group technique with pre-established script and data analysis using Bardin’s methodology (2010).</td>
</tr>
<tr>
<td>(2018)</td>
<td>Primary Health Care; Family Health Strategy; Elderly; Health service needs and demands.</td>
<td>To understand the perception of elderly people about the health care provided by Family Health professionals.</td>
<td>A qualitative descriptive study. A focus group was used. The data was analyzed using the Content Analysis method, in the thematic modality.</td>
</tr>
<tr>
<td>(2019)</td>
<td>Primary health care, Chronic diseases, Elderly, Family health strategy.</td>
<td>To analyze the advances and challenges of health care for the elderly population in primary care.</td>
<td>Participant observation and focus groups with elderly people, whether or not accompanied by family members/caregivers.</td>
</tr>
<tr>
<td>(2022)</td>
<td>Body; Health; Elderly; Body Practices.</td>
<td>To investigate conceptions of the body and health among elderly people involved in the body practices of the Sports and Leisure group at the BHU.</td>
<td>Qualitative research. Six observations were made, recorded in a field diary and focus group. Information submitted to content analysis.</td>
</tr>
</tbody>
</table>

Source: Study data

Outcome of the research. The location is of fundamental importance for the quality of the recording and for the participants to feel comfortable taking part in the discussions. We recommend choosing a suitable location that is clear, noise-free, away from third party interference and easily accessible to all. The study carried out in Fortaleza - CE reports that the Focus Group was held at CRAS, but does not mention the characteristics of the location. In Goiânia the author reports that the meetings were held in a room at the Health Unit. The study carried out in Florianópolis reports that the meetings took place in places close to people’s homes.

In Rio Grande do Sul, the meeting places were in the same environment where the group activities took place. This was a limitation of the study, reported by the author. Even though it is an important variable for the study, other articles do not specify the meeting places.

2) Number of participants, duration and number of FGs

Regarding the number of participants in the focus groups, we found in the literature a variation between 6 and 15. Of the studies selected in this review, all are included in this metric, ranging from 5 to 8 participants per FG.

Within the proposed duration of the meetings, a variation between 90 (minimum time) and 110 minutes (maximum time) should be considered for good use of the technique.
study carried out in Maceió18 p. 920) and a maximum of 90 minutes reported in the articles from Goiânia17 and Taquara20.

However, just as important as the duration of the group, which requires the moderator to conduct it well, it is necessary to determine the total number of groups needed to explore the topic in question. As well as taking into account the complexity of the subject, the saturation criterion, commonly used in qualitative studies, is also applicable in this case.16

Number of meetings held: one FG in Fortaleza10, four with elderly people in Goiânia17, two in Maceió18, ten FG in Florianópolis19, with 69 participants divided between them, three FG meetings in Taquara20 and Natal4 and six meetings in Goiânia22, the last of which held the FG. The studies show that the variation in the number of meetings is directly related to the diversity and complexity of the issues and themes.

3) Participants profile

According to TRAD16, participants in a focus group must have certain characteristics in common that are associated with the central theme under study. Barbour and Kitzinger (1999) recommend that participants be selected from a group of individuals who are familiar with the subject to be discussed and who have in-depth knowledge of the factors affecting the most pertinent data.16

This study exclusively involves groups of elderly people, paying attention to the characteristics and phenomena that unite them, making them a group. In this case, questions about health and ageing.

The subjects/objects of these studies are: hypertensive patients in the Fortaleza study10, participants in health promotion groups and/or Body Practices/Physical Activity in Goiânia17, Maceió18, Goiânia22, community groups in Florianópolis19 and Taquara20 and PHC users in Natal4 and Rio de Janeiro21.

Not only the age factor, but also the common needs of the group in which the subjects are located, bring relevance to collective thinking. It’s about using focus groups to understand how perceptions, opinions and attitudes about a fact, product or service are formed and how they differ.23 Results indicate that most of the studies were carried out with people who already had a bond prior to applying the method, which may be a favorable point for the fluidity of the discourses.

4) Role of the moderator

Morgan (1997) defines focus groups as a qualitative research technique, derived from group interviews, which collects information through group interactions.16 Group forces or dynamics become an integral part of the procedure with participants involved in discussion with each other, rather than directing their comments solely at the moderator.

The moderator has the fundamental role of ensuring a discreet and firm intervention. A prerequisite is that the moderator has substantial knowledge of the topic under discussion in order to lead the group properly.23 There may also be external observers (who do not speak) to capture the reaction of the participants.16

It is up to the moderator to welcome each participant in a cordial manner, create a pleasant waiting environment and avoid as much as possible the topic of the focus group being brought up too early in informal conversations.23

In the articles analyzed, the researcher/author of the text acted as moderator, usually accompanied by an observer, and may also be responsible for recording or filming, if duly authorized by all the participants. The objective of the group should be clearly expressed when the work begins, signaling the central issues on which the discussion will focus.16

5) Ethics Committee

The moderator should ensure that all participants have previously signed the informed consent form (ICF), which should include reference to the use of recorders or cameras.16 All the texts analyzed report clarifications of the study’s objectives, made by the moderator to the participants, the signing of the TLCE and approval by the Research Ethics Committee.

6) Analysis tools

Specifically in evaluative research, the systematic and careful analysis of discussions will provide clues and insights into how a product, service or plan is perceived24. Not only should collection instruments be carefully chosen, including the creation of a script and guiding questions, but also analysis methods.

The main characteristic of the Focus Group technique is that it works with reflection expressed through the “speech” of the participants, allowing them to present their concepts, impressions and conceptions on a given topic. "As a result, the information produced or deepened is essentially qualitative".13:5

The Collective Subject Discourse (CSD) was used to analyze the selected papers in Fortaleza10 and Maceió18 and content analysis in Goiânia17, Florianópolis19, Taquara20, Natal4, Rio de Janeiro21 and Goiânia22.

According to Morgan (1997), the analysis process should include two complementary moments: specific analysis of each group and cumulative and comparative analysis of all the groups carried out.16 The aim of this process is to identify trends and patterns of responses associated with the subject of study. The pioneering and most recent studies analyzed here seem to follow this pattern.

7) Limitations

Nogueira et al.17 point out that the limitation of the study is that factors that were not identified should not be considered non-existent, but rather should not be the focus of the study. The study was restricted to working on the content expressed in the guiding questions presented as triggers for discussion in the FGs. Another possible limitation to this practice is the way in which the groups are coordinated, related to the lack of planning and systematic evaluation, as well as the lack of preparation of the health professionals who carry out this activity.17

Bulsing and Jung highlight the following limitations: the small sample size (seven elderly women), where the conclusions apply only to the population surveyed, making it impossible to generalize the results obtained; the place where the FG was
Focus group: systematic review of methodological principles for assessing the health of the elderly person

held, with other activities taking place concurrently with those of the social group and with the presence of other people in the same space, which could influence the discourse of the elderly women; and also the training of health professionals.19

Schenker includes as a limitation the indication by the team of users requiring regular follow-up, with multiple comorbidities. As a result, it was not possible to hear from elderly people who attended health promotion groups, for example, thus depriving the study of these users’ perceptions of the care they received.20

The other articles selected for this study did not mention any limiting factors.

The literature also mentions the absence of a guarantee that the participants will be present on the date and time agreed for the group as an aspect to be considered when planning the activity.16

The limitations of the research seem to be much more related to the wrong choices, ways of applying and analyzing the data, than to the method itself. Suggestions for future studies could address the results set out in the aforementioned articles in this review, i.e. the perceptions of the subjects of the studies, although relevant, do not fit into this moment and the guiding questions of a methodological nature.

FINAL CONSIDERATIONS

Aging is a public health issue and a global social phenomenon. Its challenges and implications consist of including discussions of the issue in the strategic agendas of public policies, but it also needs to be investigated from the perspective of the subjects. In order to expand access and enhance comprehensive care, implementing multidisciplinary actions that meet the demands of the elderly, it is necessary to bring their vulnerability and singularity into the health sphere.

When discussing the focus group approach, it is necessary to emphasize its importance for the future of social research. “This requires a critical and dialectical stance, aimed at overcoming contradictory points, making them public so that they can also be subjected to further criticism.”13,2

According to Leopardi (2001), this method collects data directly from the speeches of a group and reports their experiences and perceptions around a topic of collective interest.25 When carried out with groups of elderly people, it has considerable relevance if applied with due rigor, assuming that it considers the subjectivity of the subject/object of study.

In the context of the elderly, who due to their multidisciplinary demands must be seen and heard in a careful and in-depth way, it is understood that the characteristics of this essentially qualitative method are met. The analysis of the works in this review points to an interesting methodological path for research with FG, when taking into account the criteria of the method’s own procedures. Not merely as a protocol, but with the attention, welcome and care that are peculiar to health demands.

The success or otherwise of the method ranges from the choice of location, number and profile of participants, duration and number of sessions, knowledge of the objectives and consent of the subjects/objects of research, to the essential role of the moderator in their approaches and analysis, in order to maintain the distance required for discernment in the investigations, in the light of a multifaceted view of the phenomenon, but above all with the necessary sensitivity to understand verbal and non-verbal communication, and the singularities of the elderly person.

REFERENCES


