SWAT 59: Offering financial incentives to potential trial participants to improve recruitment

Objective of this SWAT
a) To evaluate the effect of financial incentives on recruitment to randomised trials
b) To calculate a cost per recruited participant

Study area: Recruitment
Sample type: Participants
Estimated funding level needed: Medium

Background
Financial incentives are often used to encourage participants to take part in a trial. In the UK, the size of the incentives is modest for publicly funded trials, generally in the order of £10 to £20.

There is evidence that providing financial incentive does improve recruitment. The Cochrane Methodology Review on recruitment interventions found that financial incentives increased recruitment by 4% (95% CI = -1% to 8%)) [1]. However, there was inconsistency between the studies included in the meta-analysis and the confidence interval does leave open the possibility for reducing recruitment. Moreover, most of the studies included in the review used an incentive of £100, which is larger than that generally used in publicly funded trials. There remains, therefore, uncertainty as to whether the intervention is one that should be widely used, or how much the incentive should be.

Interventions and comparators
Intervention 1: Financial incentive, which could be cash although it is often difficult to administer cash and vouchers are often used instead. It is possible that potential participants' reactions to cash and voucher incentives are different and this could be explored if enough evaluations following this SWAT use both approaches.
Intervention 2: No financial incentive.

Index Type: Incentive

Method for allocating to intervention or comparator
Randomisation

Outcome measures
Primary: Numbers of participants recruited.
Secondary: Cost per recruited participant.

Analysis plans
The primary analysis is the difference in recruitment rate between those receiving the financial incentive and those receiving no incentive. Similarly, the secondary analysis is the difference in cost per recruited participant between those offered the incentive and those not offered the incentive. In addition to the direct costs of the incentive, it may also be necessary to include the cost of staff time for providing the incentive (for example doing bank transfers or ordering vouchers) and any costs associated with administration of the incentives (for example, costs of bank transfers).

Possible problems in implementing this SWAT
Firstly, ethical committees and trial teams may be concerned about the incentive being coercive [2], which is one reason why the face value of the incentive is generally small in publicly funded trials; it shows the trial team's appreciation but it is unlikely to be coercive. Trial teams might be able to reassure ethical committees and themselves by comparing participants from both groups (i.e those receiving an incentive and those who do not) who take part and looking for important differences that may suggest an unwanted impact of the incentive. Secondly, ethical committees and trial teams may be concerned about the intervention having an adverse effect on recruitment. The confidence interval for the financial incentive comparison in the Cochrane Review [1] does include the possibility of doing harm, but the bulk of the confidence interval suggests benefit and

evidence from a review on response rates to questionnaires also suggests benefit for financial incentives [3]. Uncertainty will remain until a robust evidence base is gathered through evaluations such as this SWAT and it is important to know absolute size of the benefit because the cost of the intervention could outweigh that benefit if the impact on recruitment is small. Thirdly, trial teams may want some reassurance that the intervention is not having an adverse effect before the SWAT reaches its planned end. They could be reassured by an interim analysis but this should be pre-planned with pre-defined stopping rules.

References

1. Treweek S, Pitkethly M, Cook J, Fraser C, Mitchell E, Sullivan F, Jackson C, Taskila TK, Gardner H. Strategies to improve recruitment to randomised controlled trials. Cochrane Database of Systematic Reviews (update submitted).
2. Permuth-Wey J, Borenstein AR. Financial remuneration for clinical and behavioral research participation: ethical and practical considerations. Annals of Epidemiology 2009; 19(1): 280-5.
3. Edwards PJ, Roberts I, Clarke MJ, DiGuiseppi C, Wentz R, Kwan I, Cooper R, Felix LM, Pratap S. Methods to increase response to postal and electronic questionnaires. Cochrane Database of Systematic Reviews 2009; (3): MR000008.

Publications or presentations of this SWAT design

Treweek S, Pitkethly M, Cook J, Fraser C, Mitchell E, Sullivan F, Jackson C, Taskila TK, Gardner H. Strategies to improve recruitment to randomised controlled trials. Cochrane Database of Systematic Reviews (update submitted).

Examples of the implementation of this SWAT

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