Understanding study recruitment behaviour of Health Visitors and Community Midwives:

An application of the Theoretical Domains Framework

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Poor study recruitment

• Threatens external validity, reduces statistical power

• Poses a barrier to reducing health inequalities

• Urgent calls for interventions to improve recruitment

• Currently, little evidence of intervention effectiveness

• Is widespread across health research

• Is the most common reason for discontinuation of RCTs

• Sampling bias reflects health inequalities
A theoretically grounded approach

- To identify the barriers and facilitators to study recruitment
- Allows appropriate behaviour change theories to be identified
- Enables interventions informed by behaviour change theory to be developed before starting a research study/trial
Methods

Setting and participants
- Community settings in England
- Health visitors and community midwives (N=114; response rate =37%)
- Four NHS Trust, one Community Partnership

Design & data collection
- A self-reported, anonymous, online, cross-sectional survey
- Questions adapted from the Theoretical Domains Framework

Analysis
- Directed content analysis of qualitative data
Key Findings

Two domains identified among 80% of responses

1. **GOALS - CONFLICT WITH/PRECEDENCE OF OTHER**
   “It would not be prioritized, as the key performance indicators are what the commissioners are measuring our performance on and paying us to deliver”

2. **BELIEFS ABOUT CONSEQUENCES – negative & positive**
   “Research is vital for us to be able to practice in an evidence-based way”

“...I think for these clients if I were to discuss research participation it may be intimidating for them and further marginalise them...”
Conclusions

To facilitate study recruitment researchers should:

1. Plan how recruitment activity can be accommodated amid competing priorities

2. Directly address beliefs about negative consequences of research
References


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