STUDY PARTICIPANT RECRUITMENT AND RETENTION STRATEGIES

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Introduction

Strategies for participant recruitment and retention overlap and they include the following;

• Planning and timelines
• Community engagement
• Widen recruitment catchment area
• Empower the study team
• Empower study participants
• Get to know your participants
• Quality of care
1. Planning and time lines

- Detailed planning of study design and implementation is critical for the success of the study.
- Recruitment strategies have to be clear upfront and included in the protocol.
- Clear selection criteria; ensure the research assistants are well trained.
- Make realistic recruitment timelines.
1. Planning and time lines

- Personnel effort must be adjusted accordingly
- Make realistic and achievable participant recruitment targets
- Monitor and evaluate yourself as a team regularly against the set targets
2. Community engagement

- At proposal level identify where participants will be recruited from
- Consider collaborating with other institutions
- Establish a good working relationship with such institutions
- Establish or Involve already existing CAB to help in planning (recruitment, F/U and results dissemination to the community/participants)
3. Widen catchment area for participants

- Consider multi-sites to take part in the large studies where recruitment is likely to be a challenge (ensure standardization of procedures and processes)
- Use recruitment tools like:
  - Radios
  - Television
  - Newspapers
  - Website
  - Public service announcement
  - Study team
- Match the recruitment tool to the target audience
4. Empowered study team

• Recruit experienced and skilled study team
• Invest in training the team in all recommended and required research trainings like;
  - GCP
  - HSP
  - GCLP
  - SOPs
  - MOPs
  - Data tools
Empowered study team

- Informed consent process (for genetic and genomic studies, team must be trained in the area of study)
  - Do a dry run to test ALL study systems, processes and procedures and address gaps identified before starting recruitment
  - Consider an internal Pre-study audit
  - PI involvement in study activities
Empowered study participants

Informed consent process;

• A comprehensive Patient Information Sheet (PIS)
• PIS must be put in the language that is easily understood by all potential participants
• Translation to local language is a requirement
• Participants must not be rushed through the consent process
• Explain the difference between research and routine clinical care
Empowered study participants

• Make sure the participant is fully disclosed to the condition under study
• Obtain a written Informed Consent/Assent
• Let the participants know that they can withdraw from the study any time even after signing
• Consenting must be an ongoing process
• Check understanding
5. Get to know your study participants

- Get consent to home visit participants before enrollment
- Do participant home mapping on the day of enrollment
- Obtain participants’ contacts.
- Get the participant’s next of kin (NoK) or secondary care taker’s contact details whenever possible
Get to know your study participants

• Put a system of tracking participants’ clinic attendance on a daily basis
• Send reminder messages on their phones about their appointment at least a day before
• Contact those who miss a visit at least within 24hrs
• Do regular home visits to the participants
Get to know your study participants

• Provide transport refund as recommended by local guidelines

• Be sensitive to your participants other needs like; connect them to other wrap around services:
  – Psychosocial issues, food, economic strengthening
  – OVC services if children eg school fees

• Give first priority to participants who stay near the research institution during recruitment
6. Provide quality service

- Service with a smile—connect with your participant
- Avoid unnecessary delays in the clinic
- Whenever possible avoid very short appointments
- Refer for specialized care whenever required

- Regular feedback meetings between the investigators and participants

- Create a continuous communication channel with participants
- Prompt handling of participants’ complaints
References

• Personal experience working on studies in Baylor-Uganda where 100% recruitment and 0 lost to follow-up was achieved—CHAPAS 3 clinical trial

• Current Posters
  – Francis Mayige, RHDgene study; ethical challenges in consenting process
  – D. Bukini, SCDse study; Ethical challenges in the consenting process

• National Institute of mental health hand book—“Points to consider about recruitment and retention of clinical research participants June 2005”
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