

Submission under
0920-0572 Health Message Testing System
Expiration 03/31/2018

Message Testing for High Impact Prevention Project

Attachment 21
Justification for Incentives

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Explanation of Any Payment or Gift to Respondents

Qualitative Research

- Consumers will be compensated with a total of \$50 for their participation in the in-depth interviews
- Consumers will be compensated with a total of \$50 for their participation in the focus groups
- Consumers will be compensated with a total of \$10 for their participation in the intercept interview
- Professionals will be compensated a total of \$100 for their participation in the in-depth interviews
- Professionals will be compensated a total of \$100 for their participation in the focus groups
- Providers will be compensated a total of \$200 to \$350 depending on specialty for their participation in the focus groups.
 - Primary care providers will be compensated \$200, while Infectious Disease Specialists will be compensated \$350.
- Providers will be compensated a total of \$200 to \$350 depending on specialty for their participation in in-depth interviews
 - Primary care providers will be compensated \$200, while Infectious Disease Specialists will be compensated \$350.

Numerous empirical studies indicate honoraria significantly increase response rates (e.g., Abreu & Winters, 1999; Dickert & Grady, 1999; Shettle & Mooney, 1999). The token of appreciation amounts for consumers and other professionals were determined through discussions with RTI and CDC staff with expertise in conducting interviews about HIV with the study populations. The token of appreciation takes into account our previous experience conducting interviews with consumers, professionals, primary care providers and Infectious Disease Specialists. For intercept interviews, we relied on previous research protocols to determine the amount of the token of appreciation. As this group will not travel to a research site to participate in the study, the honoraria rate is lower than for in-depth interviews or focus groups.

Experience from previous studies indicates that physicians are frequently bombarded by numerous entities requesting interviews, surveys, or time for pharmaceutical sales presentations. As a result, physicians often decline to participate. Our experience has shown that a smaller honorarium does not appear sufficiently attractive to physicians. Suggested standard honoraria rates range from \$200 to \$350 for physicians depending on specialty and geographic location. This amount is consistent with quotes RTI received in 2014 from recruitment firms for recruiting primary care providers and Infectious Disease Specialists. Higher honoraria may be necessary to recruit physicians who see a higher number of patients per hour or who have additional years of specialized training. We also believe that the honoraria will result in higher data validity as physicians become more engaged in the interview process.

Web-based Survey. (30 minutes)

CDC will not provide incentives to study participants. Online survey panel vendors contracted to provide the sample for the study may provide points or gift cards (with no cash value, but redeemable for merchandise online) as part of their pre-established agreements with their survey panelists.

References

- Abreu, D. A., & Winters, F. (1999). Using monetary incentives to reduce attrition in the survey of income and program participation. *Proceedings of the Survey Research Methods Section of the American Statistical Association*.
- Dickert, N., & Grady, C. (1999). What's the Price of a Research Subject? Approaches to Payment for Research Participation. *New England Journal of Medicine*, 341(3), 198-203.
- Shettle, C., & Mooney, G. (1999). Monetary incentives in U.S. government surveys. *Journal of Official Statistics*, 15, 231–250.