Recruiting Research Participants: A Comparison of the Costs and Effectiveness of Five Recruitment Strategies

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Gerontology, by definition, focuses on only a portion of people within the general population. When the research question and the accompanying research design further restrict eligibility (i.e., gender, race, caregiver status, disease or disability status), identifying a sufficient number of respondents becomes akin to finding a needle in a haystack. The demands of recruiting an appropriate sample may thus require considerable expenditures of project resources (Kalton & Anderson, 1989). Knowledge about the length of project time required to recruit a sample using different recruitment strategies, the amount of professional and support staff time required, the costs of supplies and materials, and the effectiveness of specific strategies becomes essential to planning and implementing a research study. To date, however, little published information has been available to guide researchers in this effort.

Common Methods Used to Recruit a Sample

Whereas epidemiological studies and clinical trial studies present detailed information about the probability methods used to recruit the sample (for example, see Glasgow, Toobert, & Hampson, 1990; Hunninghake, Darby, & Probstickfield, 1987; Leader & Neuwirth, 1978; Levy, Mohs, Rosen, & Davis, 1982; Williams, Vitiello, Ries, Bokan, & Prinz, 1988), there is little published information available about the use of nonprobability sampling methods. While epidemiological researchers offer a comprehensive review of recruitment challenges in clinical trials, the differences in designs, protocols, and underlying assumptions between social research and clinical trials suggest that these two areas of investigation may require dramatically different recruitment strategies.

Because of the differences in the purposes of clinical trials and social surveys, gerontological research must rely on structured samples, that is, samples that adequately represent specified demographic variables (through quotas) and that maximize the range of individual differences (Campbell & Alwin, 1996; Nesselroade & Labouvie, 1985; Schaie & Hertzog, 1985; Schaie, 1995). When the focus is on recruiting a sample with a relatively low prevalence rate in the general population (such as caregivers), recruiting a sample that is sufficiently large to ensure statistical power and properly mimics the population of interest on key demographic variables requires tremendous project resources (Camp, West, & Poon, 1989; Hunninghake et al., 1987; Kalton & Anderson, 1989; Schaie, 1995).

Further, the choice of which demographic variables to adequately represent is often difficult and may be limited to representing the key variables available through national norms for elderly people (Schick & Schick, 1994). In terms of caregiving research, profiles of the general elderly population may not be an appropriate comparison group because selection into the caregiver role may not be random and caregivers may differ from their noncaregiving counterparts in unknown ways.
Despite these difficulties, a variety of techniques have been employed to recruit highly defined samples (e.g., family caregivers), including the use of existing service organizations and support-group registers, snowball or reputational sampling, and media approaches. Perhaps the least time- and resource-intensive nonprobability strategy is recruitment through existing groups such as formal service agencies, support groups, or subject pools. This strategy generally results in adequate sample size, but frequently underrepresents African Americans, persons with low incomes, and adults who are socially isolated (Chadiha, Morrow-Howell, Darkwa, & McGillick, 1994; Kalton & Anderson, 1989). In addition, samples that rely heavily on existing groups tend to show a positive bias, with participants having more education, higher incomes, and more positive perceptions about the importance of research than those who do not participate (Camp et al., 1989; Dodge, Clark, Janz, Liang, & Schork, 1993; Thornquist, Patrick, & Omenn, 1991; Wagner, Grothaus, Hecht, & LaCroix, 1991), which limits the generalizability of results. Snowballing techniques, in which respondents nominate acquaintances who may meet eligibility requirements, depend on the members of elite groups knowing each other; thus, those who are socially isolated may be underrepresented, and those recruited may actually represent a special subgroup within the rare population (Kalton & Andersen, 1989). Although growing in popularity in both clinical and social research as a recruitment technique, little is known about samples recruited from media approaches. Recently, Anderson, Fogler, and Dedrick (1995) provided important information about the cost-effectiveness of media approaches, especially press releases, for recruiting a highly defined sample into a clinical trial, but the usefulness of this information is limited for social researchers, whose studies pose qualitatively different participation demands for respondents.

**Barriers to Participation**

Because a goal of social research sample development often focuses on including an adequate number of members of various racial groups, researchers are increasingly concerned with how to recruit and retain African Americans and other members of minority groups (Jackson, 1989). Given the historical events surrounding the role of research in the African American community, researchers across many disciplines may be required to counter attitudes of fear and mistrust (Brown, 1997; Jackson, 1997). Such attempts to reestablish trust between researchers and the African American community through coalition building and networking necessitate the expenditure of considerable portions of project resources (Ballard, Nash, Raiford, & Harrell, 1993; Chadiha et al., 1994; Olson, 1994; Picot, Strother, & Humphrey, 1994; Prohaska & Walcott-McQuigg, 1994).

Recognizing that there may be postrecruitment barriers to research participation (Ballard et al., 1993; Dodge et al., 1993; Potashnik, Myers, & Pruchno, 1990), researchers are also concerned with completion rates among eligible respondents, particularly those who are difficult to target. Elderly persons, members of racial minority groups, and family caregivers may initially volunteer to participate but fail to complete the interview protocol for a variety of reasons, including a failure to value social research, demanding and conflicting schedules, transportation difficulties, health problems, and a desire for privacy (Brown, 1997; Jackson, 1997). Thus, in addition to monetary and personnel costs, eligibility and completion rates are important considerations when evaluating the cost and effectiveness of a given recruitment strategy.

**Goals of the Current Study**

This article examines differences among five nonprobability recruitment strategies in five areas: each strategy's demands on monetary resources and staff time; the distribution of demographic variables resulting from each strategy; the number of eligible respondents recruited using each strategy; the number of respective completed interviews; and the length of project time required by each approach. Specific strategies under investigation included the use of formal service agencies, parent support groups, reputational or snowball sampling, paid advertising and other mass media approaches, and demographic sampling units. In addition to the financial costs of these strategies, the effectiveness in recruiting a racially diverse sample through each of the strategies is examined.

**Method**

**Study Background and Protocol**

The 3-year study, "Chronically Disabled Adults: Mental Health of Caregivers," examined the mental health effects on aging mothers of providing care to their offspring with lifelong disabilities. During a 2-hour personal interview, respondents were asked to report on their own physical and mental health, caregiving perceptions, and the behaviors and functional ability exhibited by their offspring. For a full description of the study, readers are referred to Pruchno, Patrick, and Burant (1996).

Based on similar functional and behavioral impairments, two groups were sought: mothers of adults (age 18+) with schizophrenia and mothers of adults with mental retardation and other developmental disabilities. Although prevalence rates are difficult to estimate due to variations in diagnostic criteria across cohorts and locations, estimates suggest that schizophrenia directly affects between 1.2 million and 2.4 million people in the United States (Goldman, 1982; Torrey, 1988). Approximately 6 million persons have a developmental disability (Walz, Harper, & Wilson, 1986).

A further sample stratification specified by the research design included living arrangement. Half of the families in each diagnostic group were to be coresiding in the maternal home, whereas the other half were to live under separate roofs. Thus, the study was targeting a rather narrow subgroup of the general population and a group for which adequate sampling frames were unavailable.
The goal of the study was to test the strength and applicability of a structural model postulating that the mothers’ mental health outcomes are influenced by their caregiving perceptions, which are influenced by resources and the demands posed by the children’s disabilities. Interviews were expected to take place in the 10 counties surrounding and including the Greater Cleveland, Ohio, area.

Initial power calculations, based on the number of free parameters to be estimated, indicated that a minimum of 800 respondents were required to test the proposed structural model. Given the highly defined sample and the number of respondents required, the length of time to recruit the sample was projected to be 30 months. At the project's inception, no racial quotas were proposed. However, the goal of recruiting a representative number of African Americans (12% in the Greater Cleveland area) was added in consideration of federal initiatives toward such sample development, as well as to improve the generalizability of the study findings.

At the project’s inception, several nonprobability recruitment methods were proposed, including media approaches, public speaking, and outreach through community mental health centers and other such gatekeepers. One half-time recruitment coordinator was budgeted for 30 months (approximately 2,600 hours) to assume the primary responsibility of developing materials and implementing the recruitment campaign. The advertising budget was set at $1,000. The total recruitment cost (personnel and advertising) was budgeted to be $54,125, or $67.66 per respondent.

Measures

Recruitment Strategies.—Five recruitment strategies were used. These included recruitment through the formal service network, support groups, snowballing, the media, and a modified demographic sampling unit approach. Recruitment sources were tracked by asking each respondent to identify how she had learned about the study. Although some women (fewer than 2%) stated that they had seen information from two or more sources, all could identify a single source that prompted them to call the research offices to volunteer. A brief description of each of the five types of recruitment strategies follows.

1. **Formal service agencies.** Project staff initiated contact with service agencies whose clientele would likely include eligible women. These included the county boards of mental retardation, county boards of mental health, hospitals, and community-based social service agencies. Professional staff met with institutional review committees and obtained cooperation from 48 agencies. Support staff prepared 2,512 letters for the agencies to address and forward to potential respondents. Formal service agencies were the primary means of recruitment during the first 6 months of the recruitment campaign, although this strategy was used throughout the entire recruitment period.

2. **Support groups.** Project staff identified and made presentations to 20 parent support groups, representing 300 persons. Recruitment through support groups began during month 5 of the recruitment campaign and continued throughout the study.

3. **Snowball referrals.** Snowballing involves nomination of other potentially eligible people by study participants. Snowball recruitment was planned as a recruitment source before field work began; therefore, names of potentially eligible persons were collected beginning with the first interview. A total of 909 unique names were obtained, and all of these individuals received an invitation to participate by mail or telephone contact. Snowball referrals continued throughout the study.

4. **Media approaches.** A combination of media approaches was used, including 60 general ads throughout the state, 7 race-targeted ads in the primary study area, 1,600 national race-targeted press releases, and 12,400 brochures and fliers distributed throughout the primary study area. To cast a wide net as possible, ads and press releases were placed in large daily newspapers with metropolitan circulations, as well as in weekly neighborhood, community, and ethnic papers. Estimates of the number of contacts are not available. A few media announcements were placed early in the recruitment campaign; concentrated media efforts were undertaken at the beginning of month 13 and continued throughout the remainder of the recruitment campaign, targeting cells in the disability-living arrangement design that were underrepresented in the developing sample. Specifically, ads were targeted toward three groups: African Americans, women who were not currently living with their offspring with mental retardation and other developmental disabilities, and women who were currently coresiding with their offspring with schizophrenia.

5. **Modified demographic sampling unit approach.** During the final 6 months of the recruitment campaign, the modified demographic sampling unit approach was used to increase the number of African American women in the sample. A predominantly African American (98%) community in the Greater Cleveland area was identified, and information about the study was mailed to a total of 3,900 heads of household over age 50. Three thousand people received a follow-up telephone call from a member of a team of female African American research assistants, who explained the study protocol and emphasized the importance of African American participation in social research.

Effectiveness

In addition to project costs, the effectiveness of each strategy was evaluated in terms of the demographic characteristics of those who completed the interview, eligibility/completion rates, and project time.

1. **Demographic characteristics.** A well-designed nonprobability sample must show adequate variation on demographic variables. Information was
collected regarding each respondent’s race, age, marital status, years of education, current employment status, and income. These variables were chosen because census data and caregiving-specific data derived from national probability samples are available for comparison.

2. Response rates among the recruitment strategies. A second measure of effectiveness concerns whether the strategy generated a high number of inquiries from persons eligible to become respondents (based on age, relationship, and diagnosis). Response rate is defined as the number of completed eligible screens divided by the total number of contacts.

3. Completion rates among eligible screens. In addition to response rate from eligible persons, the effectiveness of a particular recruitment strategy was assessed based on the proportion of eligible persons who actually completed the interview. These completion rates were calculated as the ratio of finished interviews obtained from the eligible women screened.

4. Project time. In order to compare how quickly a sample was obtained via the different methods, an average rate of intake was calculated based on the total number of completed interviews divided by the number of months each strategy was used.

Cost Measures.—Two types of cost measures are used in this study, including personnel costs and the cost of supplies. These measures are combined with the total N to form a composite, average cost per respondent.

1. Personnel. Both professional and support staff recorded the number of hours spent developing and using the various recruitment strategies, yielding the total number of hours per strategy. These numbers were then multiplied by hourly wages and totaled, resulting in total personnel cost in dollars. The hourly measure was then further summarized by dividing the total number of staff hours by the number of completed interviews, resulting in average hours of recruitment time per respondent.

2. Supplies. Using purchase order information, the costs of supplies associated with the varying recruitment sources were calculated. These costs included stationery, postage, photocopying, and other similar expenses related to reproducing and distributing written materials.

3. Average cost per respondent. A single dollar amount for the average cost per respondent was calculated by dividing the sum of personnel and supply costs by the number of completed interviews.

Results

Generating the Sample Within the Proposed Guidelines

The primary goal of the recruitment campaign focused on the diagnostic categories and living arrangements, with the aim of developing a sample of 800 eligible women, with 200 women representing each of the diagnosis-by-living-arrangement categories.

Using all five recruitment methods, a total of 1,030 women were screened; 941 met entry criteria (91.4% eligibility rate) and 841 of the eligible women completed the interview (89.4% completion rate). As shown in Table 1, the ratio of interviews actually completed to the number proposed varied by living arrangement and diagnosis. The resulting sample included 60% (n = 119) of the proposed coresident dyads with schizophrenia, 155% (n = 310) of the proposed co-resident dyads with mental retardation or other developmental disabilities, 117% (n = 234) of the proposed non-coresident dyads with schizophrenia, and 89% (n = 178) of the proposed non-coresident dyads with mental retardation or other developmental disabilities.

A second goal of the recruitment campaign was to develop the sample in 30 months’ time, at an average cost of no more than $67.66 per respondent. Overall, the sample was developed in 27 months, at a rate of 31 eligible women per month. One hundred twenty-eight professional hours and 953.5 support staff hours were required to recruit the sample, for a total dollar amount of $12,522 in personnel costs. An additional $15,036 was spent on supplies and materials directly associated with recruitment activities, resulting in an average cost per respondent of $32.77.

Original study goals called for the 800 interviews to be completed in person with women living in the Greater Cleveland area. Given the primacy of the diagnostic groupings, however, this goal was modified as the study progressed. In response to media approaches that attracted women outside of the Greater Cleveland area, a small number of interviews (n = 75) were conducted with women living in Ohio but outside of the Greater Cleveland area and another small group of women (n = 62) who lived outside of Ohio. Thus, 707 (88.4%) of the 800 planned interviews were conducted within the Greater Cleveland area. Despite possible differences in service delivery systems, preliminary analyses (available from the author) showed that no group differences emerged between Ohio residents and non-residents on major study constructs such as diagnosis, caregiving perceptions, or mental health measures.
Goals also called for including at least 100 African American women. That number was achieved.

**Distribution of Demographic Variables**

In terms of demographic variables, the women ranged in age from 50 to 86 years (mean = 65.2 years). One hundred women (11.9%) were African American. The average number of years of education was 13.4 (range = 3–21 years). The majority of the sample (60.3%) was currently married. Approximately one third of the women (32.5%) were employed outside of the home, in addition to their caregiving duties. The mean per capita annual income (average income, adjusted for the number of persons in the household) was $15,246. Table 2 presents the correlations among these demographic variables in the present sample. Note that due to the large sample size, relatively small correlations achieve statistical significance.

**Differences Among Recruitment Strategies**

Demographics. — Initial examinations focused on which methods were most successful in recruiting African American respondents. Adjusting the alpha level to reflect the number of separate analyses to be conducted, results of the one-way analysis of variance (ANOVA) suggested that African Americans and Caucasians were recruited into the study via different methods, F(4,836) = 55.65, p < .0001, with follow-up Scheffe tests indicating a lower proportion of African Americans from snowball referrals (11% of African Americans vs 40.8% of Caucasians) and a much higher proportion of African Americans from demographic sampling units (22% of African Americans vs 0.1% of the Caucasians). In terms of the age of the respondent, a significant group effect emerged, F(4,833) = 3.62, p < .007, with follow-up Scheffe tests suggesting that snowball-referred participants were significantly older than the media-referred participants (66.0 vs 63.5 years). As for marital status, a significant referral source difference emerged, F(4,836) = 4.54, p < .002, with post hoc Scheffe tests revealing that fewer women recruited via the modified demographic sampling units were married (26.1%) than were those recruited through snowballing (65.5%), support groups (62.3%), or agencies (60.8%). Group differences in per capita income emerged, F(4,740) = 3.98, p < .003, with women recruited via the demographic sampling units reporting less per capita income ($7,368) than all the other groups (mean = $15,266). No recruitment source differences emerged for employment status or education level.

**Effectiveness and Cost.** — Each recruitment strategy was evaluated in terms of the number of professional and support staff hours, total personnel cost in dollars, dollar cost of supplies, response rate from eligible persons, completion rate, mean monthly rate of intake, and average cost per respondent.

As can be seen in Table 3, recruitment through formal agencies resulted in an 11.8% response rate (296 screens divided by 2,512 potential contacts) and high completion rates (85.4% of the 288 eligible screens). This strategy accounted for 29.3% of the total sample. Comparatively, this was one of the least time- and resource-intensive recruitment methods. The average recruitment cost per completed interview, found by dividing the total number of respondents recruited via formal agencies by the sum of personnel and supply costs, was only $14.05. Further, it yielded a moderate to high average rate of intake, with an average of 9.1 respondents per month (number of respondents divided by the number of project months the strategy was used). In terms of African American recruitment, however, the intake rate was 1.07 women per month, with a total of 29 African American women recruited.

Support group recruitment resulted in moderate response rates (26.7%) and a very high completion rate (97.5%). The absolute number of women recruited was low, as support group recruitment accounted for only 9.2% of the total sample. A moderate strategy in terms of time and resources, the average cost per respondent was $40.84. Rate of intake was low, with 3.08 respondents per month. Only 11 (14.3%) of the women were African American, with a disappointing intake rate of 0.44 African American respondents per month.

Snowball recruitment was the single most time-intensive effort, requiring nearly 500 staff hours; this strategy accounted for 37.2% of the total sample. Moderate response rates (38.7%) and high completion rates (88.9%) were observed. Average cost per respondent was low ($20.30), with a high monthly rate of intake (13.0). In terms of African American recruitment, how-

### Table 2. Zero-Order Correlation Coefficients

<table>
<thead>
<tr>
<th></th>
<th>Mean (SD)</th>
<th>Age</th>
<th>Race</th>
<th>Education</th>
<th>Marital Status</th>
<th>Worker Status</th>
<th>Per Capita Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>65.17 (7.42)</td>
<td>1</td>
<td></td>
<td></td>
<td>0.09***</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Race (% Caucasian)</td>
<td>88.11 (32.39)</td>
<td>0.24</td>
<td>1</td>
<td></td>
<td>1</td>
<td>0.09**</td>
<td>1</td>
</tr>
<tr>
<td>Education in years</td>
<td>13.35 (2.45)</td>
<td>-0.24</td>
<td>1</td>
<td></td>
<td>0.23**</td>
<td>0.05</td>
<td>1</td>
</tr>
<tr>
<td>Marital status (% married)</td>
<td>60.29 (48.96)</td>
<td>-0.40</td>
<td>1</td>
<td></td>
<td>-0.01</td>
<td>0.18**</td>
<td>0.01</td>
</tr>
<tr>
<td>Worker status (% employed)</td>
<td>33.00 (47.00)</td>
<td>0.08</td>
<td>0.14**</td>
<td></td>
<td>0.05</td>
<td>0.01</td>
<td>1</td>
</tr>
<tr>
<td>Per capital income (in thousands of dollars)</td>
<td>15.27 (10.87)</td>
<td>-0.06</td>
<td>0.22**</td>
<td>0.40**</td>
<td>0.08*</td>
<td>0.14**</td>
<td>1</td>
</tr>
</tbody>
</table>

*p < .05; **p < .01.
ever, only 3.5% (n=11) of these women were African American, with a mean monthly rate of intake equal to 0.5 African Americans per month.

Several different media approaches were used, including paid advertising, press releases, and distribution of project-related brochures and fliers. Although response rates cannot be determined because the number of persons exposed to the media approaches is unknown, completion rates among the eligible (93.8%) were high. In addition, it had a moderate average cost per respondent ($64.99). Monthly intake was also moderate, resulting in 6.7 respondents per month. In terms of African American recruitment, rate of intake was very low, with an average of 1 African American per month.

The modified demographic sampling unit approach was both time- and resource-intensive, resulting in 23 respondents at an average cost of $120.70 each. Eligibility was low (0.7%) although completion rates among the eligible were acceptable (79.3%). Rate of intake was moderate, with 3.8 respondents per month. As this strategy was targeted to the African American community, the high rate of intake of African Americans (3.7 per month) is not surprising.

Race by method and overall racial average costs per respondent were computed. The average cost of recruiting a Caucasian woman was $29.92, whereas the average cost for recruiting each African American woman was $54.15.

Discussion

While social-psychological researchers seldom detail the recruitment methods they use or discuss the implications of such recruitment methods in depth, increasing research attention is being focused on these areas. As government funding agencies require representative numbers of historically understudied populations (Markides, 1995), the recruitment challenge for the 1990s and beyond seems to be how to effectively and cost-efficiently recruit and retain a large sample that adequately represents African Americans and other minorities. As this process begins, researchers are exploring the costs of recruitment, comparing the effectiveness of recruitment strategies, and engaging in informal cost-benefit analyses of these issues. In this regard, a complete and accurate assessment of all the goals and costs of recruiting are necessary to enable researchers to develop appropriate samples while efficiently using project resources. This paper presents data regarding the costs associated with a variety of nonprobability recruitment strategies.

Meeting Project Goals

Sample development exceeded the target number of eligible women, with an N size of 841 as opposed to 800. In terms of the diagnostic stratification, more women with offspring with mental retardation and other developmental disabilities were recruited than proposed (488 vs 400), whereas only 88% of the proposed number of women with offspring with schizophrenia were recruited (353 vs 400). Overall, 51% of the total sample was coresident with offspring with the disabilities, with more than 400 women in each living arrangement.

In terms of the living-arrangement stratification within each diagnostic category, however, sample development was less successful. Evidence from diagnosis-specific data sets underestimates the incidence of specific diagnoses and often lacks specific details about living arrangements. Torrey (1988) reports that of the estimated 1.2 million people with schizophrenia in the United States, more than half a million are living with family, an additional 400,000+ are living in the community, and as many as 200,000 are living in institutional settings. As with schizophrenia and other chronic mental illnesses, it is difficult to estimate the prevalence rate of mental retardation among the adult population with this strain of disease.
population because only a fraction of this group may be identified to service agencies (Walz et al., 1986). Thus, without strong population estimates, it is difficult to determine whether the smaller numbers of women living with children with schizophrenia and of women who are not living with children with mental retardation or other developmental disabilities reflect a lower prevalence rate in the community or whether these women are especially hard to target and require different recruitment strategies altogether.

Failing to meet the proposed stratification is bothersome, however, it is not unduly problematic. In our case, no hypotheses were formulated regarding diagnosis-by-living-arrangement interactions for the structural model, and the resulting cell sizes are still large enough to permit robust tests of mean differences, as well as interactions, using analysis of variance techniques.

It is important to note, however, that changes in the geographic boundaries of the study as well as changes in the interview modality were enacted midway into the study. Researchers may need to be flexible with some project criteria in order to meet primary goals.

As the primary goal of sample development for most gerontological studies is to adequately represent key demographic variables, reference to national norms helps to verify the appropriateness of nonprobability samples. In the present case, a heterogeneous sample was achieved. Although minor variations between the national data sets are evident, it is important to remember that our current sample is more narrowly defined than “elderly Americans.” That our data suggest that we were able to sample adequately.

There may be several reasons that this sample’s African Americans, although sufficient outreach efforts can address these concerns. The implementation of the modified demographic sampling strategy, which included an individual invitation to participate as well as the opportunity to discuss concerns privately with a well-versed research assistant, is an important outreach effort for future projects, as it resulted in a dramatic increase in the number of African American respondents. While more costly than the other methods, it is important to note that the women recruited through this innovative effort had not responded to previous media approaches in the local newspapers, fliers from area churches, letters from formal agencies, or snowballing techniques. It is unclear, however, whether these women required the intense one-on-one approach to overcome mistrust, whether they had not been exposed to other recruitment outreach efforts, or whether they had not viewed themselves as eligible to participate. In terms of the budget, the high dollar cost associated with this approach is offset by the lower cost of recruiting through snowballing and formal agencies. Ultimately, the lesson to be learned from our experience is that there are trade-offs between the recruitment sources, and the relative merits of a strategy must be gauged against many indicators of cost and effectiveness. Together, multiple methods generated a more diverse sample than that provided by a mere reliance on formal service agencies or snowballing.

Other factors, which were not considered here, must be addressed by future research. Anecdotal evidence from the interviewers suggest that not only were the African American respondents more of a recruitment challenge, these participants required more time at every stage of the interviewing process, from the initial screen and scheduling to the completion of the actual interview. Many of the African American respondents needed to reschedule their interviews several times; household responsibilities and shifting work schedules made it difficult for them to keep appointments. These added costs in terms of interviewer time are not included in the recruitment cost data, although they certainly placed demands on project resources.

Future studies may benefit by including a variety of recruitment strategies from the onset of the project. The media sources required considerable support staff time, and the period over which responses to a specific media approach were received varied considerably. Press releases, published at the convenience and discretion of individual newspapers, generated inquiries up to two months after publication. Sending press releases early and throughout the recruitment phase is well-advised. One must be aware, however, that the respondents recruited via press releases and other media approaches may be somewhat younger than those recruited through other methods. Reaching older respondents may require nonmedia approaches. Improving the implementation of the modified demographic sampling unit strategy could be accomplished by careful targeting of the area and by working with several small batches of letters to allow quicker follow up by telephone.

An additional caveat for future recruitment efforts concerns tracking the specific referral source that persuades a respondent to volunteer for the study. With multiple methods being used both concurrently and sequentially, it can be difficult for the experimenter and the respondent to determine which single recruitment effort attracted her. While most women in the current sample (98%) responded to a single recruitment effort, a small number did seem to require exposure to more than one outreach effort before volunteering to participate. Tracking this information will help streamline future recruitment efforts and may
illuminates interesting differences among study respondents.

Our final note regards the burden of tracking personnel time. The organizational context within which the current study was conducted allowed an accurate accounting of staff hours. However, not all studies will be conducted in settings in which specific tasks and duties are recorded in hours and minutes. For many researchers, the lines between tasks and projects may blur, rendering a dollar amount per task somewhat difficult to compute.

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