

Recruitment Strategies for Reaching Adults Aged 50 Years and Older with Low Socioeconomic Status for Participation in Online Physical Activity Interventions

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Recruitment Strategies for Reaching Adults Aged 50 Years and Older with Low Socioeconomic Status for Participation in Online Physical Activity Interventions

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Background

- Generally, the health condition of high socioeconomic status (SES) groups is better compared to low SES groups.
- The low SES group is often not reached with online health interventions.
- This group could benefit the most from such interventions.
- Reaching the low SES group is crucial to reduce health inequalities.

Aim of the study

- To provide insight into reach, sample characteristics and costs of three pre-planned strategies for recruiting low SES adults aged 50 years and older for participation in an online physical activity intervention.

Research Questions (RQ)

- RQ1: Which recruitment strategy is most beneficial with regard to costs?
- RQ2: Which recruitment strategy results in the highest and fastest response?
- RQ3: Which recruitment strategy is most suitable for reaching the low SES population?
- RQ4: Which recruitment strategy is most suitable for reaching populations with a specific gender, age or health status?

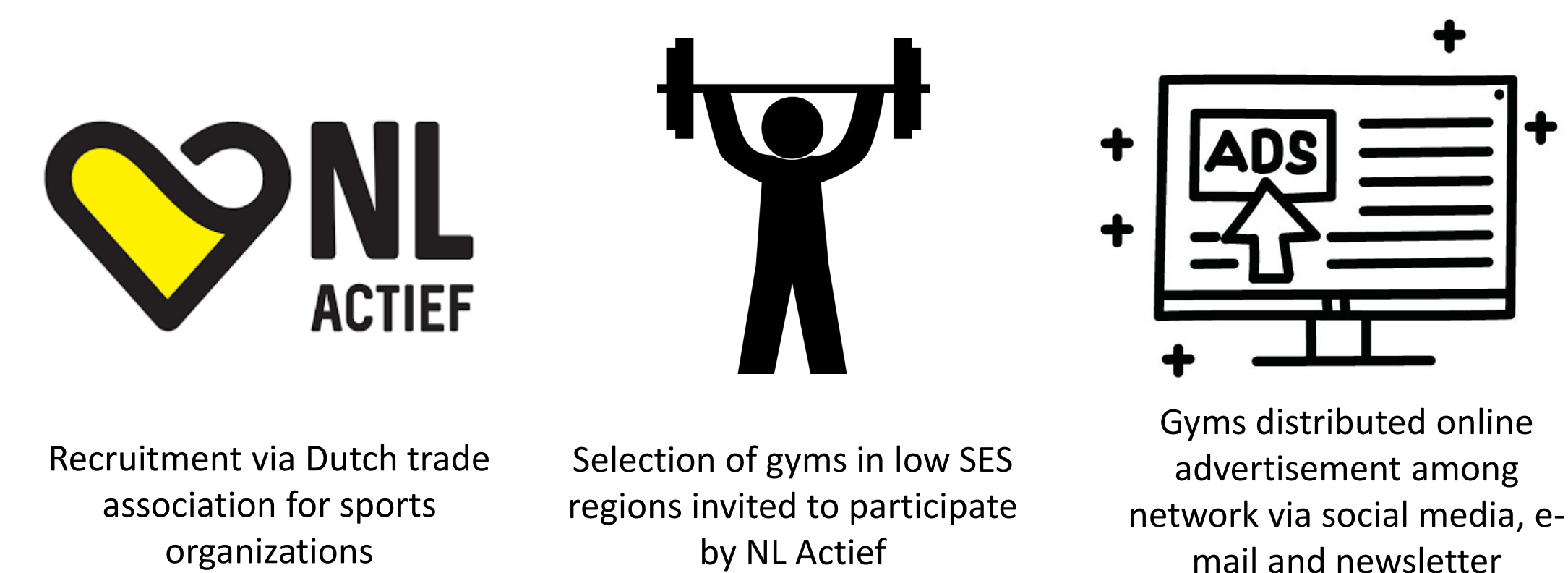
Methods

Study Design and Procedures

Strategy 1 - Municipality



Strategy 2 - Gyms



Strategy 3 - Social media



Outcomes and statistics

- Recruitment method and sociodemographics were assessed during registration.
- Chi-square tests and ANOVAs were performed to test for differences on sociodemographics between recruitment strategies ($P \leq .05$).

Results

Recruitment costs (RQ1)

- **Municipality:** €2142.37 (€7.62 per participant)
- **Social media:** €96.81 (€1.36 per participant)
- **Gyms:** no costs

Reach and sample characteristics (RQ2 + RQ3 + RQ4)

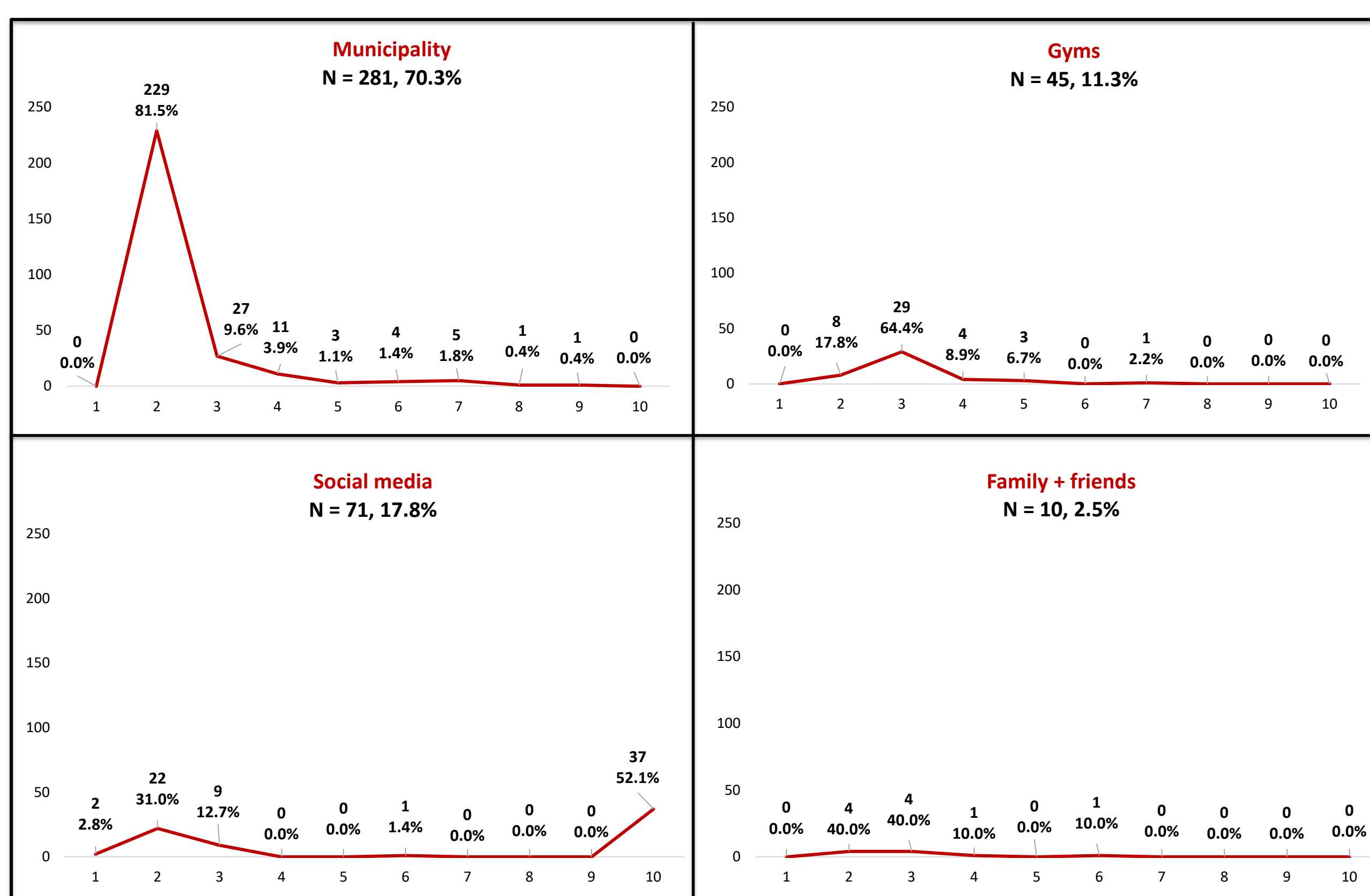


Figure 1. Overview participant recruitment per week per strategy (RQ2)
X-axis = week number, Y-axis = participants (N)

Table 1. Sociodemographic characteristics of recruited participants (RQ3 + RQ4)

	Municipality N = 281	Gyms N = 45	Social media N = 71	Family + friends N = 10	P	Total N = 407
Gender					<.001* ^d	
Male, N (%)	142 (50.5) _a	15 (33.3) _a	8 (11.3) _b	3 (30.0) _{a,b}		168 (41.3)
Female, N (%)	139 (49.5) _a	29 (64.4) _a	63 (88.7) _b	6 (60.0) _{a,b}		237 (58.2)
Other, N (%)	0 (0.0) _a	1 (2.2) _{a,b}	0 (0.0) _a	1 (10.0) _b		2 (0.5)
Age in years, mean (SD)	64.0 (8.6) _a	61.7 (8.5) _{a,b}	60.0 (7.0) _b	61.3 (9.5) _{a,b}	.003*	63.0 (8.4)
Educational level					<.001*	
Low, N (%)	128 (45.6) _a	8 (17.8) _{b,c}	9 (12.7) _c	5 (50.0) _{a,b}		150 (36.9)
Middle, N (%)	103 (36.7) _a	15 (33.3) _a	29 (40.8) _a	2 (20.0) _a		149 (36.6)
High, N (%)	50 (17.8) _a	22 (48.9) _b	33 (46.5) _b	3 (30.0) _{a,b}		108 (26.5)
(Chronic) disease					.070	
Yes	154 (54.8)	18 (40.0)	29 (40.8)	4 (40.0)		200 (49.1)
No	127 (45.2)	27 (60.0)	42 (59.2)	6 (60.0)		207 (50.9)

^{a,b,c} Each subscript letter denotes a subset of group categories whose column proportions do not differ significantly from each other at the .05 level.

^d Values with * indicate significant values ($P \leq .05$)

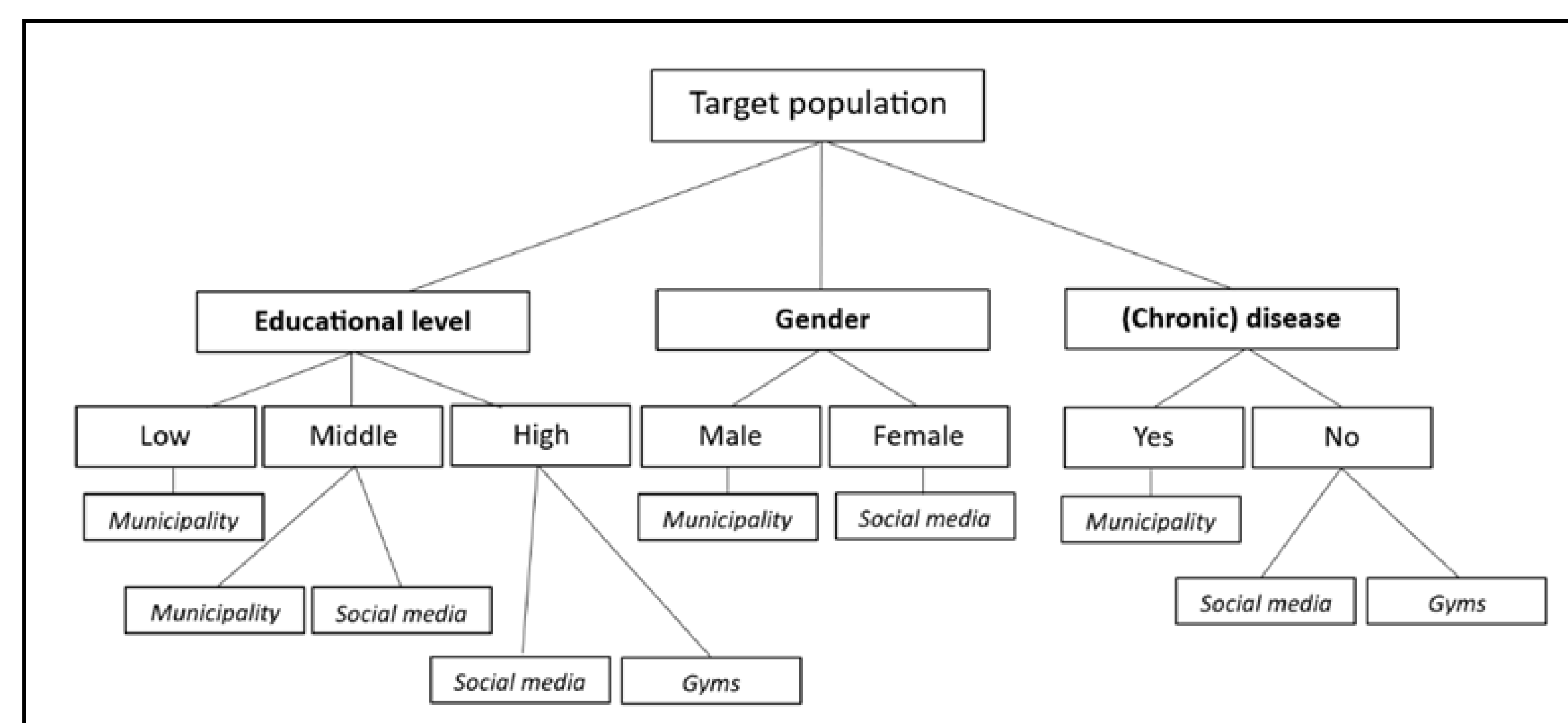


Figure 2. Decision tree for selecting appropriate recruitment strategy (RQ3 + RQ4)

Conclusions

- Recruitment via personal invitation letters through a municipality has high potential for reaching low SES participants.
- The high recruitment costs need to be taken into account.
- Additionally, sending personal invitation letters is time-consuming.
- Revealed insights on recruitment can guide future eHealth-studies.