

## PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

### ARTICLE DETAILS

<b>TITLE (PROVISIONAL)</b>	Recruiting in intervention studies – challenges and solutions
<b>AUTHORS</b>	Axén, Iben; Björk Brämberg, Elisabeth; Galaasen Bakken, Anders; Kwak, Lydia

### VERSION 1 – REVIEW

<b>REVIEWER</b>	Kerry Woolfall University of Liverpool, UK
<b>REVIEW RETURNED</b>	30-Nov-2020

<b>GENERAL COMMENTS</b>	A reflective paper that works better as a communication piece but is still limited to the views of the authors and would need research to evaluate if the recommendations made are indeed effective.
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<b>REVIEWER</b>	Jamie Roberts Duke Clinical Translational Science Institute United States
<b>REVIEW RETURNED</b>	01-Dec-2020

<b>GENERAL COMMENTS</b>	<p>I've placed comments throughout the document regarding some minor revisions. I'd also suggest a greater review of the existing literature regarding stakeholder engagement and partnerships to support more appropriate study questions and protocols designs. This paper is a good start and could be published as is with minor revisions but there is an opportunity to provide a more robust review of the literature and discussion of how early stakeholder engagement might have better supported each of the individual studies reviewed.</p> <p>- The reviewer provided a marked copy with additional comments. Please contact the publisher for full details.</p>
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### VERSION 1 – AUTHOR RESPONSE

First of all, we would like to thank the editor for the interest in our paper, and the reviewers for their valuable comments. Below is a point-to point response to the issues raised. The corresponding changes are marked with yellow in the manuscript.

1: suggest also stating the ethical concern of exposing participants to risks that may not lead to advances in the science. And the opportunity costs for participants who choose to participate in one study that goes nowhere but prevents them from joining another.

Response: we have added your suggestions as follows:

In addition to the obvious ethical concern of gathering data that may be of limited value and exposing participants to risks without leading to scientific knowledge, participants may suffer the opportunity

cost of being tied up in an unsuccessful trial without the possibility of joining another.

2: what website is this? Can you include a hyperlink? Is it clinicaltrials.gov? or does Sweden have a specific Clinical Trials directory website?

Response: This is clinical trials. Gov. We have added this in the manuscript as follows:

Very few administrators, union leaders, company owners, clinicians or patients scan websites such as Clinical Trials (www.clinicaltrials.gov) for relevant studies to participate in.

3: what do you mean by "top-down instruction"? Explain more here.

Response: This was referring to a leadership style, and now reads: If the decision to participate in a study is perceived as a top-down instruction, i.e. a decision taken by management without consulting the employees, the relevant people may not recruit or participate successfully, likely resulting in recruitment difficulties.

4: for what study?

Response: among the studies presented in this paper, iSKOL has used this methodology. We have added the following:

In the interest of informing participants, we have also recently started using small film recordings (2 minutes) that are sent as follow-ups to participants with a motivational message from the research team (in iSKOL).

5: I'd provide some citations about this claim. There is ample literature to support this kind of stakeholder engagement.

Response: the following references have been added:

Peckham E, Arundel C, Bailey D, Callen T, Cusack C, Crosland S, et al. Successful recruitment to trials: findings from the SCIMITAR+ Trial. *Trials*. 2018;19(1):53.

Lloyd J, McHugh C, Minton J, Eke H, Wyatt K. The impact of active stakeholder involvement on recruitment, retention and engagement of schools, children and their families in the cluster randomised controlled trial of the Healthy Lifestyles Programme (HeLP): a school-based intervention to prevent obesity. *Trials*. 2017;18(1):378.

Hammerback K, Hannon PA, Parrish AT, Allen C, Kohn MJ, Harris JR. Comparing Strategies for Recruiting Small, Low-Wage Worksites for Community-Based Health Promotion Research. *Health Educ Behav*. 2018;45(5):690-6.

Bergstrom G, Bjorklund C, Fried I, Lisspers J, Nathell L, Hermansson U, et al. A comprehensive workplace intervention and its outcome with regard to lifestyle, health and sick leave: the AHA study. *Work*. 2008;31(2):167-80.

6: "important routines, clinic or practice work-flows"

I think it's important to distinguish that you're speaking of the time for providers/clinicians to recruit people here (which is different from the time burden of participation for participants).

Response: We agree, this was not very clear. This section now reads:

The issue of time is really what may determine the recruitment success; if the recruitment or participation procedure steals time from daily routines, clinic or practice workflows, the recruiter will not participate.

7: I'd separate these concepts -- there seems to be some muddling of what "recruiters" need to do and what "participants" need to do and manage.

Response: We understand your point, but the argument goes both for recruiter and trial participant. This section now reads:

Therefore, we have found that a fair amount of reminding is needed to optimize recruitment as it is easy to forget to recruit participants. Equally, for trial participants: it is easy to postpone/ forget to take the first step in participation, especially when the chores and stress of everyday life need attention.

8: I'd also suggest a greater review of the existing literature regarding stakeholder engagement and partnerships to support more appropriate study questions and protocols designs. This paper is a good start and could be published as is with minor revisions but there is an opportunity to provide a more robust review of the literature and discussion of how early stakeholder engagement might have better supported each of the individual studies reviewed.

Response: Thank you for your supportive comments. We are considering your suggestions for a future review.

### VERSION 2 – REVIEW

<b>REVIEWER</b>	Jamie Roberts Duke University USA
<b>REVIEW RETURNED</b>	17-Dec-2020
<b>GENERAL COMMENTS</b>	<p>I've included some comments relative to typos to be addressed and questioned a statement about it being "notoriously difficult to get people to participate in research" and provided some references about how this statement might be reframed. While this is a relatively good paper, it's applicability to a wide audience may be limited.</p> <p>- The reviewer provided a marked copy with additional comments. Please contact the publisher for full details.</p>

### VERSION 2 – AUTHOR RESPONSE

We would like to thank the reviewer for spotting typo's and suggesting text.

1: You might say something like this:

participate in research studies, despite evidence indicating many people are very willing to participate. In fact, perhaps it's truly not difficult to "get people to participate" as much as it is that "we're not asking in an effective way."

Citations from CISCRP and Research!America about willingness to participate should be found easily enough.

Response: Thank you for this interesting perspective. We believe there is more to this difficulty than asking the wrong way, but that could certainly be one explanation. We found an interesting webinar on the suggested homepage, thank you! This is now added as a reference to support the revised statement.

2: In the "challenges" section, some words are bold. These are the challenges we have identified.