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## **Recommendations for the conduct of online trials**

### **Recruitment**

- \* Online recruitment is cheap and highly effective (but will recruit a self-selected sample)
- \* Advertising via Facebook can recruit participants from pre-specified demographic groups
- \* Online trial procedures (registration, consent, randomization, emailed reminders and communication with researchers) are acceptable to young people and can minimize researcher work if automated
- \* The legitimacy of a research institution should be made clear – for example, a university logo may convey reassurance about the motivations for the study and use of data
- \* Repeated registrations can be minimized by collecting personal details (name, address, email address, date of birth at two time points)
- \* Sending compensation by post facilitates the submission of accurate postal addresses, potentially reducing fraud

### **Data collection**

- \* Online data collection is acceptable and convenient for young people
- \* Online data collection is efficient for researchers, yielding data in forms convenient for analysis
- \* Online data collection can yield data with high internal consistency
- \* The creation of test participants who register before the main participants can provide early warning of potential problems

### **Follow up**

- \* Higher value compensation increases response rates (i.e. retention at 3-month follow-up)
- \* Repeated email prompting increases overall response rates
- \* Postal follow up of non-responders boosts response rates
- \* Contact by telephone or text message could also be considered
- \* Mechanisms to keep contact details up to date are needed
- \* Offline contact with participants may reduce the potential for fraud, for example, compensation sent by post to guard against repeat registrations

## **Implications for online *sexual health* research**

### **Recruitment**

- \* An online environment for sexual health research is popular with young people and highly suitable for sexual health research
- \* It is challenging recruiting young people under 18 into online sexual health research, particularly those under 16
- \* Compensation encourages participation

### **Data collection**

- \* Online questionnaires are convenient and acceptable to young people
- \* Detailed sexual health questioning online is acceptable to young people, with good completion rates and good internal validity
- \* Sexual health question response options should be as inclusive and non-judgmental as possible to encourage participation and honest responses
- \* Questions should be direct and provide clear definitions, for example, defining what is meant by ‘sex’ for particular questions; specifying the context for an answer – e.g. whether physical violence is unwanted or by mutual consent (as in the case of Bondage, Domination, Sadism and Masochism (BDSM) practices)
- \* Measurement of sexual health outcomes may prompt reflection on behavior– researchers could consider minimal baseline measurement to minimize measurement reactivity

- \* Research materials sent by post should be in plain packaging and not display any sexual health branding, and participants should be informed of this when enrolling
- \* Chlamydia urine sampling (by post) is not a good biological outcome measure in the context of poor response rates and low point prevalence
- \* Researchers should make clear the importance of each individual's response for the success of the research