

Day One

Shedding new light on clinical trial perception in the wake of the coronavirus crisis

Clinical trial recruitment, including for COVID-19, is challenging

Scientific research into the coronavirus will lead to advances in the diagnosis, treatment and vaccination of COVID-19 with the potential to save thousands of lives. Despite this, clinical trials into COVID-19 are struggling to recruit enough patients. Without enough patients it might be impossible to get the answers that will ultimately save lives. In collaboration with Havas Lynx Faze, we set out to explore the public perception of clinical trials in relation to COVID-19.

Real time research amongst the UK general public to investigate the drivers and barriers to COVID-19 trial participation

We conducted a rapid online 'pulse' survey with a nationally representative panel of the UK general population, powered by Respondi our digital data partner. Fieldwork from soft launch to completion of 1023 participant responses took less than 24 hours. Natural fallout left us with fair representation from the different regions of the UK, a 59:41 split between men and women respectively and an even spread of age groups, including 31% from the 65+ category – an important group considering their COVID-19 risk status.

In principle, over half would take part in a COVID-19 clinical trial

52% say they would participate in a clinical trial in principle, an encouraging figure in the broader context of public clinical trial participation. These unprecedented circumstances and unique need for public participation mean it is difficult to find accurate comparators for our data. Figures in other studies on the general public's willingness to participate vary significantly but many report levels of between 30-40%.

Men are significantly more willing to participate vs women

Men are more likely than women to want to participate in a COVID-19 trial (**57% vs 44%**), a significant and striking difference. We did not witness any major difference between genders on drivers and barriers to participation that could explain this. As a result, more should be done to understand the potential cultural reasons holding women back from trial participation.

Willingness to participate peaks and is consistent between the 25-54 age ranges (~**60%**). Under 25s and over 55s are less likely to want to participate. Whilst unable to explain this fully, our data on barriers to participation suggest a greater fear of the unknown and concerns around lack of information amongst the <25 group and understandable fears around greater risk of severe illness / death amongst the 55+ age groups.

Altruistic spirit drives willingness to participate, a unique phenomenon in the context of clinical trials

A major finding which demonstrates the unique social and cultural environment this crisis has plunged us into, is the level of community spirit / altruism that would appear to motivate many to want to participate in a COVID-19 clinical trial. **73%** of the total sample chose at least one altruistic reason as a key motivator to take part in a clinical trial. The most prominent of these included 'being part of finding a cure' and 'being able to help other people'. These factors were chosen more often than personal motivators such as 'financial reward' and 'to protect my family'.

Again, whilst we are unable to directly compare, our data does suggest this community / national spirit plays more of a role here vs other public clinical trials where often the motivator is a personal connection, i.e. a family member who has suffered with the disease being studied. We should tap into this altruistic spirit to help recruit and motivate people to participate in clinical trials, not only for COVID-19.

The industry can take advantage of this increased interest and appreciation of science and research

Our findings around the barriers to participation such as 'fear of the unknown' and concern over potentially being given COVID-19, demonstrate a lack of knowledge and clarity on the clinical trial process. Education is therefore needed to ease these concerns and improve future clinical trial participation. We can also use the public's rise in interest, faith and attention to science in general to help improve perceptions not only around clinical trials, but in big pharma too and its contribution to healthcare on the whole.

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