

## Payment of Research Participants

**Summary:** This research program, comprised of both conceptual and empirical studies, seeks to better understand the ethical issues involved in paying research participants, current policies and practices regarding payment of participants, and the influence of payment on research participants' perceptions and decisions to enroll or remain in research.

**Section:** Human Subjects Research- Unit on Clinical Research

**Principal Investigator:** Christine Grady, RN, Ph.D.

**Collaborators:** Bioethics: Neal Dickert, BA  
Ezekiel J. Emanuel, M.D., Ph.D.  
Tom Jawetz, BA  
Jonathan Rackoff, BA  
Dave Wendler, Ph.D

Other NIH Researchers: Grace Kelly, RN, Critical Care Medicine/CC  
Jill Lietzau, RN, National Cancer Institute  
Diane Rock, RN, National Institute of Allergy  
and Infectious Diseases

**Background:** Although there remains widespread controversy over the ethics of paying for research participation, offering payment to research participants is common practice in the U.S. and has been for several decades. There has been no comprehensive analysis and little attention to the ethics of paying research participants in the literature, yet most commentators maintain that some payment is ethically acceptable, especially if it constitutes reasonable reimbursement for time and expenses. The ethical acceptability of this practice is partly based on the understanding that reimbursement for time and expenses permits people to participate in research without excessive cost to themselves, either in expenses, lost wages, or both. Payment may also encourage people to participate in research that will generate useful clinical knowledge. Ethical concerns about paying research participants have primarily focused on the need to control the amount of payment and the schedule of payment so that neither constitutes an 'undue inducement' to participate. "Undue inducement" is typically thought of as an inducement that would lead individuals to consent to research they would otherwise avoid and that is contrary to their interests. An 'undue' offer of money may be sufficiently attractive to a potential participant that risks are obscured or discounted. As a result the potential subject's ability to truly appreciate the risks inherent in participation could be compromised, and/or an individual might be tempted

to misrepresent him or herself in order to enroll or remain in a study and receive the money. Another ethical concern is the extent to which the offer of payment for research preferentially attracts the economically disadvantaged, thus raising concerns about the just distribution of the burdens of research.

**Objectives:**

- 1) To evaluate ethical arguments for and against paying participants of research.
- 2) To analyze current policies and practices regarding payment of research participants.
- 3) To describe the extent to which payment influences people's willingness to participate in research and the degree to which it serves as a motivation.
- 4) To evaluate the impact payment has, if any, on participants' evaluation of the risks and benefits of research, and on their informed consent.
- 5) To identify additional moral considerations involved in payment to children in research.

**Methodology:** We conducted a thorough literature search on the ethics of offering payment to participants of research, collecting articles and some unpublished work on the subject. The arguments in the articles were analyzed and discussed among members of the Department in various settings, informally, at research team meetings, and at works-in-progress meetings. We also discussed these issues with investigators and other research team members both in the intramural program and outside the NIH. Our conceptual work examined the reasons people are sometimes paid for research participation, the moral concerns about payment including the possibility of payment acting as an 'undue influence' on participant's research decisions, different models that could be used to justify and formulate payment, and consideration of payment to children as a special case.

The empirical projects of the payment research program included one project that examined policies, a second that described practices of payment, and a third that evaluated the impact of payment on participants' perceptions and motivations. Because payment to research participants appeared to be fairly common in the US, we wanted to better understand just how common it was in certain institutions, what guidance institutions provided to their investigators and IRBs on this issue, and the criteria or policies by which decisions were made about payment to participants. To do this, we contacted the research directors of academic centers, pharmaceutical companies, contract research organizations, and independent IRBs and requested any written guidance on payment that was used at their institution. In the absence of written guidance, we asked them to describe for us unwritten rules of thumb that guided their decisions about paying research participants. We analyzed this guidance to find commonalities among institutions and areas of considerable divergence needing further study and debate. The second project involved reviewing and extracting data from a sample of research protocols themselves to describe the practice of paying participants, what type of participants are paid, in what types of protocols, the range in amounts and methods of calculation, and the extent to which details of payment are communicated to

prospective participants through informed consent. A third project sought to describe the extent to which an offer of money was influential in decisions to participate in research made by a group of individuals enrolled in HIV research at the NIH, as well as to document other motivations and expectations.

## **Results**

Conceptually, we proposed three models of payment: a reimbursement model, a 'wage-payment' model and a market model. The models were used to demonstrate that decisions about the amount and circumstances of payment are to a great extent dictated by the purpose of payment. We argued that, primarily because of the possibility of undue influence, the most ethically appropriate model for determining payment to research participants is the wage payment model which bases offers of payment on the time and contribution being asked of participants, and by so doing, promotes standardization across protocols and institutions. In another project, we argued that, again, by categorizing the purpose of offering payment to participants in research, one could decipher the ethical complexities of paying children in research. Reimbursement for expenses and compensation for time and contribution can be justified and standardized, but when money is being used as an incentive, several additional safeguards ought to be in place, especially for pediatric research.

In the spirit of debate within the bioethics community, an article on the possible impact of payment on informed consent was published in a "target article," in the *American Journal of Bioethics*, accompanied by 15 short commentaries from ethicists around the country. In this article, the concepts of coercion and undue inducement are briefly explored, and it is argued that an offer of money calculated on the basis of the time and contribution made by the research participant may actually be an indication of respect for the participant rather than an undue inducement.

Through our empirical work, we discovered that very few institutions actually have written guidance regarding payment, although most have rules of thumb that they follow. On further examination, rules of thumb used by these organizations were often vague and based on the regulatory requirement to avoid 'undue' influence, but without formulae or specifications for how to calculate payment or recognize what might be undue. Thus investigators and IRBs are making these decisions with little guidance or standardization. Surprisingly, we also found that most institutions could not quantify the number of their studies that offer payment to participants. In investigating how protocols are actually paying participants, it became evident that payment is offered in a variety of types of studies ranging from physiologic studies with healthy volunteers to randomized treatment trials for asthma, hypertension, HIV/AIDS and other disorders. The majority of studies we reviewed did not explain or justify the amounts they offered, and amounts varied considerably and somewhat arbitrarily, sometimes even between sites involved in a single study. Contrary to wide spread impressions, patient-subjects are paid similarly to healthy subjects in most studies that offer payment.

Presentation of our data and discussion of issues regarding payment of research participants occurred at the NIH in meetings of the Medical Executive Committee, the

Clinical and Scientific Directors Meeting, the Human Subjects Research Advisory Committee (HSRAC), and the Clinical Research Volunteer Program Advisory Committee. An information sheet for NIH investigators was posted on the webpage of the Office of Human Subjects Research. We participated in a Clinical Center Staff Conference that was devoted to this topic in April 2000.

### **Future Directions:**

In several of our current studies, we continue to examine the possible influence of payment on participants' attitudes, perceptions, and behaviors. For example, in a large survey of ethical issues encountered by nurse practitioners and physician assistants, we are randomizing the sample to either receive a small incentive, participate in a lottery drawing, or neither, to evaluate the impact of these incentives on response rate. In a study examining people's perceptions of the benefits and risks of research for themselves and their communities in the Rakai District of Uganda, we are deliberately drawing part of our sample from research participants in studies that are receiving money for participation and from those that are not. In several surveys evaluating motivations and understanding of research participants, we have included questions related to the importance to the respondent of travel reimbursement or other forms of compensation offered in the trial.

Future work will also expand to better understand other factors influencing decisions people make about research participation, such as the influences of limited health care options, relationships with health care providers, and others. These are part of an ongoing interest in the concept of voluntariness of decision making and how to understand and distinguish between due and undue influences. We are also interested in evaluating the possibility of an inverse relationship between money for research participation and a therapeutic misconception.

### **Publications:**

Wendler D, Rackoff J, Emanuel E, Grady C (2002) The Ethics of paying for children's participation in research. *Journal of Pediatrics* 141(2):166-171.

Dickert N, Emanuel E, Grady C. (2002) Decisions about paying research subjects: analysis of current policies. *Annals of Internal Medicine* 136(5): 368-373.

Grady, C. (2001) Money for Research Participation: Does it jeopardize informed consent? *American Journal of Bioethics* 1(2):40-44.

Dickert, N and Grady, C. (1999) What's the price of a research subject? Approaches to payment for research participation. *New England Journal of Medicine* 341(3):198-203

And two additional papers are being prepared/under review:

Grady C, Dickert N, Jawetz T, and Emanuel E. We don't pay patients in research, do we? An analysis of the practice of paying research participants.

Grady C, Dickert N, Kelly G, Rock D, Lietzau J and Ulrich C. Why do people with HIV disease participate in research?