

Lessons learned in the recruitment of adolescents and children to the EBOVAC-Salone clinical trial in Sierra Leone

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Facts & Figures

Start Date	01/12/2014
End Date	30/11/2019
Contributions	
IMI Funding	58 292 722 €
EFPIA in kind:	33 745 758 €
Other:	1 €
Total Cost	92 038 481 €
Project website:	www.ebovac.org

Challenge

- The 2014-2016 Ebola outbreak presented a major challenge for the health systems in the West African countries that were affected by the outbreak, and posed a threat to global public health. In order to control the outbreak and find ways to prevent new infections, clinical trials were set up to test new drugs to treat and prevent Ebola.
- The EBOVAC-Salone trial of Janssen Vaccines & Prevention's Ad26.ZEBOV and MVA-BN-Filo vaccine regimen was initiated in 2015 and recruited adult participants in its first stages.
- In the latest stage adolescents and children were recruited. Social science research has been conducted throughout the trial.
- In the case of participants aged under 18 years of age, a parent or guardian is required to consent to the child's participation. Where participants are aged 7 or older, the child formally provides positive assent.
- Previous research had found that adult participants joined the trial for altruistic reasons, curiosity and hope, health-seeking and beliefs about the vaccine's powers, and expectations of exchange [1]. This study explores the lessons learned from recruiting adolescents and children in an Ebola vaccine trial.

Approach & Methodology

The study is based on qualitative research on the EBOVAC-Salone trial, including ethnographic observations, exit interviews, in-depth interviews, focus group discussions with trial participants and key stakeholder interviews.

Value of IMI collaboration

IMI funding has facilitated important qualitative research to be conducted to gain valuable insights into the social determinants of trial participation.

Results

- Research suggests there may be challenges to recruiting adolescents and children to clinical trials, especially in epidemic contexts.
- Despite concerns that parents/guardians may be reluctant to enrol their children in trials, our findings showed high uptake amongst adolescents and children, and strong support from their parents.

"What made me confident was my in-law who had joined all his children to the marklate program. That made me happy".
- Parent of child participant, 2017



- One of the main reasons for this was because many young participants had relatives and peers who were trial participants themselves. Thus, social relations and trust were major motivating factors for child and adolescent participation.

"I heard about the marklate [vaccine] in Kambia here from my friends who have already joined the marklate. I decided to join because nothing happened to my friends".
- Adolescent Participant, 2017

Impact & take home message

The participation and retention of adolescents and children in this Ebola vaccine trial may depend on trust and social relations, in contrast to the individual factors that influence adult participants.

References

[1] Tengbeh, A.F. et al. (2018) "We are the heroes because we are ready to die for this country": Participants' decision-making and grounded ethics in an Ebola vaccine clinical trial. *Social Science & Medicine*, 203(March), 35–42.