



**Washington State University**  
**College of Education, Sport and Human Sciences**

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Will defend the Thesis on

**Date: April 22, 2026**

**Time: 10:30 A.M.**

**Pullman Campus: PEB, Room 103**

*Faculty, students and the general public are encouraged to attend*

Title:

**CONNECT: COMMUNITY OUTREACH AND NOVEL NEIGHBORHOOD ENGAGEMENT FOR CLINICAL TRIALS**

Chair: Sarah Ullrich-French

Abstract

Rural populations experience disproportionate burdens of obesity and related chronic conditions yet remain underrepresented in health behavior interventions and clinical research. The present study examined how rural adults responded to theory-informed recruitment materials developed for the CONNECT Project (Community Outreach and Novel Neighborhood Engagement for Clinical Trials) and identified message features and recruitment pathways associated with engagement and willingness to participate in future health research.

Adults recruited through posters, brochures, social media, direct links, and related community-based pathways completed an anonymous online survey assessing perceived susceptibility, severity, benefits, barriers, cues to action, self-efficacy, message relevance, incentive-related motivation, readiness to change, and intention to engage in future research. After data cleaning, the final analytic sample consisted of 131 participants. Descriptive, nonparametric, correlational, and regression analyses were conducted to evaluate recruitment channel performance, predictors of engagement, and subgroup differences in message reception. Results indicated limited support for broad channel-based differences in behavioral engagement. The omnibus channel comparison was not significant, although the direct-link pathway was associated with higher behavioral engagement in the full sample and in the Inland Northwest subgroup. Participants evaluated the CONNECT materials moderately positively overall. A multiple regression model predicting intention to engage was significant,  $F(3, 115) = 41.26, p < .001, R^2 = .518$ , with self-efficacy emerging as the strongest predictor,  $\beta = .590, p < .001$ , followed by message relevance,  $\beta = .208, p = .009$ . A parallel regression model predicting future contact interest was also significant,  $F(3, 114) = 8.98, p < .001, R^2 = .191$ , with message relevance,  $\beta = .347, p < .001$ , and incentive-related motivation,  $\beta = .221, p = .011$ , emerging as significant predictors. Survey completion was not significantly predicted by the hypothesized Health Belief Model or Transtheoretical Model variables.

These findings suggest that rural recruitment may be strengthened less by broad channel differences alone than by materials that are perceived as personally relevant, practically feasible, and motivationally worthwhile. The results support the use of theory-informed, community-engaged recruitment strategies to improve representation in rural health research and to guide future outreach efforts targeting underserved populations.