



Measuring the Prevalence of Questionable Research Practices with Incentives for Truth-telling

Leslie John (*Harvard Business School*)

Presenting work done in collaboration with:

George Loewenstein (*Carnegie Mellon*)

Drazen Prelec (*MIT*)

Prominent cases of research fraud

How one man got away with mass fraud by saying 'trust me, it's science'

Resveratrol researcher faked data, report says; what drives academic fraud?

Scientist Under Inquiry Resigns From Harvard

Researcher Faked Evidence of Human Cloning, Koreans Report

Published: July 7, 2010

'Lying Dutchman' Could Cast Doubt on Ad Research

Suspect Study Raises Questions About What Should Be Done to Prevent Abuses



This paper is not about these clear-cut cases of fraud.

Questionable research practices (QRPs)

- The “grey zone” of acceptable practice
- Practices that are sometimes justified, but often not
- Provide considerable latitude for rationalization
- Can increase false positives (Simmons, Nelson, & Simonsohn, 2011)
- QRPs might be surprisingly common



Goals of this project

1. Estimate the prevalence of QRPs among psychologists
2. Test the effect of providing truth-telling incentives on admission rates

Procedure

- Emailed faculty in U.S. research-oriented psychology departments; respondents asked about:
 - prevalence of QRPs (in various ways; more on next slide)
 - defensibility of QRPs
 - whether they had doubts about research integrity
 - demographic questions
- Anonymity and participation tracking
- 2 conditions:
 - Control: donation based on response rate
 - Truth-incentivized: donation based on truthfulness
 - Based on Bayesian Truth Serum (Prelec, 2004)

Multiple measures of QRP prevalence

- For each of 10 QRPs, Ss anonymously indicated:
 1. Whether they had engaged in the practice (yes/no)
 - *Measure #1: admission rate*
 2. The % of psychologists that have engaged in the practice
 - *Measure #2: prevalence estimate*
 3. Admission estimate: among psychologists who engaged in practice, % who would admit to having done so
 - *Measure #3: implied prevalence estimate: admission rate ÷ admission estimate*
 - Example:
 - On average, Ss think that 60% of people who have done the behavior will admit to it (admission estimate)
 - 40% of Ss admit to the behavior (admission rate)
 - Therefore, implied prevalence estimate is $.40/.60 = 67\%$

Items

(order of presentation was randomized)

1. In a paper, failing to report all of a study's dependent measures.
2. Deciding whether to collect more data after looking to see whether the results were significant.
3. In a paper, failing to report all of a study's conditions.
4. Stopping collecting data earlier than planned because one found the result that one had been looking for.
5. In a paper, 'Rounding off' a p value (e.g. reporting that a p value of .054 is less than .05)
6. In a paper, selectively reporting studies that 'worked.'
7. Deciding whether to exclude data after looking at the impact of doing so on the results.
8. In a paper, reporting an unexpected finding as having been predicted from the start.
9. In a paper, claiming that results are unaffected by demographic variables (e.g. gender) when one is actually unsure (or knows that they do).
10. Falsifying data.

Response and completion rates

- Response rate: 36% (2,155 out of 5,964)
- Attrition rate: 33% (719 out of 2,155)
- Completed response rate: 24% (1,436 out of 5,964)

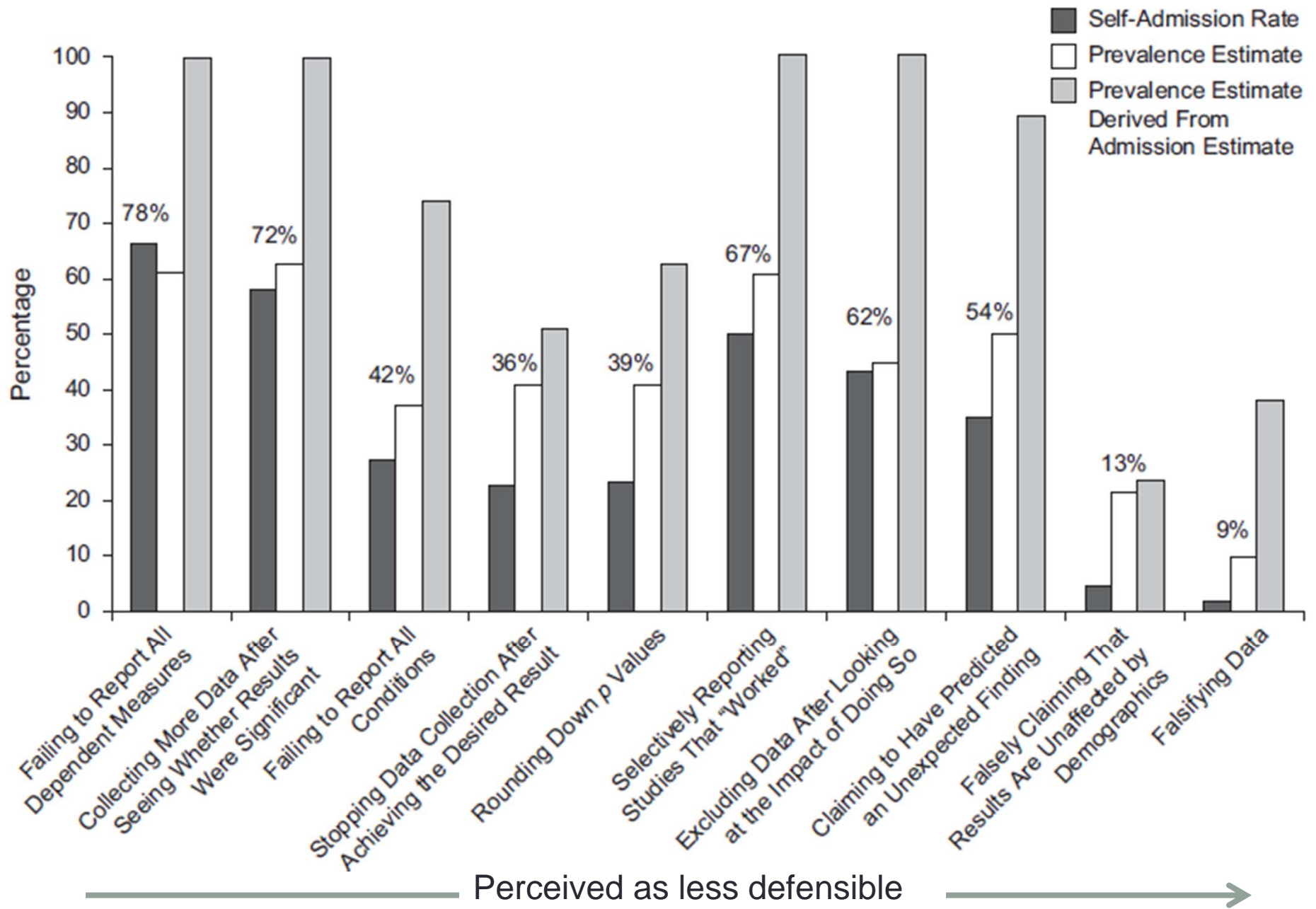
Presentation order randomized

Admission rates

	Control	BTS	Odds Ratio
Failing to report all DVs	63%	67%	1.1
Collecting more data after checking results	56%	58%	1.1
Failing to report all conditions	28%	27%	1.0
Stopping data collection after achieving desired result*	16%	23%	1.6
Rounding down p values	22%	23%	1.1
Selectively reporting studies that 'worked'	46%	50%	1.2
Excluding data after looking at impact of doing so	38%	43%	1.2
Claiming to have predicted unexpected finding*	27%	35%	1.5
Falsely claiming results to be unaffected by demographics	3%	4%	1.5
Falsifying data	1%	2%	2.8

Admission rates

	Control	BTS	Defensible 0 = No 1 = Possibly 2 = Yes
Failing to report all DVs	63%	67%	1.8
Collecting more data after checking results	56%	58%	1.8
Failing to report all conditions	28%	27%	1.8
Stopping data collection after achieving desired result*	16%	23%	1.8
Rounding down p values	22%	23%	1.7
Selectively reporting studies that 'worked'	46%	50%	1.7
Excluding data after looking at impact of doing so	38%	43%	1.6
Claiming to have predicted unexpected finding*	27%	35%	1.5
Falsely claiming results to be unaffected by demographics	3%	4%	1.3
Falsifying data	1%	2%	0.2



Admission rates by sub-discipline

Discipline	Admission rate
Clinical	0.27*
Cognitive	0.37***
Developmental	0.31
Forensic	0.28
Health	0.30
Industrial	
Organizational	0.31
Neuro	0.35**
Personality	0.32
Social	0.40***

Significance codes:

* $p < .05$, ** $p < .01$, *** $p < .0005$

For "Admission rate," significance codes are based on random effects logistic regression; for "Applicability" and "Defensibility", significance codes are based on random effects ordered probit regressions.

Admission rates by research type

Research type	Admission rate
Clinical	0.30
Behavioral	0.34*
Laboratory	0.37***
Field	0.31
Experiments	0.36***
Modelling	0.34

Significance codes:

* $p < .05$, ** $p < .01$, *** $p < .0005$

For "Admission rate," significance codes are based on random effects logistic regression; for "Applicability" and "Defensibility", significance codes are based on random effects ordered probit regressions.

Sub-group differences

- applicability of the items?
- willingness to admit?
- publication pressures?
- perceived defensibility of the items?
- research integrity?

Follow-up survey sent to subset of original respondents:

- Ss presented with same 10 QRPs from initial study; rate:
 1. Applicability to their research methodology
(never applicable / sometimes / often / always)
 2. General defensibility
(indefensible / possibly defensible / defensible)
- Response rate = 35% (504 out of 1,440)

Findings

1. Subgroup differences in applicability and defensibility ratings coincided with prevalence estimate findings
 - But did not account for all variance in prevalence estimates
2. Across subgroups, the practices were deemed to be ***indefensible***

PsychDisclosure.org

(LeBel, Borsboom, Giner-Sorella, Hasselman, Peters, Ratliff, Tucker Smith, forthcoming, *Perspectives on Psychological Science*)

- Contacted 50% of authors of recent top Psych journals; asked them to disclose criteria recommended by Simmons, Nelson & Simonsohn (2012)

Disclosure categories:

1. **Exclusions:** Disclosed total number of observations excluded and criterion for doing so.
2. **Conditions:** Disclosed all tested experimental conditions, including failed manipulations.
3. **Measures:** Disclosed all administered measures and items.
4. **Sample size:** Disclosed (a) *basis* for chosen sample sizes and (b) *basis* for stopping data collection.

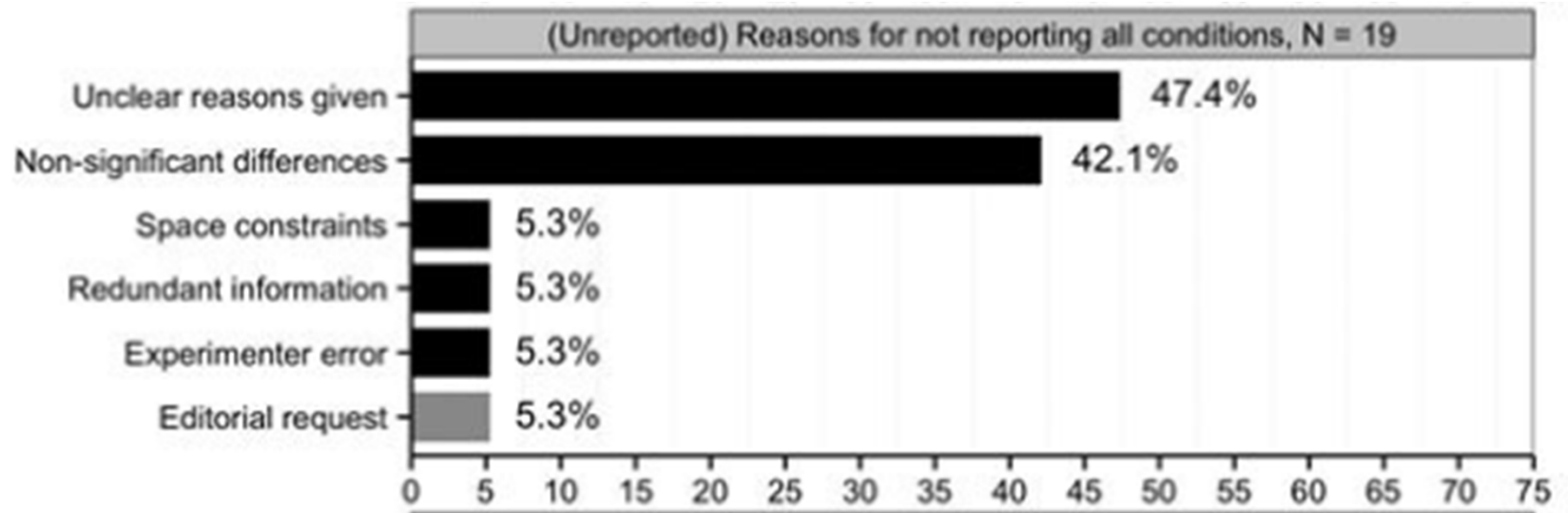
- Compliance rate: 50%

PsychDisclosure

(LeBel et al., forthcoming, Perspectives on Psychological Science)

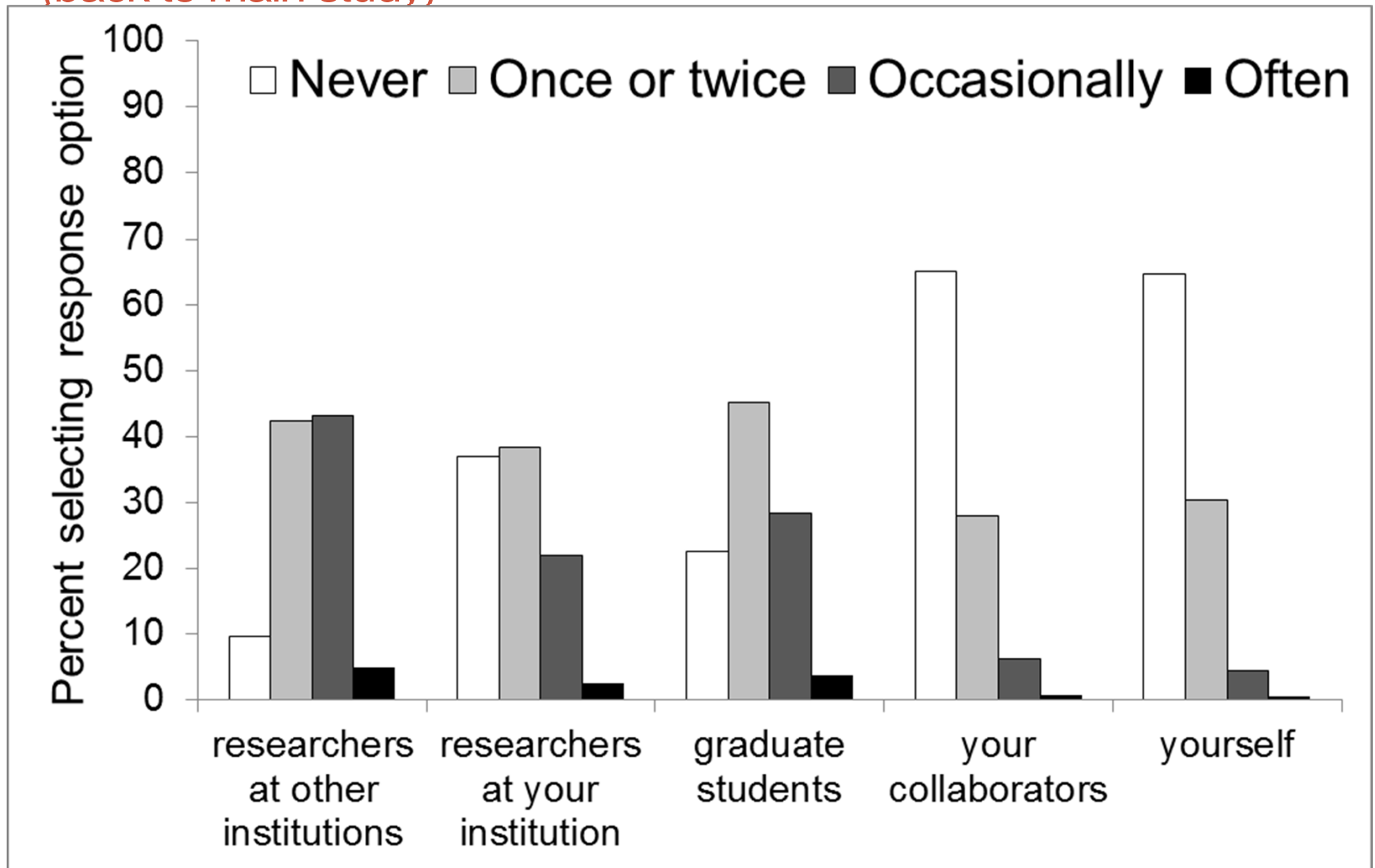
89% indicated that they had reported all conditions

Reasons for not having reported all conditions:



Doubts about research integrity

(back to main study)



Concluding comments

Summary:

1. 3 measures provide converging evidence of prevalence of QRPs
2. Incentive-compatible elicitation generates slightly higher estimates

We assume that researchers are sincerely motivated to conduct sound research, but...

- inherent ambiguity + incentives + motivated reasoning (Kunda, 1990) combine to raise prevalence



Thank you

Contact: ljohn@hbs.edu