



# Sampling bias and reporting bias in Medicine and Clinical psychology : Current state and policy recommendation

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## Introduction

Behavioral sciences have documented biased sampling in research participants, drawing predominantly from Western, educated, industrialized, rich, and democratic (**WEIRD**) societies.

Members from WEIRD societies have been found to be unusual and unrepresentative of humans in general, leading to replication crisis and even a theory crisis in behavioral sciences. How such **sampling bias** manifests in clinical research, and how it affects the **communication** of scientific findings remain unclear.

Here we examined potential **sampling bias** and **reporting bias** in clinical psychology and medicine.

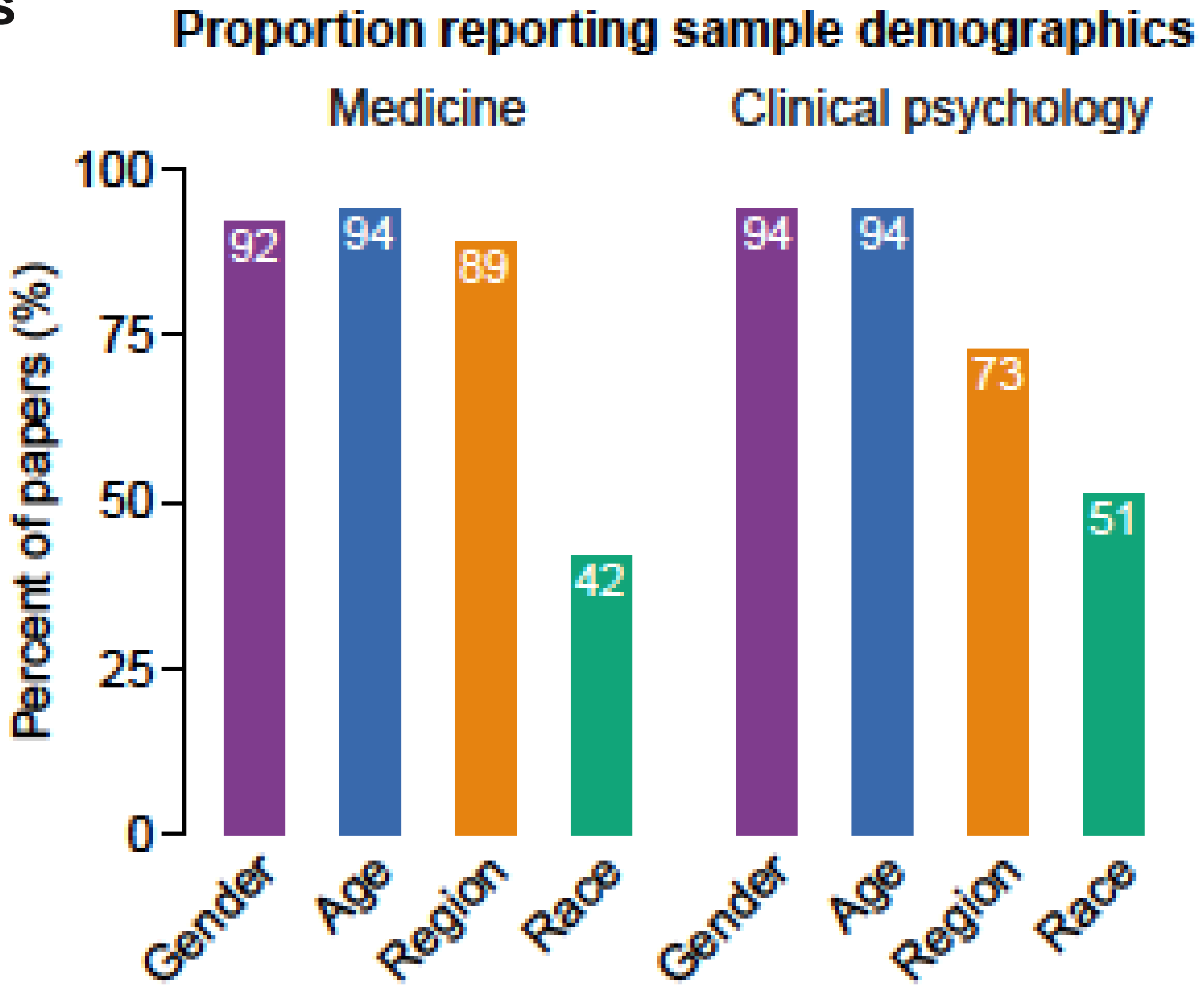
## Methods

**Journals:** included 1202 empirical articles published in 2020 from four leading medical journals (*Lancet*, *JAMA*, *BMJ*, and *NEJM*) and seven clinical psychology journals (*Clin Psychol Sci*, *J of Abnorm Psychol*, *J Consult Clini Psychol*, *J Couns Psychol*, *Schizophr Bull*, *Depress Anxiety*, and *Int J of Eat Disord*).

**Sampling bias:** encoded four characteristics of the sample from the methods and results sections of each article, including country/region, race, gender, and age.

**Reporting bias:** we encoded the same information but from the title and abstract. Reporting bias is evident when characteristics of the sample were disproportionally emphasized in the title and abstract.

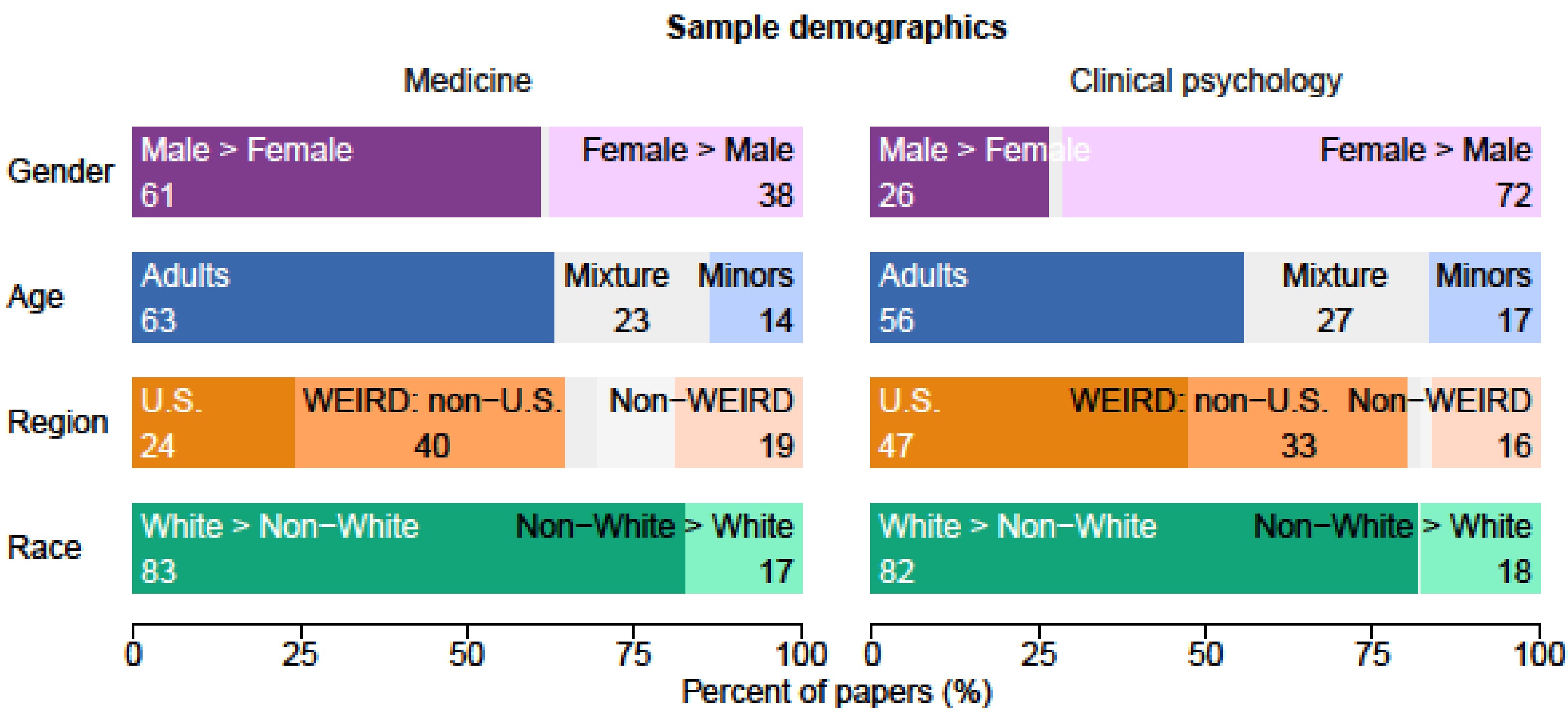
## Results



**Figure 1** Proportion of papers reporting demographic information

The two fields exhibited same reporting rates for age,  $X^2 = 0$ ,  $p = .986$ , and similar reporting rates for gender,  $X^2 = 1.3$ ,  $p = .253$ , but they diverged for region, and race. Specifically, medicine reported more frequently on region,  $X^2 = 46.3$ ,  $p < .001$ , but less frequently on race,  $X^2 = 9.8$ ,  $p = .002$ .

## Sampling Bias



**Figure 2** Demographic characteristics of participants in medicine and clinical psychology journals

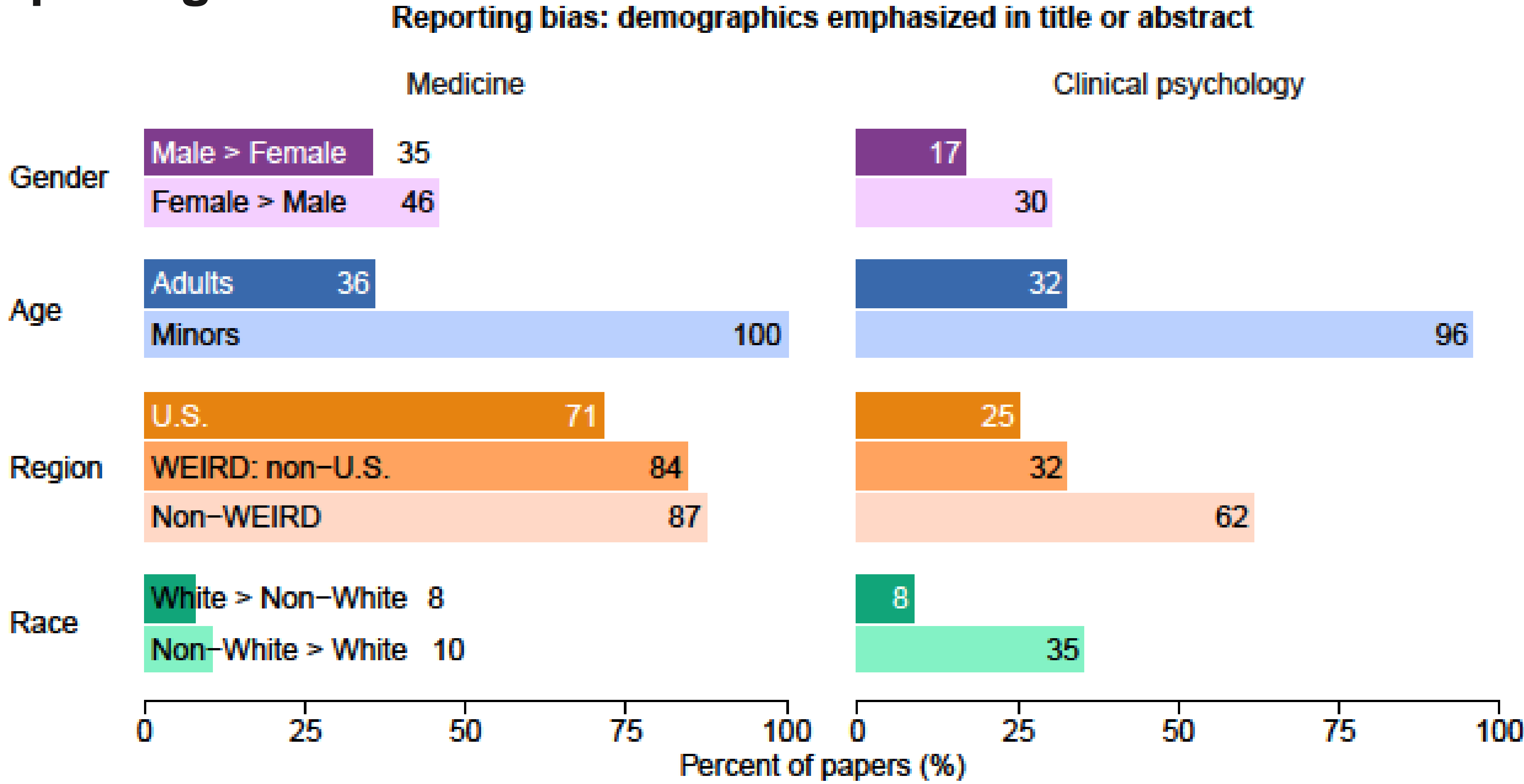
Age: Two fields primarily focused on adults-only samples, constituting 63% and 56%,  $X^2 = 0.95$ ,  $p = .330$ .

Race: Two fields predominantly studied majority-White samples, at 83% in medicine and 82% in clinical psychology,  $X^2 = 0.002$ ,  $p = .961$ .

Gender: medical journals primarily included majority-male samples (61%), while clinical psychology journals predominantly featured majority-female samples (72%),  $X^2 = 133.8$ ,  $p < .001$ .

Region: Two fields differed in the proportions of U.S. versus non-U.S. WEIRD regions,  $X^2 = 31.9$ ,  $p < .001$ .

## Reporting Bias



**Figure3** Biases in reporting demographic characteristics of participants in medical and clinical psychology journals

Age: a bias consistent across medicine and clinical psychology,  $X^2 = 89.3$ ,  $p < .001$ .

Gender: a male bias in medicine,  $X^2 = 4.9$ ,  $p = .028$ . This bias was more pronounced in clinical psychology,  $X^2 = 10.5$ ,  $p = .001$ .

Region: a U.S. bias in medicine,  $p < .001$ . a more pronounced and generalized U.S. and WEIRD bias in clinical psychology,  $p < .001$ .

Race: a numeric but non-significant White bias in medicine,  $p = .527$ . a marked White bias in clinical psychology,  $X^2 = 26.6$ ,  $p < .001$ .

## Policy Recommendation

### 1. Standardized reporting sample demographic information

Academic journals: including reporting basic demographic properties as a mandatory requirement in their submission guidelines, providing a standardized reporting template.

University education: including standardized reporting of sample demographic properties in the curriculum of academic writing to improve the reporting consciousness.

Academic organizations: publicly promoting initiatives to encourage researchers in medicine and clinical psychology to emphasize the importance of reporting sample demographic properties.

### 2. Improving sample diversity in clinical research

International cooperation: Promoting collaboration among researchers from different regions and cultural background.

Special funding: setting up special funding to support research targeting underrepresented individuals in samples.

Diversity of editorial boards: improving the proportion of ethnic minorities on international journal editorial boards.