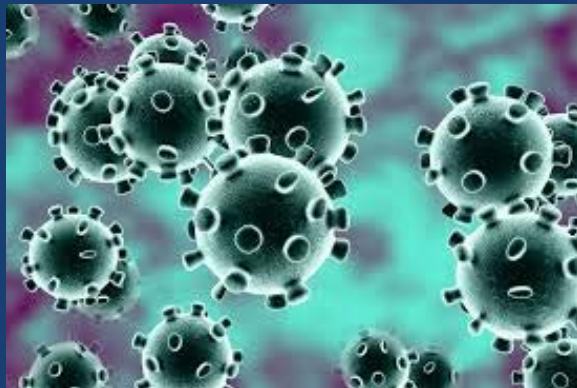


# An example of implementation - Ensuring that COVID-19 Research is Inclusive: Guidance from the INCLUDE Project



Miles D Witham  
June 2020

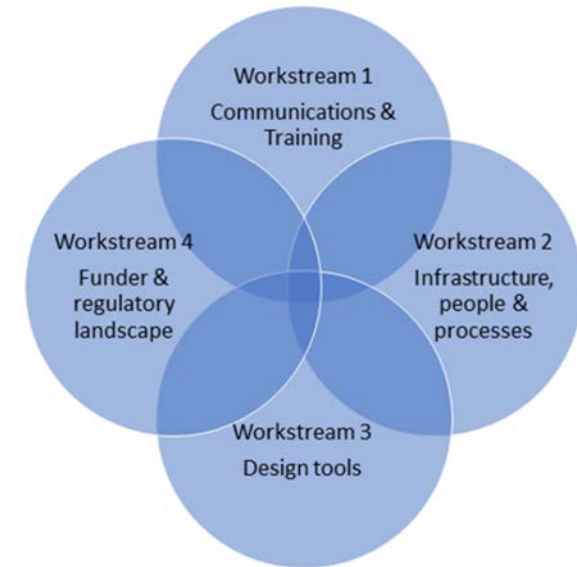


# Background

- COVID-19 is not an equal opportunities disease
- It causes severe disease and death more often in certain groups:
  - Some BAME communities
  - Men
  - People living with obesity
  - People living with multimorbidity
  - Older people
- Research on COVID-19 therefore needs to include these groups but does not always do so
- COVID-19 is an exemplar of everything that the INCLUDE project is about

# Using the INCLUDE framework for COVID-19 guidance

- The vision for INCLUDE is that it would provide a roadmap and framework for others to develop specific guidance for different intersections of research and underserved groups
- We used the INCLUDE framework to develop COVID-19 specific guidance
- Developed by the INCLUDE Steering group
- Group includes individuals with clinical and research experience of COVID-19

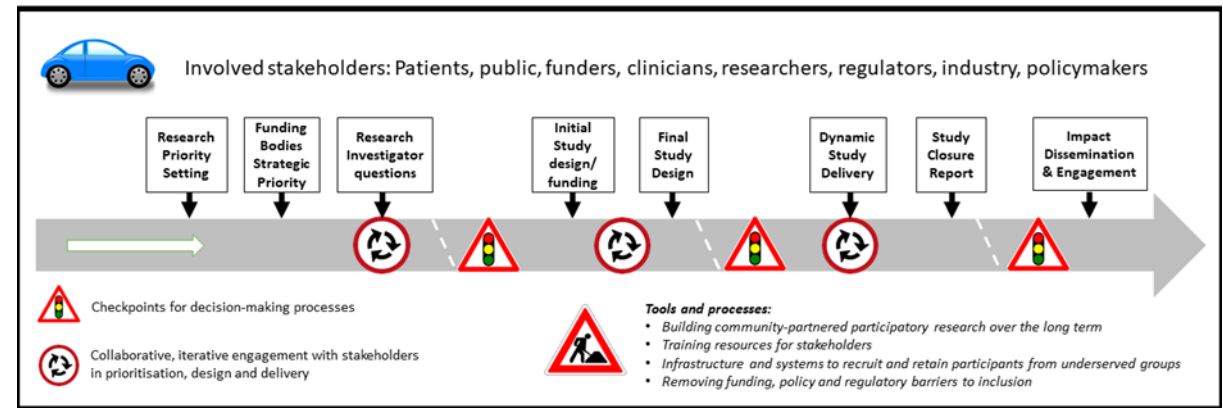


# INCLUDE framework for COVID-19 guidance

- Developed *recommendations and suggestions*

Based on

- A) the roadmap and workstreams
- B) the draft INCLUDE generic guidance document



# COVID-19 guidance content

- Identifies who is at heightened risk from COVID-19
- Identifies groups likely to be underserved in COVID-19 research (e.g. those self-isolating, care home residents, BAME groups, those without a car)
- Then works through the research journey
- Finishes with three checklists for promoting inclusion of underserved groups:
  - For researcher designing studies
  - For funders and reviewers evaluating proposals and analyses
  - For teams delivering research projects

# Implementing and disseminating INCLUDE COVID-19 guidance

Area	Example
Priority setting	Include underserved groups in national priority setting exercises for COVID research
Funding bodies	Ensure PPIE representatives from underserved groups sit on funding panels
Research questions	Co-develop questions between target groups, government, researchers, funders
Population	Minimise exclusion criteria – esp on age, ethnicity, obesity, multimorbidity. Recruit via wide range of settings
Outcomes	Evaluable remotely, or in a range of settings whilst wearing PPE. Routine data-based if possible
Ethics	Ethics committees have a key role in preventing unnecessary exclusion and facilitating novel recruitment and retention strategies
Delivery	Local teams should ask reps from local underserved groups how best to engage. Be flexible in how and where study delivery takes place (e.g. in participants homes).
Analysis and reporting	Include underserved group characteristics in baseline descriptors. Preplanned subgroup analyses of underserved groups
Impact and dissemination	Plan with input from underserved groups; strategies to reach specific underserved groups

# Where next?

- Feedback from this group to refine content
- Aim would be to disseminate this document to all components of the research pathway (e.g. funders, UPH committee, LCRNs, researchers)
- Document and separate paper in medical journal
- Social media
- Hosting and championing on outward facing websites (e.g. NIHR, NICE, charities, UKRI, HRA)
- Dissemination and championing within NIHR (NETSCC, CRN, BRCs, ARCs, NOCRI)
- Other ideas?



Questions?

