

# SWAT 240: Do Underserved Groups in the ColoCap Study have preferences for particular types of ‘thank you’ vouchers?

## Objective of this SWAT

- To explore whether voucher choice varies according to participant characteristics.
- To understand preferences for physical versus online vouchers according to participant characteristics.
- To explore whether offering a choice of vouchers improves recruitment of participants from underserved groups, especially those from socioeconomically disadvantaged backgrounds and minority ethnic groups.

## Additional SWAT Details

Primary Study Area: Recruitment & Retention

Secondary Study Area: EDI; Barriers and facilitators

Who does the SWAT intervention target: Participants

Estimated resources needed to conduct the SWAT: Low

Estimated cost of the SWAT (£): The face value of a voucher is £100 but as using vouchers was always part of the host trial, the additional cost of the SWAT is very modest.

## Findings from Implementation of this SWAT

Reference(s) to publications of these findings: Not applicable - SWAT not started yet

Primary Outcome Findings: Not applicable - SWAT not started yet

Cost: Not applicable - SWAT not started yet

## Background

The ColoCap study aims to determine the diagnostic accuracy of colon capsule endoscopy compared to standard colonoscopy in patients at risk of colorectal disease.

Engaging and retaining participants in clinical trials remains a challenge, particularly among underserved populations. According to the National Institute for Health and Care Research (NIHR), underserved groups are those who experience health inequalities due to social, economic, or systemic barriers to accessing healthcare and participating in research. These groups may include individuals from low socioeconomic backgrounds, minoritised ethnic groups, people with disabilities, and those from geographically isolated areas.[1] Ensuring the inclusion of these populations in research is essential to improving the generalisability of findings and ensuring that healthcare interventions address the needs of all communities.

Colorectal cancer disproportionately affects individuals from lower socioeconomic backgrounds, who often experience barriers to early diagnosis and treatment due to healthcare access disparities.[2] People from deprived areas may be less likely to participate in screening programs and clinical trials, limiting their access to early detection and innovative treatments.[3] By increasing the representation of underserved groups in research, disparities in health outcomes can be better understood and addressed, leading to more equitable healthcare solutions.

In this Study Within a Trial (SWAT),[4] participants in the ColoCap study will be offered compensation of £100 for taking part, in the form of a voucher. Providing a choice of vouchers may help with recruitment and retention, because it allows participants greater control over how they spend their money. This may be particularly important for socioeconomically disadvantaged groups, who may prefer vouchers that help meet specific needs, such as clothes or household essentials. Additionally, offering a choice of vouchers allows for future research to assess whether certain retailers or voucher distribution methods are more effective for specific groups. Providing cash was not a viable option due to administrative challenges, including the complexities of storing cash on-site. This SWAT will evaluate whether offering participants a choice of vouchers helps improve recruitment of underserved groups and influences retention rates, as well as patterns of voucher selection in relation to participant characteristics.

Host Trial Population: Adults

Host Trial Condition Area: Oncology

## Interventions and Comparators

Intervention 1: £100 voucher, with participants given the opportunity to choose the type of voucher.

Method for Allocating to Intervention or Comparator: Not applicable – all participants will be offered a voucher and be given the opportunity to choose the type of voucher

### **Outcome Measures**

Primary Outcomes: - Distribution of voucher choices among participants.

- Association between participant characteristics and voucher choice.
- Association between participant characteristics preferences for physical versus online vouchers.

The study team will review the data to:

1. Rank vouchers in terms of frequency of choice.
2. Produce tables of participant characteristics (e.g., age, sex, gender, socioeconomic status, ethnicity, location) for each voucher to identify any patterns in voucher selection by participant characteristic.
3. Look for patterns in recruitment and retention by site and by voucher choice and compare recruitment and retention to historical recruitment and retention levels in similar studies.

Secondary Outcomes:

### **Analysis Plans**

Insights will be drawn from observed patterns rather than formal statistical analysis.

### **Possible Problems in Implementing This SWAT**

Distributing vouchers efficiently could be difficult if there are delays in sites confirming participant attendance. Any issues with lost, delayed, or undelivered vouchers might cause frustration and impact the participant experience. Manually processing voucher orders one by one could also slow things down and potentially frustrate participants if timelines are not properly communicated. There is also a risk (albeit low) that specific vouchers are discontinued.

### **References Cited in This Outline**

1. NIHR. (2020). Improving inclusion of under-served groups in clinical research: Guidance from INCLUDE project. Retrieved 26 February 2025, from <https://www.nihr.ac.uk/improving-inclusion-under-served-groups-clinical-researchguidance-include-project>
2. Syriopoulou E, Morris E, Finan PJ, et al. Understanding the impact of socioeconomic differences in colorectal cancer survival: potential gain in life-years. *British Journal of Cancer* 2019;120(11):1052-8. DOI: 10.1038/s41416-019-0455-0
3. Carethers JM, Doubeni CA. Causes of Socioeconomic Disparities in Colorectal Cancer and Intervention Framework and Strategies. *Gastroenterology* 2020;158(2):354-67. DOI: 10.1053/j.gastro.2019.10.029
4. Treweek S, Bevan S, Bower P, et al. Trial Forge Guidance 1: what is a Study Within A Trial (SWAT)? *Trials* 2018;19(1):139. DOI: 10.1186/s13063-018-2535-5

### **References to This SWAT**

#### **Source of This SWAT**

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Date of idea: 01/01/2025

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