NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

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## Title

Institutional policies on research-related transportation could help improve research engagement

## **Priority 1 (Research Category)**

Clinical research (other)

## **Presenters**

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## **Abstract**

Context: The HEALthy Brain and Child Development (HBCD) study, a nationwide consortium, plans to enroll 7,000 child-parent dyads and follow them up for a decade. Participants will complete many assessments, some time intensive. Transportation has emerged as a major barrier to research involvement, especially among underserved populations.

Objective: To evaluate the presence of institutional policies or guidance on research-related transportation across the HBCD sites, and, if needed, develop recommendations for such policies to optimally support research teams and participants.

Study Design: We sought information on policies for research-related transportation across the HBCD study sites. Data on five policy domains identified as key to research-related transportation were extracted from each existing policy and summarized.

Setting: Research sites involved in the HBCD Consortium birth cohort study.

Instrument: All HBCD sites received a brief email survey asking about the presence of institutional policies on research-related transportation. In addition, a standardized online search was completed for such policies for each site.

Outcome Measures: Presence of institutional policies addressing one or more of the five domains, key to guiding study team's approach toward research-related transportation: study team's travel for research business; transporting research participants and accompanying persons; transporting children; reimbursing participants for travel; and utilizing existing transportation services. In addition, information on liability insurance and protections was sought.

Results: Among the surveyed 28 HBCD sites, five sites had a total of seven policies specifically addressing some of the key domains of research-related transportation: research staff transporting research participants (n=1 policy), reimbursing participants for research-related travel costs (n=2), and the use of existing transportation services for participant travel (n=4). No policy addressed transporting a child-participant or when they require car/booster seats, or research staff travel specifically for "study business." Policies from 17 sites had some language on general liability protections for research personnel.

Conclusions: Policies for research-related transportation are scarce among institutions engaged in clinical research. Implementation of such policies could support recruitment, retention, sample diversity, and generalizability of research findings.

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