Research Strategy
2019-24
Introduction

Stroke is the fourth biggest killer in the UK and the second biggest killer in the world. There are around 40,000 deaths from stroke in the UK each year and of the 100,000 people who have a stroke each year, a third are between the ages of 20 and 64.

The consequences of stroke are life changing and can be devastating; two thirds are left with disability. Two thirds have visual problems, a third have depression and a third have communication and speech problems. The burden of stroke is vast, yet it is still under-recognised and receives a fraction of the research investment of other comparable conditions.

We – the Stroke Association – are here to support people to rebuild their lives after stroke. Our core purpose is to be the trusted voice of stroke survivors and their families; and to drive better outcomes in stroke prevention, treatment and lifelong support for everyone affected by stroke.

Since the early 1990s we have invested over £55m into stroke research across the whole pathway, with almost half of our portfolio addressing stroke rehabilitation and recovery.

Our highest priority is to ensure that our research meets the needs of people affected by stroke.

Through our International Strategy, we can also support efforts to ensure research evidence is continually strengthened, and has appropriate and meaningful patient engagement and participation across national and international trials.
Research Strategy
Goals 2019-24

In stroke research we want to:

1. **Build capacity across multiple disciplines**
   Establish talented research leaders of the future across all disciplines relevant to stroke, to enable us to catalyse innovations for patients across the whole stroke pathway.

2. **Increase funding and raise the profile**
   Build upon our partnerships approach to leverage funds, effectively pool resources and expertise and give those affected by stroke a louder voice, to achieve maximum impact.

3. **Support research that will achieve the greatest impact for everyone with stroke and to improve life after stroke**
   We will support applied and clinical research and continue our focus into rehabilitation and acute research.

These goals are described in further detail throughout the document.
Currently the stroke research community in the UK is small in comparison to the burden of disease, so we must continue to invest in talented individuals to engage in a life-long career in stroke research. This investment must span the stroke care pathway in order to establish a strong research community.

We need highly talented researchers from a range of disciplines to help bring the latest techniques and methodologies into stroke research. Building a well-trained community of successful research leaders in all areas of stroke care and rehabilitation will accelerate research and innovation for patient benefit.

1. **Build capacity across multiple disciplines**
   Establish talented research leaders of the future across all disciplines, to enable us to catalyse innovations for patients across the whole stroke pathway.

Our key areas of focus in goal one are to:

- continue to build the community of future stroke research leaders that we began in our last strategy
- continue to welcome applications for stroke research Fellowship and Lectureship awards from a range of specialties in clinical and applied research
- continue to develop a flexible approach to support and enable our researchers to flourish as leaders
- encourage networking and knowledge transfer within stroke research, as well as promoting careers in stroke research to those in a range of disciplines
2. **Increase funding and raise the profile of stroke research**

Build upon our partnerships approach to leverage funds, effectively pool resources and expertise, and give those affected by stroke a louder voice to achieve maximum impact from our investment.

We have developed some strong partnerships with other charities and funders in recent years and established long-lasting relationships which we now seek to build upon further, as well as forging new partnerships in stroke research.

We have also been working closely with people affected by stroke in recent years and have established and grown membership of Stroke Voices in Research. We have widened their roles and further opportunities have been opened to enable those affected by stroke to have a much stronger voice and closer involvement with decisions around research priorities and research funding, as well as partnering and collaborating with researchers to inform research and help researchers to develop their ideas involving the user voice from the outset.

In our collaborative approach to developing this new strategy, we have heard loud and clear the need for a definitive and robust set of research priorities across the whole of the stroke pathway, and we will lead a James Lind Alliance Priority Setting Partnership (JLA PSP) to achieve this.

We are interested in engaging with further partners around digital, technology and AI research, which have enormous potential in stroke care and rehabilitation. We will ensure we engage in meaningful collaborations and partnerships to support the development and delivery of the best technologies for stroke patients and their carers - towards supporting them in their recovery and in re-gaining their independence.

Finally, aligned with our International Strategy, we will identify opportunities to support and convene international consortia to develop joint funding applications or other initiatives, exploring research funding opportunities within global health which are driven and funded by UKRI and its partners.

**Our key areas of focus in goal two are to:**

- continue to build our partnership work, to leverage funds for stroke research and to address issues that are common across multiple conditions

- continue to strengthen our partnerships with researchers and people affected by stroke throughout this strategy

- lead a James Lind Alliance Priority Setting Partnership in stroke, joining forces with other professional bodies and research organisations to establish the top research priorities across the whole stroke pathway
3. Support research that will achieve the greatest impact for everyone with stroke and to improve life after stroke

Fund applied and clinical research and continue our focus into rehabilitation and acute care research.

Our research investment to date has largely been focused around applied and clinical research, to ensure our investment has the potential to directly improve care and support for those who have strokes, both at the time of their stroke(s) and in the longer term. We will continue to invest in research that will reduce and prevent the devastating effects of stroke, at the time when stroke happens and in the long-term lived experience of stroke.

We will focus on investing in the highest quality rehabilitation research with clearly planned pathways to implementation to achieve the highest impact for stroke survivors, but we also understand that innovations in pre-hospital, acute and secondary prevention care are vital to achieving the best possible quality of life after a stroke.

We have identified research areas that have a devastating impact on stroke survivors and their families in consultation with research experts, clinicians and people affected by stroke. Many of the issues identified are already listed in the Top 10 priorities of the James Lind Alliance Priority Setting Partnership (JLA PSP) on Life After Stroke in 2010/11. Yet, we know these issues are still live today and these needs are still unmet for vast numbers of stroke survivors, so prior to having an updated JLA PSP, we will seek to address these areas with highlight funding notices and new partnerships.

Stroke prevention is a critical issue with over 100,000 strokes each year. Primary prevention and public health research initiatives that will prevent stroke will also be successful in preventing all vascular diseases and other non-communicable diseases. We will reserve the largest proportion of our vital resources for investment in research to improve the outcomes of stroke and reduce the devastating long term impacts of stroke.

Our key areas of focus in goal three are to:

• continue to invest in vital rehabilitation research to support everyone with stroke and the 1.2 million people living with its long term impacts

• continue to support research into pre-hospital, acute and secondary prevention to optimise survival and offer people the best chance of living the best life possible after stroke

• focus some investment into areas of the greatest unmet need, which are underfunded and currently take a heavy toll on patients and carers

• evolve our priorities during this strategy as we announce the results of our JLA Priority Setting Partnership, allowing new areas of focus to emerge through 2020-24

• operate only within partnerships to fund strategic primary prevention research initiatives, working with other funders to achieve a bigger impact than we can alone
1. **People affected by stroke at the core**

As outlined in the Introduction, the most important principle of this Research Strategy is that it is user-centred and driven by the voices of those affected by stroke. Addressing the needs and priorities of people affected by stroke and delivering the best care and support for patients and their carers at all parts of the pathway must remain our primary focus.

2. **Improving grant processes to elevate research quality and impact**

We will take a renewed focus over the next five years to ensure more of our funded research can be translated into patient benefit in order to make best use of our funds. We will take further steps in our funding processes to ensure our research has the best possible chance of success and clear pathways to impact.

We will also look to break down some of the key barriers in delivering high quality research and we will coordinate with international efforts to ensure we fund high quality research via the implementation of consensus standards and recommendations.

3. **Facilitating a multidisciplinary stroke research community**

We will encourage stronger collaborations of our funded researchers with methodologists and specialists to support their research; for example, implementation scientists, health economists, digital health and AI specialists and computer scientists where necessary. New Research Development Groups will be established to convene multi-disciplinary researchers to develop the best applications and leverage funds into priority areas of stroke research.

4. **New ways to deploy Stroke Association research funds**

We will introduce further flexibility to react to emerging new priorities, partnerships and opportunities, as well as improving the competitiveness of some of our current funding opportunities. Our Fellowship and Lectureship programmes will continue. We will no longer be supporting a Priority Research Awards Programme, but we will increase the funding ceiling on Project Grants and we will utilise ‘highlight’ notices and new partnerships to address areas of unmet need.
When stroke strikes, part of your brain shuts down. And so does a part of you. That’s because a stroke happens in the brain, the control centre for who we are and what we can do. It happens every five minutes in the UK and changes lives instantly. Recovery is tough, but with the right specialist support and a ton of courage and determination, the brain can adapt. Our specialist support, research and campaigning are only possible with the courage and determination of the stroke community. With more donations and support from you, we can rebuild even more lives.

Donate or find out more at stroke.org.uk

Contact us
We’re here for you. Contact us for expert information and support by phone, email and online.
Stroke Helpline: 0303 3033 100
From a textphone: 18001 0303 3033 100
Email: helpline@stroke.org.uk
Website: stroke.org.uk

Rebuilding lives after stroke

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