

NIHR Annual Report 2021/2022

Funded by



Department
of Health &
Social Care



Introduction



Welcome to the NIHR annual report covering the period April 2021 to March 2022. This is my first annual report since being appointed Chief Scientific Adviser for the Department of Health and Social Care (DHSC) and Chief Executive of NIHR in August 2021.

This year has been a year of transition. It began in a COVID-19-enforced lockdown when the pandemic was the focus of much of NIHR's work and attention and the vaccination programme that we were central to developing was well underway. As the months passed, we gradually returned to supporting a more balanced portfolio of research. Over the year, COVID-19 evolved from being an emergency priority to settling as a 'constant' consideration in our mission to improve the health and wealth of the nation through research.

In June 2021, we published Best Research for Best Health: The Next Chapter which sets out our priorities now and into the future. In this document, we identify seven 'areas of strategic focus' – areas where we need to work with urgency and in fundamentally different ways if we are to address the changing needs of people and communities in the 21st century. All support NIHR's commitment to addressing health inequalities.

One of our areas of strategic focus is embedding equality, diversity and inclusion

across NIHR's research, systems and culture. This is to ensure that our research reflects the diversity of the UK population leading to better health outcomes and more value for money through higher economic returns to research. In August we instigated a three-month self-assessment of how race equality is delivered in health research, working in partnership with local government, higher education, the NHS, and the life sciences and third sectors. At the same time, we collated and published our first set of annual diversity data for funding programmes, which will provide a vital benchmark to monitor our progress in EDI over time.

In line with the Government's commitment to Open Access, we published a new Open Access policy for NIHR-funded researchers in November. All peer-reviewed research articles arising from NIHR-funded research studies will now be immediately available under an open licence. Following this, we worked with stakeholders to develop resources to support implementation, which we released in March. Resources included step-by-step policy guidance and a short checklist quickly summarising how to comply with the policy.

Our portfolio remains aligned with the UN Sustainable Development Goals, and during this year we increased our commitment to promoting universal health coverage and contributing towards addressing the emerging health challenges of climate change.

In November, at the [UN Climate Change Conference \(COP26\)](#) in Glasgow, I announced a new package of funding for research into climate and health. It included a £20 million funding call to develop new evidence to improve the health outcomes of people most affected by climate change and extreme weather events in low and middle-income countries. Four months later, we launched [major research calls into delivering more sustainable health and care systems at home and abroad](#).

Our year of transition was highlighted by key appointments and recognitions. At the same time as I was appointed to my role, Professor Waljit Dhillon was appointed to the [role of Dean of the NIHR Academy](#). As Dean, he supports the delivery and development of NIHR research training programmes, ensuring they meet the needs of the current research landscape. He also ensures that NIHR's strategy addresses equality, diversity and inclusion across all academic and research capacity programmes, schemes and initiatives.

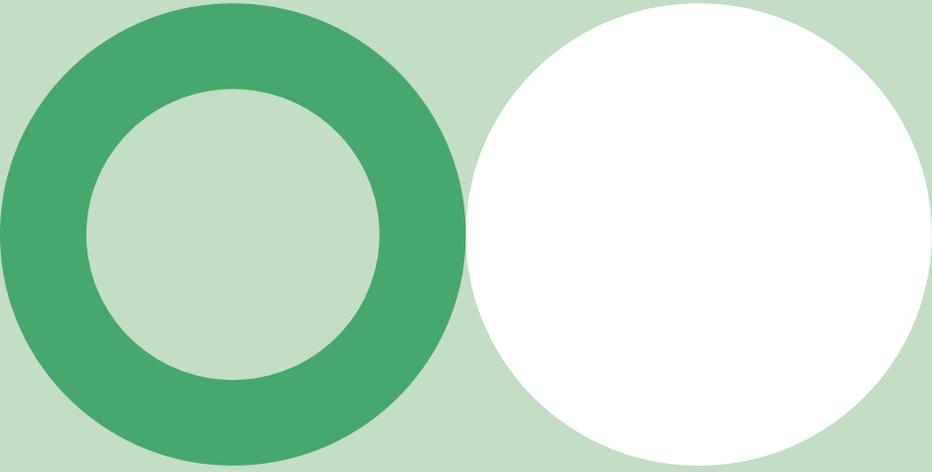
During the year, it was wonderful to see many NIHR leaders being awarded honours. Dr Jonathan Sheffield, former Chief Executive of the NIHR's Clinical Research Network, and [Professor Nick Lemoine](#), Medical Director of the Network, both received CBEs for services to medical/ clinical research, particularly during the COVID-19 pandemic. [Professor Kamlesh Khunti](#), Director of NIHR's Applied Research Collaborations in the East Midlands, received a CBE for services to health, and [Professor Martin Knapp](#), Director of the NIHR School for Social Care Research, received a CBE for services to social care research. I was also pleased to note that a number of other leaders were awarded an OBE or MBE.

Towards the end of the year, we decided [to change the name of the NIHR to the 'National Institute for Health and Care Research'](#) with effect from the beginning of April 2022. Since its establishment in 2006, the NIHR has invested over £200m in more than 470 social care research projects, with £90m worth of NIHR-funded social care studies starting in the last three years. We are committed to both deepening and broadening the range of social care we support - through funding a range of projects, building capacity within our research delivery infrastructure, strengthening the links between academia and practice, and engaging carers and people who need care and support.

In this report, we have showcased some of the work that we have undertaken, highlighted through our six core workstreams. Over the year, NIHR had a positive impact on government policy and on health and social care practice in numerous areas, some of which are highlighted in this report; you can learn more about [our impact](#) and stay up to date with NIHR news through our [social media channels](#).

Professor Lucy Chappell
Chief Scientific Advisor, DHSC
Chief Executive of NIHR





Funding high-quality, timely research that benefits the NHS, public health and social care

Our commitment to funding health, public health and social care research across a range of programmes and organisations leads to improved outcomes for patients and the public, and a more efficient, effective and safe health and social care system. We work closely with stakeholders across the system to address the challenges they face and ensure we respond to their research needs.

Caring for older people at home can be just as good, or even better, than hospital care

The results of an NIHR-funded study published in April 2021 in [Annals of Internal Medicine](#) show that caring for a select group of vulnerable, older people at home can improve patient outcomes while reducing pressures on hospitals. The randomised trial led by Nuffield Department of Population Health at the University of Oxford involved over 1000 older participants with an average age of 83 years. Participants were randomly assigned to either hospital admission or 'hospital at home' treatment, providing an alternative to hospital admission where hospital-standard care is provided to patients in their homes. [Read our news story on caring for older people at home.](#)



1,000

older participants with an average age of 83 years were involved

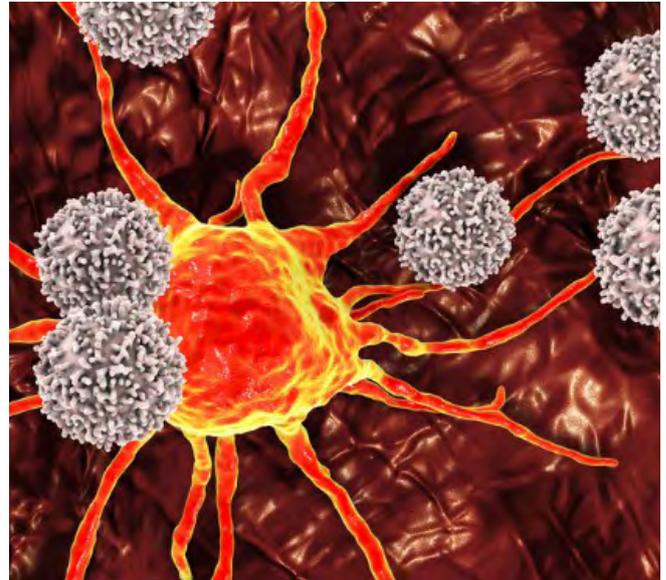


Outcomes of NIHR's second long COVID funding call

Recent research shows that as many as a third of people who report being infected with coronavirus also report Long Covid. The condition can present with a number of ongoing symptoms including fatigue, breathlessness and cognitive impairment known as 'brain fog'. In July 2021, NIHR awarded 15 projects from across the UK a total of £19.6 million to examine causes of long COVID, trial drugs to tackle it, and investigate symptoms that have become synonymous with the condition. Studies will also evaluate health services, such as long COVID clinics, and explore ways patients can monitor the condition to optimise their recovery and return to work. [Read our news story on NIHR's long COVID funding call.](#)

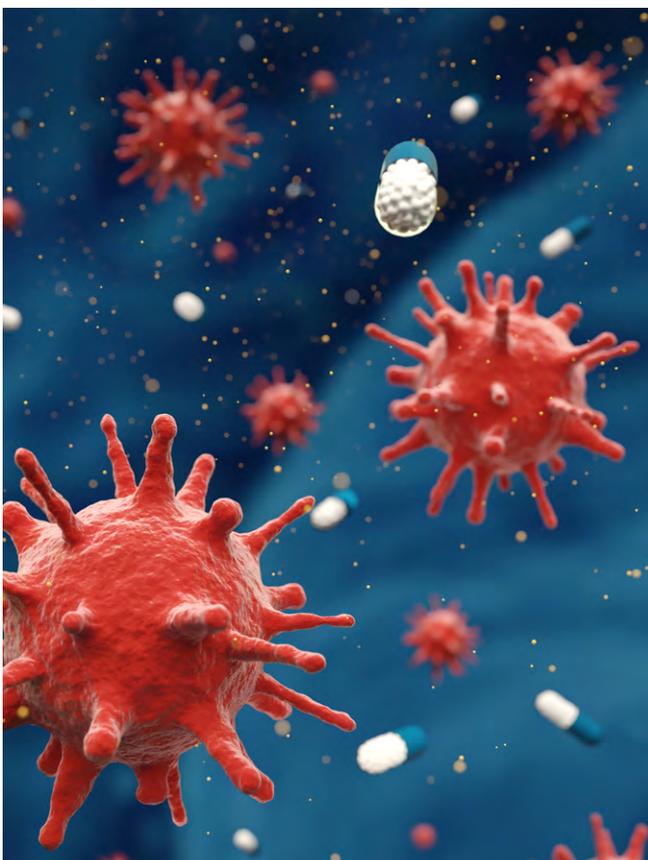
Trial finds new CAR T-cell therapy increases targeting and killing of cancer cells

Early-stage research funded by the [NIHR Invention for Innovation](#) and supported by the [NIHR UCLH Biomedical Research Centre](#) suggests a new version of an immunotherapy called CAR T-cell therapy has fewer toxic side effects and is effective for longer in adults with relapsed B-cell acute lymphoblastic leukaemia (B-ALL), a group who previously had few treatment options available. Phase 1 clinical trial results, published in the [Journal of Clinical Oncology](#) in January 2022, showed patients did not present cytokine release syndrome, and their CAR T-cell levels remained high, with persistence evident in three-quarters of patients for around six months. One month after treatment, 85% of the patients were in complete remission. [Read our news story about a new version of an immunotherapy for adults with relapsed B-cell acute lymphoblastic leukaemia.](#)



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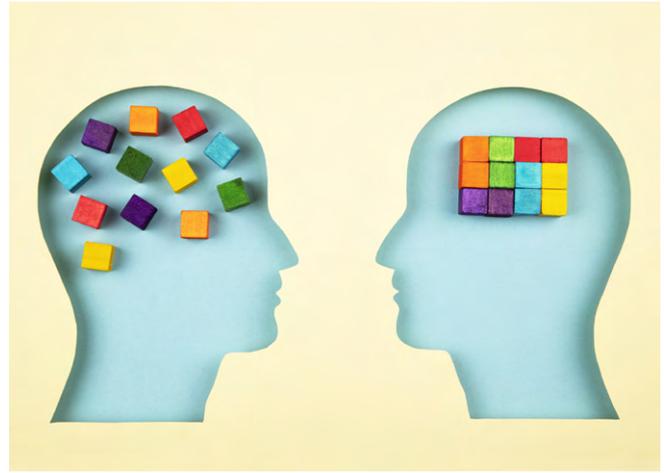


Ground-breaking COVID-19 antiviral treatment opens to recruitment

In December 2021, Panoramic, an NIHR-funded and supported, nationwide trial, began assessing the effectiveness of a range of novel, purpose-designed COVID-19 antivirals. These new orally administered treatments are intended for use in the very early stages of infection by people with COVID-19 at higher risk of complications from the disease. The [Panoramic trial remains open to participants](#) from across the UK until each arm of the study reaches 10,600 volunteers. It has been designed as a 'platform clinical trial', meaning it can rapidly evaluate several antiviral treatments that could help clinically vulnerable people recover sooner, prevent the need for hospital admission and so ease the burden on the NHS. [Read our news story on the trial of new COVID-19 oral antiviral treatments.](#)

New funding boost for NIHR mental health research in underserved areas

Mental health problems are the largest cause of disability in the UK and represent an increasing disease burden across all ages. Following the 2020/21 Spending Review, the DHSC and the NIHR announced a new rapid Mental Health Research Initiative to help tackle the disparity between regional needs and mental health research activity. Since June 2021 the NIHR has funded more than 100 new mental health projects in areas of unmet need across its research infrastructure, research schools and research funding programmes, in its biggest-ever coordinated investment in UK mental health research. This funding is in addition to NIHR's existing investment in mental health research. [Read our news story on NIHR mental health research funding.](#)



100

new mental health projects funded by NIHR in areas of unmet need



Major new funding opportunities for local government-based public health research collaborations

In September 2021, NIHR launched an exciting new initiative to fund public health research collaborations based in local authorities. This is the first time NIHR has provided funding for public health research infrastructure based in local government. The NIHR Health Determinants Research Collaborations (HDRCs) focus on how to address the wider determinants of population health and health inequalities, explicitly addressing the needs of local disadvantaged groups. This new funding is one of a number of initiatives that NIHR is putting in place to build capacity and capability in preventative, public health and social care research. [Read our news story on public health research in local authorities funding.](#)

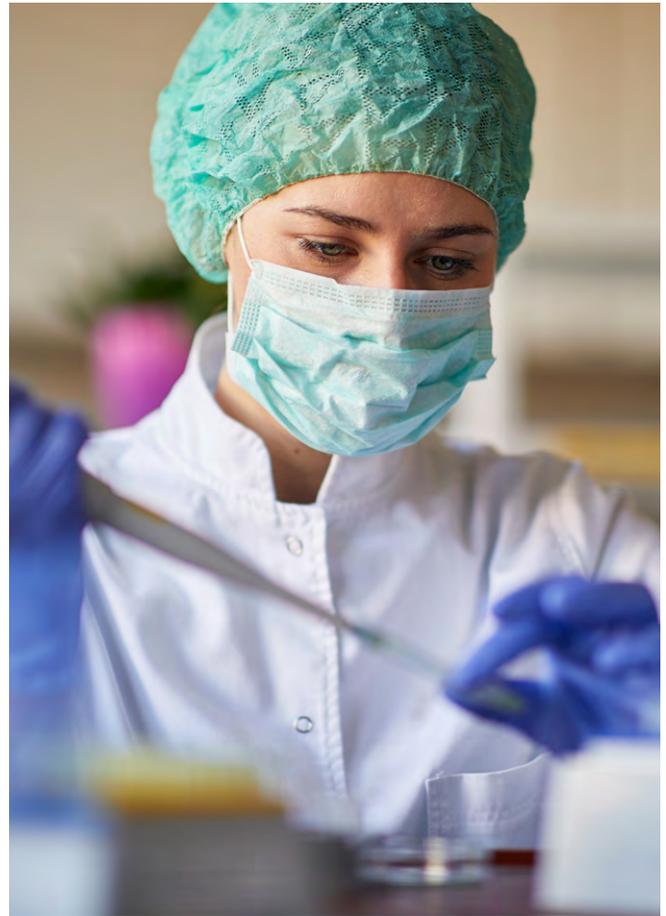


Investing in world-class expertise, facilities and a skilled delivery workforce to translate discoveries into improved treatments and services

Our infrastructure supports the research we fund and underpins research funded by others, transforming the health system's ability to turn scientific discoveries into new or improved treatments and services. The widespread, national uptake of these innovations is enabled by applied research studies delivered through this infrastructure.

NIHR launches a new funding competition to drive innovation in health research

In April 2021, NIHR launched a new competition to fund research to translate lab-based discoveries into new treatments, diagnostics and medical technologies for patients. The new NIHR Biomedical Research Centre funding brings together academics and doctors to translate advances in biomedical research into benefits for patients and the health system and support partnerships between universities and NHS hospitals to drive innovation in the prevention, diagnosis and treatment of ill-health. The new centres also act as a major component of the nation's knowledge economy, attracting investment from the life sciences industry and making the research environment in England more competitive. [Read our news story on the funding competition.](#)

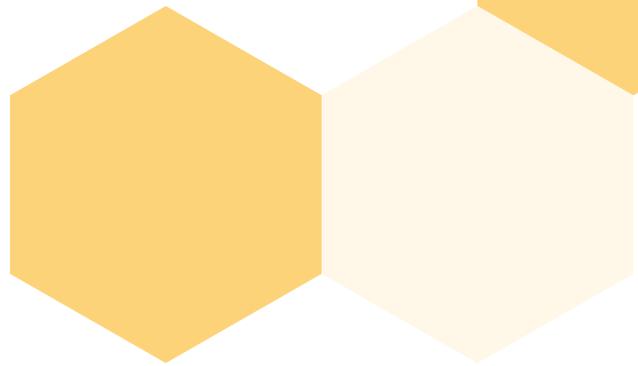


New accredited register for the Clinical Research Practitioner profession

The NIHR announced in June 2021 the launch of a new UK-wide professional accreditation scheme for [Clinical Research Practitioners](#) (CRPs) as part of efforts to double the number of this important workforce over the next few years. The aim of introducing this register is to improve professional identity, recognise the vital role CRPs play in research delivery, and provide a clear path for their career development. The standards set are similar to the high levels found in statutory regulation for nursing and other allied health professions. A successful application to the accredited register demonstrates that practitioners meet a defined set of standards and work within an agreed scope of practice. [Read our news story on the Clinical Research Practitioners accreditation scheme.](#)

Thanks to ground-breaking clinical trials, a life-saving anti-cholesterol drug recommended on NHS

A ground-breaking drug to combat heart disease could soon be offered by the NHS, following an innovative programme of clinical trials delivered by the NIHR [Clinical Research Network](#). The National Institute for Health and Care Excellence (NICE) recommended in September 2021 that inclisiran, a treatment to lower cholesterol, should be offered to patients who have already had a stroke or heart attack and are not responding to other cholesterol-lowering treatments. The drug would be delivered as a twice-yearly injection to eligible patients with prior experience of heart attack or stroke, potentially replacing the need to take statins daily while saving thousands of lives a year. [Read our news story on an anti-cholesterol drug trial.](#)



New funding boost for delivery of early-stage clinical research across England

In February 2022, we announced nearly £161 million to fund 28 NIHR Clinical Research Facilities (CRFs), expanding the delivery of early phase clinical research in NHS hospitals across England. These facilities support the delivery of early translational and experimental medicine research, from studies testing new treatments in patients for the very first time (first-in-human trials) to early safety and efficacy trials (Phase IIa trials). [A total of 28 NIHR CRFs were awarded funding](#) in this latest round, six more than previously, with about half of the funding awarded to NIHR CRFs outside of London, Oxford and Cambridge. [Read our news story on £161m awarded to NIHR Clinical Research Facilities.](#)

Patients with unexplained chest pain are at an increased risk of suffering a heart attack later in life

NIHR-supported researchers reported in March 2022 that people with unattributed chest pain were at a 15% increased risk of a heart attack in the first year after visiting their GP, with a continued increased risk over the next 10 years. Many of the one million UK adults seeing their GP because of chest pain each year will not receive a diagnosis, and their records will state they have unattributed chest pain. Heart-related chest pain can be difficult for GPs to diagnose because the symptoms may be put down to other commonly associated conditions, and blockages to the smallest blood vessels supplying the heart are too small to see with traditional tests. The researchers now aim to identify common factors in patients who did go on to suffer a heart attack.

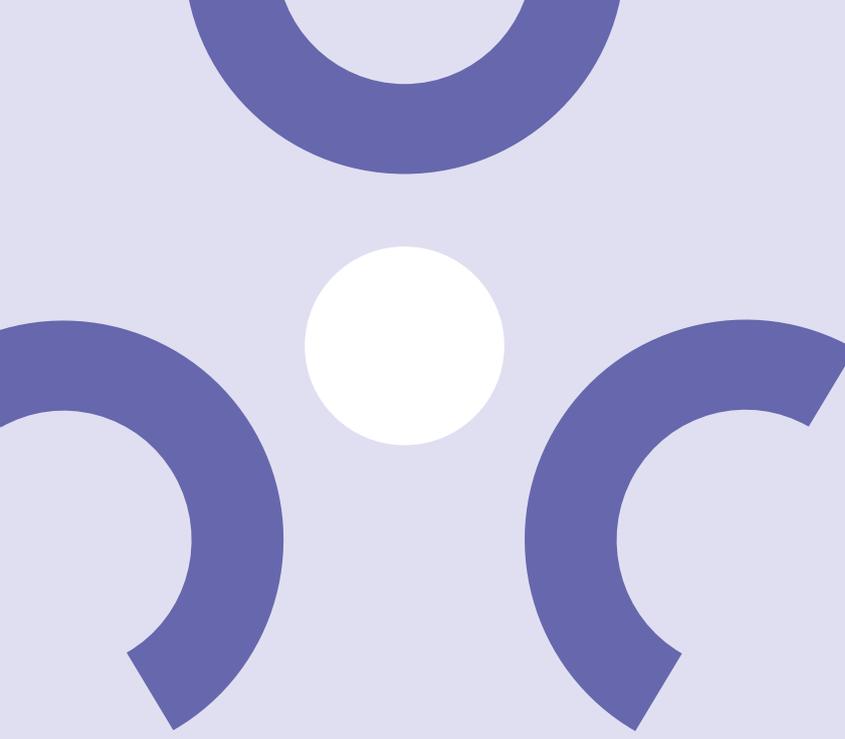


This information will help GPs identify those patients with unexplained chest pain who are most at risk so they can be offered medication or further support at an earlier stage to reduce likelihood of a future heart attack. [Read our news story on unexplained chest pain.](#)



World-first CJD treatment shows promising early results

Creutzfeldt–Jakob disease (CJD) is a rare and fatal disease that causes brain damage and for which there is currently no licensed treatment. Most patients die within a few months of diagnosis. In March 2022, a first-in-human treatment designed specifically for CJD showed encouraging early results that may contribute to the development of new treatments for other neurodegenerative diseases. Researchers at the [NIHR UCLH Biomedical Research Centre](#) developed a monoclonal antibody that was given to six patients with CJD. Given the small number of patients treated, researchers say the findings should be regarded as preliminary and further studies are needed to draw more comprehensive conclusions. [Read our news story on Creutzfeldt–Jakob disease treatment.](#)



Partnering with patients, service users, carers and communities to improve the relevance, quality and impact of our research

Shaped through collaboration with patients, service users, carers and communities, NIHR's research is driven by people, who contribute at every stage of the research pathway and play a vital role by volunteering to participate in studies and trials. We always value and recognise people's contributions, so all perspectives and experiences are heard and acted upon.

NIHR survey reveals public attitudes to health research following coronavirus

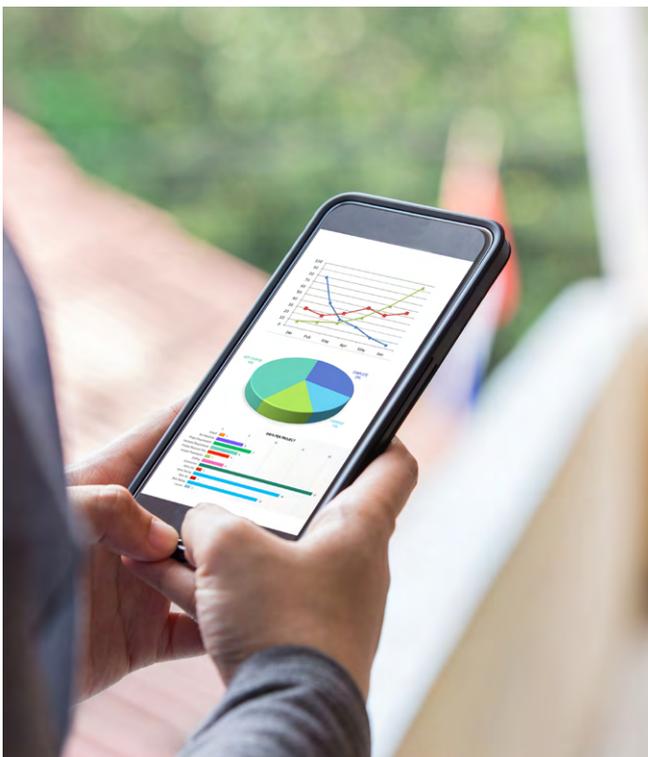
A survey commissioned by the NIHR to mark International Clinical Trials Day in May 2021 revealed a significant disconnect exists between people's perceptions of the importance of coronavirus research, and their understanding of where it happened and who took part. The YouGov survey asked respondents about their understanding of coronavirus research and the role it has played in tackling the pandemic. It showed that most UK adults believed health research played a very (71%) or fairly (19%) important role in the coronavirus pandemic. 29% of respondents said they trusted health research more now than before the pandemic began, and just over a quarter (27%) said they were now more likely to take part in health research. The survey also identified that there are significant generational differences in attitude to coronavirus research across a range of issues.

[Read our news story on attitudes to health research following coronavirus.](#)



27%

said they were now more likely to take part in health research



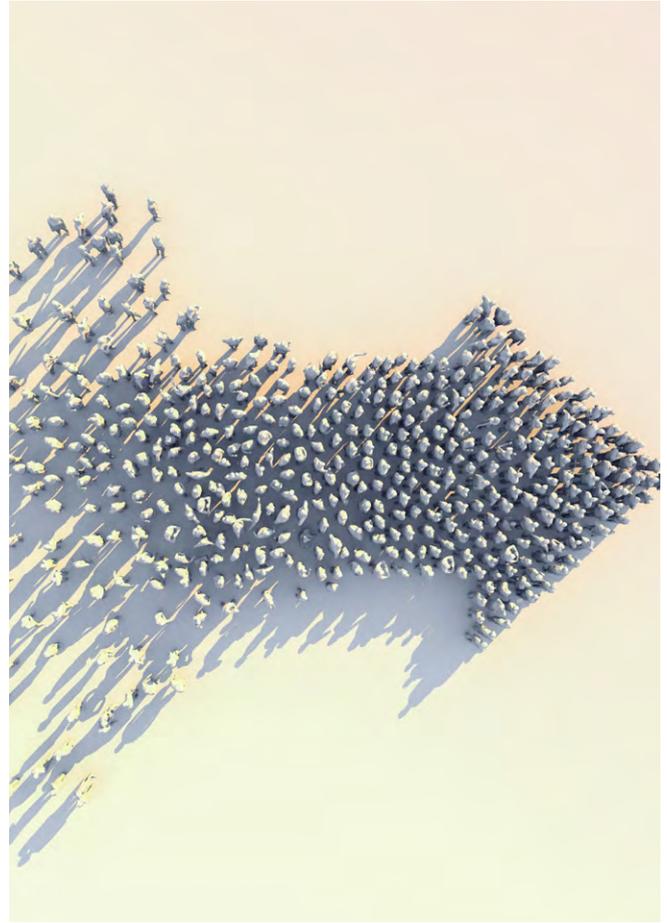
Participation in NIHR Clinical Research Network studies doubles in pandemic year

NIHR Clinical Research Network (CRN) annual statistics released in July 2021 showed the [extraordinary impact the organisation made in delivering vital clinical research](#) during the 2020/21 pandemic. An unprecedented number of participants took part in NIHR CRN-supported studies in the twelve months between April 2020 and March 2021, with participation levels nearly double the previous year. Over this period, a total of 1,390,483 participants enrolled in CRN portfolio studies in England - up from 732,176 in 2019/20.

[Read our news story on record breaking participation.](#)

NIHR's next steps for working in partnership with patients and the public

NIHR has long led the way in partnership working with patients and the public to shape and conduct research in health and social care. Jeremy Taylor, NIHR Director for Public Voice, outlined in an article how we plan to build on our work in this area following a series of workshops with the research community and public contributors. Initiatives include developing an improvement programme, for example encouraging the research community to work more inclusively with a diverse range of people and communities, and prioritising public partnerships to build long-term, equitable relationships with communities as the foundation for a shared approach to research. [Read about the NIHR's plans for working with patients and the public.](#)



94%

would consider taking part again

High numbers of research participants believe their contribution is valued by researchers

Results from the 2020/21 NIHR Clinical Research Network Participant in Research Experience Survey (PRES) published in October 2021 showed that 93% of participants felt the contribution they made to research through taking part was valued by the researchers and study teams. In addition, respondents highlighted the professionalism, knowledge and friendliness of the research teams as contributing to their positive experiences of taking part in research, with 98% of respondents saying they felt they were treated with courtesy and respect; and 94% of respondents said they would consider taking part in research again. [Find out more about the NIHR CRN Participant in Research Experience Survey.](#)

High numbers of patients and public involved in NIHR's work report a positive experience

Complementing the aforementioned PRES report, a separate survey of public contributors involved in NIHR's work reported in January 2022 that patients, carers and the public are involved across many different stages of research, and the majority of people report a positive experience. 79% of people involved with the NIHR felt satisfied or very satisfied and respondents welcomed the opportunities to be involved in the NIHR's work and research, which they felt was important and much needed. In addition, a majority of survey respondents (63%) felt their involvement had made a difference, with a further 19% stating it had sometimes made a difference.

[Find out more about the NIHR survey of public contributors.](#)



79%

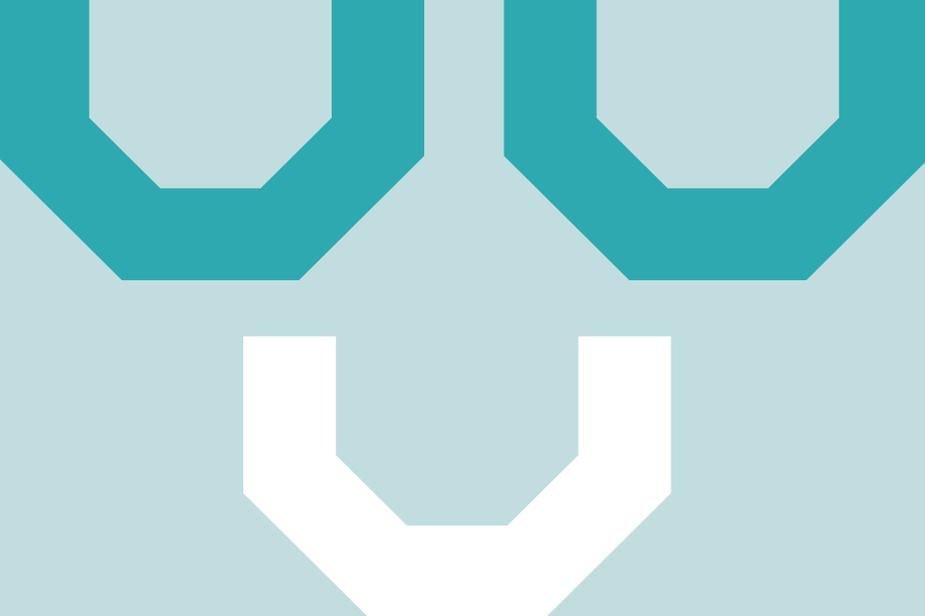
of people involved with the NIHR felt satisfied or very satisfied



NIHR unites with health and social care leaders to improve public involvement in research

Funders, regulators and research organisations who play an important role in UK health and social care research came together in March 2022, working with members of the public, to sign up to a bold new shared commitment to improve public involvement in research. The [statement](#) was co-produced with members of the public, patients and service users. This shared commitment aims to address the gaps identified in leadership and communication by bringing patients and public contributors and leaders in health and social care together to set out the importance of public involvement in all health and social care research.

[Read our news story of our new shared commitment to improve public involvement in research.](#)



Attracting, training and supporting the best researchers to tackle complex health and social care issues

As the nation's largest funder of health and social care research training, NIHR provides career pathways for clinical academics and non-clinical scientists as well as opportunities for nurses, midwives, allied health and social care professionals to integrate research with clinical practice. Building the requisite research capacity and capability enables us to best respond to health and social care challenges.

NIHR launches Local Authority Short Placement Award for Research Collaboration

For the first time, NIHR is supporting individuals working in local authority settings to undertake short placements within the NIHR, as well as providing opportunities for eligible NIHR Academy Members to undertake short placements within a local authority setting. Announced in September 2021, the Local Authority Short Placement Award for Research Collaboration (LA SPARC) scheme allows individuals to develop skills and capabilities to co-create meaningful research that is better able to inform practice and policy. It is hoped that this engenders enhanced partnerships and



collaborations between the NIHR and local authority settings, as well as providing useful career development opportunities for the individuals involved. [Read our news story on our local authority short placement award.](#)



NIHR launches a UK-wide programme to develop future population health research leaders

In October 2021, the NIHR launched the NIHR Population Health Career Scientist Award (PHCSA), a UK-wide initiative to enable senior researchers to make the next step to Reader/Professor level in their host institutions.

The PHCSA forms part of a series of initiatives and investments by NIHR to enable local governments to become more research active. This new award will help answer the most important research questions facing decision-makers at local and national levels to improve health and reduce inequalities. Developing an understanding of how to tackle health inequalities and wider disadvantages is both a research and a policy imperative for this scheme. [Read our news story on our programme to develop population researchers.](#)



Census reveals at least 7,469 research nurses and midwives across the UK and Ireland

There are at least 7,469 research nurses and midwives across the UK and Ireland working within all areas of healthcare, a [landmark new census](#) initiated by a group of NIHR 70@70 Senior Nurse & Midwife Research Leaders revealed in February 2021. The census, incorporating responses from research nurses and midwives across all four UK nations and the Republic of Ireland, also revealed that nurses and midwives are working at every level in healthcare from Bands 5 – 9 in the UK, and from staff nurse to Directors of Nursing or Midwifery in the Republic of Ireland. [Read our news story on UK research nurses and midwives.](#)



50%

of patients achieved significant benefits from the Feeling Safe programme

Feeling Safe therapy offers new hope for patients with psychosis

A clinical trial funded by the NIHR demonstrates the life-changing potential of a therapy for patients with psychosis, by supporting their return to everyday activities. The trial results, published in February 2022 in [The Lancet Psychiatry](#), show that the new Feeling Safe programme is the most effective psychological treatment for persecutory delusions (unfounded, strong beliefs that other people intend to harm you).

In the study, 50% of patients achieved significant benefits from the Feeling Safe programme, and a further 25% made moderate gains. This new therapy has the potential to transform quality of life, given the deep impact of persecutory delusions on health and wellbeing. [Read our news story on feeling safe therapy.](#)

Study points to greater patient choice in broken ankle treatment the Journal of Clinical Investigation

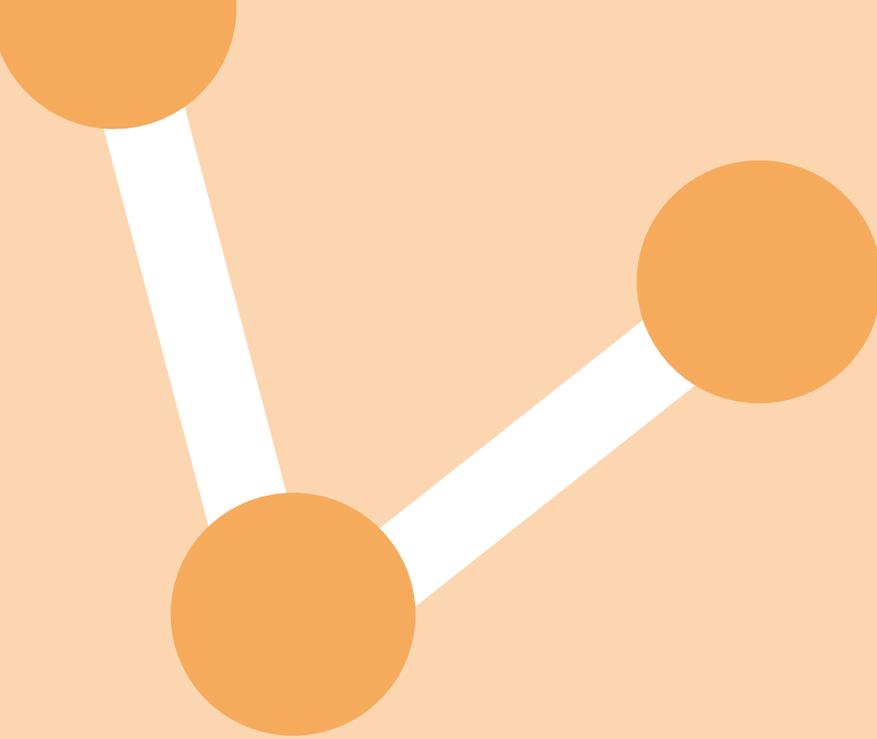
A study funded by the NIHR has discovered little difference in the clinical effectiveness of two treatments for ankle fractures, the traditional cast and the removable brace. The researchers behind the Ankle Injury Rehabilitation (AIR) Trial at Warwick Clinical Trials Unit conclude therefore that the choice of treatment method should be down to cost and patient preference. The trial was led by one of our [NIHR Career Development Fellow Professors, Rebecca Kearney](#), and the findings were published in July 2021 in [The BMJ](#). [Read our news story on broken ankle treatment.](#)



Premature birth could be predicted sooner with test for bacteria

Mothers at risk of premature birth could be identified sooner in pregnancy than is currently possible by looking for specific bacteria and chemicals in their cervicovaginal fluid, a study led by researchers at King's College London reported in August 2021. For the first time, this study found that a specific bacterium limits the risk of early premature birth, meaning babies born between 32 and 36 weeks, which the researchers hope will lead to new preventative therapies. The findings showed that risk of premature birth could be accurately identified much earlier in pregnancy than current tests allow, creating the opportunity for medical or surgical treatments that aren't possible in late pregnancy. Dr Natasha Hezelgrave was part of the team carrying out this study, which formed part of Dr Hezelgrave's [NIHR Doctoral Fellowship](#). The study is published in the [Journal of Clinical Investigation](#). [Read our news story on predicting premature birth.](#)





Collaborating with other public funders, charities and industry to shape a cohesive and globally competitive research system

Working in partnership with the public sector, medical research charities and the life sciences industry, NIHR has helped create an integrated research system that both meets the needs of patients and the public and positions the UK as a globally attractive destination for high-quality clinical research.

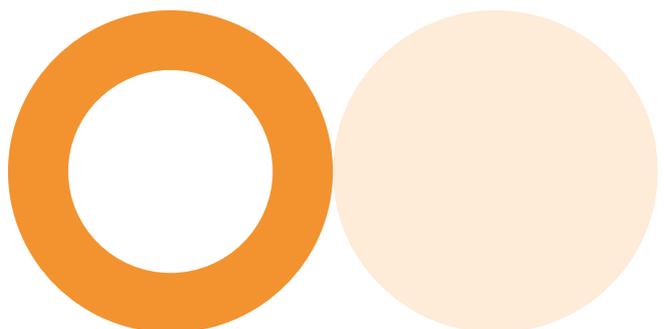
NIHR partners with Diabetes UK to fund vital research into preventing complications in people with type 2 diabetes

In May 2021, NIHR joined forces with Diabetes UK to fund a new £2.1 million project to prevent cardiovascular disease in people with type 2 diabetes who have had a diabetic foot ulcer. With funding from [NIHR Programme Grants for Applied Research](#) and [Diabetes UK](#), Professor Kamlesh Khunti and his team at the University of Leicester are using health records to find out how many people with type 2 diabetes who also have a diabetic foot ulcer will go on to experience heart disease or stroke. The team are also exploring whether factors such as age, ethnicity, socioeconomic status or geographical location might put people at higher risk. [Read our news story on funding vital diabetes research.](#)



New wave of AI technologies in £36 million funding boost

Thousands of patients are set to benefit from artificial intelligence (AI) technologies thanks to £36 million for new research, delivered in partnership with NHSX. Technology that can detect cancer and an app that provides AI mental health support are among 38 newly funded innovations to be tested across the health service to help speed up diagnosis and improve care. [Read our news story on our funding boost for AI technologies.](#)



Strategic partnership to strengthen understanding of nutrition and cancer

Dietary factors play an important role in the prevention, development, treatment and survival of cancer. However, currently, there is a gap in the provision of cancer-related nutritional information for those who need it most. In October 2021, the leading charity World Cancer Research Fund and the NIHR Cancer and Nutrition Collaboration announced a strategic partnership focused on delivering consistent, credible information and training about the links between cancer and diet to a greater number of people, including health professionals, patients and those looking to reduce their risk of cancer. [Read our news story on The NIHR Cancer and Nutrition Collaboration.](#)



UK clinical research ecosystem continues to build on learnings from COVID-19 research

In December 2021, The UK clinical Research Recovery, Resilience and Growth (RRG) programme published an update detailing key milestones achieved in the six months since the publication of [“The Future of UK Clinical Research Delivery”](#) 2021/22 implementation plan. NIHR, one of the key delivery partners of the RRG Programme, has led and is contributing to several important pieces of work including: leading a managed approach to the recovery of the UK clinical research portfolio; creating more capabilities for the Be Part of Research website; and launching a new UK-wide professional accreditation scheme for Clinical Research Practitioners and an Associate Principal Investigator scheme. [Read our news story on building on learnings from COVID-19 research.](#)

New study explores how pollutants indoors impact child health

Pollutants from wood-burning stoves, clothing, cleaning products and cooking can build up indoors, especially over winter, alongside outdoor pollution such as traffic fumes. In the UK, people spend an average 90% of their time indoors, so research in this area is key to understanding the connection between pollution and human health. To investigate this, NIHR announced in March 2022 that it is co-funding a major new study with UK Research and Innovation (UKRI) to discover how everyday pollutants impact the development and health of fetuses and children called RESPIRE. This will be the first to track how the function of different organs such as the lungs and brain are impacted by pollution in the home, work or other indoor places we visit.

[Read our news story on indoor pollutants and child health.](#)



In the UK, people spend an average of

90%

of their time indoors



Competition to develop new Clinician Researcher development programmes

In April 2021 NIHR, in partnership with the Academy of Medical Royal Colleges (AoMRC), invited Higher Education Institutions to apply for funding to develop a Postgraduate Certificate focused on the practical elements of clinical research. This qualification forms part of the new NIHR-AoMRC Clinician Researcher Credentials Framework will provide clinicians with the necessary knowledge, skills and confidence to begin to contribute to, and develop towards leading, clinical research locally. The introduction of these credentials will increase the capacity for research across the workforce and enable the NHS to deliver high-quality clinical research in everyday clinical settings. [Read our news story on research development programmes.](#)



Funding applied global health research and training to meet the needs of the poorest people in low and middle-income countries

NIHR works closely with the global health research community, funding applied research and training to benefit the poorest people in more than 50 low and middle-income countries (LMICs). Sharing our learning and knowledge enables us to build research and development capacity and capability in both the UK and LMICs.

Life-changing research study led by African midwives is helping reduce stillbirths

Globally, 2 million stillbirths occur every year. Sub-Saharan Africa accounts for 64% of these, with women eight times more likely to experience a stillbirth than those in high-income countries like the UK. A life-changing four-year research programme, funded by the NIHR's Global Health Research Programme, is helping to tackle the stillbirth crisis in sub-Saharan Africa. [The NIHR Global Health Group on Stillbirth Prevention and Management in Sub-Saharan Africa](#), established in 2017, is the first programme of its kind aimed at reducing stillbirths. This midwife-led research partnership aims to address a critical lack of research around stillbirth, identify best practices, and support for families who endure stillbirths in Kenya, Malawi, Uganda, Tanzania, Zambia and Zimbabwe. [Read our news story on how research led by African midwives is reducing stillbirths.](#)



Globally

2 million

stillbirths occur every year



UK and Canada team up to support youth mental health projects worldwide

The COVID-19 pandemic has increased mental health challenges worldwide, yet only 0.1% of global development assistance for health goes towards youth mental health. In April 2021, NIHR announced that it has teamed up with partners in the [Global Mental Health Program](#) to launch the first cohort of 18 seed projects to address mental health literacy and provide youth-friendly services for under-served young people aged 10 to 24, in low and middle-income countries. The 18 innovative projects will enhance community-based mental health care for young people in 14 countries: India, Uganda, Kyrgyzstan, Ukraine, Kazakhstan, Iraq, Kenya, Colombia, Lebanon, Democratic Republic of Congo, Mexico, Cameroon, Nigeria and Rwanda. [Read our news story on supporting youth mental health projects worldwide.](#)

One-stop clinics for HIV, diabetes and hypertension care cut patient health costs in Africa

The burden of non-communicable diseases has risen rapidly in Africa. Integrating the care of HIV, diabetes, and hypertension into a 'one-stop clinic' can reduce the costs for both patients and healthcare services, according to a new NIHR-funded global health research study published in September 2021 in [BMC Medicine](#). The research team from the [NIHR Global Health Research Group on prevention and management of non-communicable diseases and HIV-infection in Africa](#), (RESPOND-Africa consortium) led by The Liverpool School for Tropical Medicine with partners in Tanzania and Uganda, found that integrating these services with existing high-quality HIV care services has resulted in greatly improved patient outcomes and cost savings. [Read our news story on one-stop clinics in Africa.](#)



New research could help boost the growth of clean cooking in sub-Saharan Africa

NIHR-funded researchers from the [NIHR CLEAN-Air \(Africa\) Global Health Research Group](#) based at the University of Liverpool have produced new evidence that could help rapidly boost efforts to scale up the adoption of clean cooking with liquefied petroleum gas (LPG) in sub-Saharan Africa. Published in November 2021 in [Nature Energy](#), this new study suggests that supply-side interventions such as shortening the distance to LPG retail points and improving access to multi-burner LPG stoves could help increase the consumption of clean cooking fuels compared to higher polluting fuels such as charcoal and firewood, for the benefit of public health, gender equality and environmental protection. [Read our news story on research to help adoption of clean cooking in Africa.](#)



One in seven cancer patients around the world have missed out on potentially life-saving operations during COVID-19 lockdowns

In April 2021, a new study reported that planned cancer surgery was affected by lockdowns regardless of the local COVID-19 rates at that time, with patients in lower-income countries at the highest risk of missing their surgery. Data was analysed from the 15 most common solid cancer types in 20,000 patients across 466 hospitals in 61 countries. It found that patients awaiting surgery for more than six weeks during full lockdown were significantly less likely to have their planned cancer surgery. Frail patients, those with advanced cancer, and those waiting for surgery in low and middle-income countries were all less likely to have the cancer operation they urgently needed. The study was funded by the NIHR Global Health Research Programme and published in [The Lancet Oncology](#).



[Read our news story on cancer patients missing life-saving operations due to COVID-19 lockdowns.](#)



£19.3 million announced to fund global health research into multiple long-term conditions

In November 2021, NIHR awarded nearly £20 million through its global health funding programme to help tackle multiple long-term conditions. The awards, made through the NIHR's [Research and Innovation for Global Health Transformation programme](#), will be shared between four projects that will examine clusters of chronic conditions that represent a significant disease burden in low and middle-income countries. Research will take place in Pakistan and sub-Saharan Africa. These chronic conditions can particularly affect children and adolescents in these countries due to the effects of poverty, hunger and infectious diseases. [Read our news story on new Global Health Research funding for multiple long-term conditions.](#)

Financial Summary

NIHR spend increased by around 8% in 2021/22 from 2020/21, largely due to additional funding secured at the Spending Review in 2020. This allowed NIHR to make additional investments in faculty, programmes and infrastructure, as well as investing over £10m in a cross-NIHR digital strategy. NIHR continued to invest heavily in research into COVID-19, with £92m spent on a range of studies, many in partnership with UKRI. The Vaccines Task Force continued to support NIHR research into COVID-19, providing over £45m of additional budget.

Area	2021/22
Research programmes	Spend (£m)*
AI (including AI i4i and AI Multiple long term conditions call)	14.0
Efficacy and Mechanism Evaluation	18.6
Excess treatment cost funding (part-funded by NHS England)	6.6
Health Protection Research Units	10.7
Health Services Delivery & Research	29.8
Health Technology Assessment - Commissioned	40.0
Health Technology Assessment - Researcher Led	36.7
Health Technology Assessment - Themed	18.2
Invention for Innovation	23.6
INVOLVE/Centre for Engagement and Dissemination	2.7
NHS Blood and Transplant Units	3.5
NIHR Innovation Observatory	2.1
Policy Research Programme	31.2
Programme Grants for Applied Research	39.4
Public Health Research	23.6
Research Capability Funding	51.0

* Please note the figures in the financial summary are provisional and are unaudited

Research for Patient Benefit	19.8
Schools: Primary Care, Public Health and Social Care Research	15.7
Systematic Reviews (Cochrane and TARs)	13.2
Other, including legacy programmes and management not attributed to specific programmes	26.5
Contributions to UKRI research programmes	
ESRC-NIHR Dementia Research Initiative	2.9
MRC-NIHR Tackling Multimorbidity at Scale Initiative	2.1
MRC-NIHR Methodology Research Programme	1.0
Other contributions to UKRI research programmes	0.6
Contributions to other research programmes	
UK Prevention Research Partnership	2.1
Contributions received for NIHR research programmes	
Contribution from MRC: Efficacy and Mechanism Evaluation	(10.6)
Contributions from the Devolved Administrations for access to NIHR Programmes (HTA, HS&DR, PHR, EME)	(23.6)
Research Programmes total (£m)	401.4

Infrastructure	Spend (£m)
Applied Research Collaborations	34.8
Biomedical Research Centres	181.3
Clinical Research Facilities	23.9
Clinical Research Network	358.0
Clinical Trials Unit Support Funding	3.3
Experimental Cancer Medicine Centres	3.3
Medtech and In-vitro Diagnostics Cooperatives	3.4

Patient Safety Translational Research Centres	3.5
Research Design Service	11.7
Other (including management)	8.9
Infrastructure total (£m)	632.0

Faculty	Spend (£m)
70@70 Senior Nurse and Midwife Research Leader Programme	1.9
Academic Clinical Fellows	42.7
Academy Fellowships (including legacy training awards)	33.5
Clinical Academic Research Partnerships (via UKRI)	1.2
Clinical Lectureships	23.4
Research Professorships	7.5
Senior Investigators	3.2
Other (including management and clinical academics)	7.2
Faculty total (£m)	120.7

Systems	Spend (£m)
Information systems that enable research	11.9
Knowledge services and data	1.4
Systems total (£m)	13.3

COVID-19	Spend (£m)
COVID-19 studies (including those funded by the Vaccines Task Force and delivered through UKRI)	92.0
COVID-19 (£m)	92.0

Total NIHR spend excluding Official Development Assistance (£m)	1259.4
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Official Development Assistance (ODA)	Spend (£m)
Antimicrobial Resistance (AMR) Operational Research (World Health Organization TDR Partnership)	2.1
Early Career Grants Scheme (Royal Society of Tropical Medicine and Hygiene Partnership)	0.8
European and Developing Countries Clinical Trials Partnership - Phase II	1.8
Global Alliance for Chronic Disease (Medical Research Council Partnership)	1.0
Global Effort on COVID-19 (GECO) Health Research (Medical Research Council Partnership)	5.2
Global Maternal and Neonatal Health (Medical Research Council Partnership)	1.1
Global Mental Health Partnership (Grand Challenges Canada Partnership)	3.3
Joint Global Health Trials Initiative (Medical Research Council, Wellcome and FCDO Partnership)	4.7
NIHR Global Health Policy and Systems Research Programme	2.2
NIHR Global Health Research Groups	16.7
NIHR Global Health Research Units	9.4
NIHR Global Research Professorships	2.1
NIHR Research and Innovation for Global Health Transformation	7.9
NIHR-Wellcome Partnership on Major Awards, International Fellowships and Research to Policy Uptake Initiative	3.9
Research for Adolescent Health in Low and Middle Income Countries (Medical Research Council Partnership)	2.0
Research for Health in Humanitarian Crisis (Elrha Partnership)	0.5
Other	0.4
Total ODA (£m)	65.0

Total NIHR spend including Official Development Assistance (£m) 1,324.4

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