

# Priorities for Research in Multiple Conditions in Later Life (Multi-Morbidity): Findings from a James Lind Alliance Priority Setting Partnership

Parker et al. (2019)  
<https://doi.org/10.1093/ageing/afz014>

## For which topic were research priorities identified?

multiple conditions in later life (multi-morbidity)

## In which location was the research priority setting conducted?

Europe - United Kingdom

## Why was it conducted at all?

Multiple conditions in later life (multi-morbidity) is a major challenge for health and care systems worldwide, is of particular relevance for older people, but has not (until recently) received high priority as a topic for research. The implications of high and increasing prevalence of multi-morbidity challenge researchers, clinicians and policymakers and have stimulated considerable debate. This has emphasised conceptual and practical issues such as, complexity, evidence gaps, challenges of obtaining robust evidence, impact and relationship with specific conditions and implications for service delivery. Therefore, the mechanisms and consequences of multimorbidity are key issues for research in an ageing population, for older people and their carers.

## What was the objective?

to identify the top 10 research priorities from the perspective of older people, their carers, and health and social care professionals

## What was the outcome?

a ranking list of 10 research questions

## How long did the research prioritization take?

August 2017 - April 2018

## Which methods were used to identify research priorities?

JLA method

## How were the priorities for research identified exactly?

Step 1: setting up PSP: steering group established, stakeholders and partner organizations identified. Step 2: collecting research priorities: survey asking about treatment uncertainties in respect of symptoms, day to day life, medication and other aspects of treatment and support, additionally interviews with digitally excluded older people and carers conducted. Step 3: data processing: thematic analysis, combining similar responses, grouping responses together. Step 4: interim ranking: survey and interviews asking participants to list the 10 questions they thought were the most important, top 10 questions from each stakeholder group merged into the final list of 21 questions. Step 5: final prioritization: workshop with nominal group technique: three rounds of facilitated discussion and prioritization

## Which stakeholders took part?

Older people, their carers, and health and social care professionals. Survey: 354 participants (162 older people and carers, 192 health professionals). Interim ranking: 138 participants; 27 older people, 29 carers and 82 health and social care professionals. Workshop: 4 people aged over 80, 5 carers, and 10 health professionals (2 GPs, two geriatricians, a dentist, a dietician, a nurse, and occupational therapist and a physiotherapist).

## How were stakeholders recruited?

The survey was advertised widely online through social media, academic, professional and charity network. Potentially eligible participants were identified with the help of community staff with responsibility for their care.

## Were stakeholders actively involved or did they just participate?

Stakeholders not only participated but were also actively involved in the research prioritization process: They were part of a steering group. The steering group consisted of 24 members. The members oversaw the whole process.