The urgent challenges we now face in health can only be met by intelligent, co-ordinated responses, informed by applied research that builds the evidence base for effective health practice focused on public need.”

With the National Institute for Health Research, Policy Research Units, and other partnerships, we are developing a research infrastructure that taps into world-class academic resources, and the London School of Hygiene & Tropical Medicine is a key partner in these initiatives.

Through its collaborative work with the National Health Service, Public Health England, National Institute for Health and Care Excellence, local government and NGOs, the School is making many vital contributions to public health, from laboratory research in infectious diseases to advising on implementation of interventions, and health service and policy evaluations.

The London School of Hygiene & Tropical Medicine is a key partner in this work, and is helping national and local governments, universities and hospitals strengthen their research and capacity, and exchange knowledge and expertise.

I am honoured to be associated with this world-leading institution, and I know from personal experience how dedicated the School’s staff, students and alumni are – conducting research and taking practical action that saves lives and improves health worldwide.

Foreword

Although more of the world’s seven billion people are living longer and healthier lives than ever, we face many urgent challenges. The inexorable tide of non-communicable diseases, the emergence of antibiotic-resistance, the threat of new pandemics, and the health impacts of conflict and climate change, are all “wicked problems” that impose severe burdens on health services, systems and societies, locally and globally.

The School’s mission is to help address these challenges, through our research, education and innovation. To achieve this, we work collaboratively with hundreds of partners all over the world, ranging from governments and international agencies to local clinics and community groups.

This report provides a brief overview of the School’s recent work, and a glimpse of the future. It has been a year of healthy growth across all areas of activity, and many achievements by individuals and the School as a whole. For example, our postgraduate programmes – both London-based and distance learning – were commended by the UK’s Quality Assurance Agency for Higher Education, and in October the School was named by the compilers of a global league table as the world’s leading research-focused graduate school – which reflects the growing recognition our work is receiving.

I hope you will take a few minutes to read this review, and that you find it enjoyable and inspiring.

Our vision is to be a world-leading school of public and global health, working closely with partners in the UK and worldwide to address contemporary and future critical health challenges.

Our mission is to improve health and health equity in the UK and worldwide; working in partnership to achieve excellence in public and global health research, education and translation of knowledge into policy and practice.

World no. 1 research-focused graduate school

In 2013, the School was named the world’s top research-focused graduate school in the Times Higher Education world rankings.

In 2009, the School became the first academic institution in the world to be awarded the Gates Award for Global Health by the Global Health Council.

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Making an impact: now and for the long term
Peter Piot, Director

As a postgraduate and research institution we are not included in most university league tables. However, this year the School was named the world’s ‘leading research-focused graduate school’ by Thomson Reuters and Times Higher Education. As well as achieving the best overall score, coming top of a table ahead of elite global institutions, we were ranked particularly highly for indicators including international outlook, research and citations.

Impact is long-term and notoriously hard to measure. This year, the new Research Excellence Framework has required us to evaluate and document the wider societal benefits of our work. Although the process has been time-consuming, it is a good discipline for academics to assess and communicate the many benefits of our work, as it is only by so doing that we can win wider public understanding and support, as well as sustained funding.

In October this year, I attended a centenary anniversary celebration for the UK Medical Research Council at the Royal Society, at which School researchers Austin Bradford Hall, Jerry Morris and Brian Greenwood were among distinguished MRC-supported scientists of the past 100 years. This highlighted how we have contributed to the excellence of British science, and thanks to the quality and enterprise of our staff, research at the School continues to flourish and grow.

Income from research grants increased over 10% this year to £79 million, as set out in on page 23. Of this total, UK, EU and US government departments and agencies contributed nearly half of this total, with another 45% coming from charitable sources, including the Wellcome Trust and the Bill & Melinda Gates Foundation.

This year, we received an excellent report on the quality of our education programmes from the UK Quality Assurance Agency, and in the autumn achieved a significant increase in student enrolments, with numbers of London-based students 14% up on last year, reversing a dip in 2012.

While our ability to attract funding and the best staff and students is vital, these outcomes cannot be ends in themselves. Our success is rightly measured by the outcomes of our research, teaching, knowledge transfer and capacity-building activities and the positive impact these have on society and people’s lives.

Evidence of such outcomes is manifold: around two thousand papers written or co-authored by staff and research students over the year, with significant findings ranging from new discoveries in pathogen molecular biology, to vaccine development, water quality and child health, cancer survival, HIV and tuberculosis infections, transport and health, health services reform, medical tourism and sexual attitudes. As well as being widely cited in high-impact journals, many of these findings have achieved global media coverage.

While our students have continued to excel academically and on graduating, to secure excellent jobs and placements in their chosen fields.

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In London, we joined UCLPartners, contributing to the successful bid for a new Academic Health Sciences Centre, and continued to work with University College London on the development of the Bloomsbury Research Institute as a world-leading centre for infectious diseases. Our knowledge transfer and innovation activity resulted in the development of new diagnostic tools and the launch of our commercialisation vehicle, CharisT Innovations Limited.

In October, the Oxford Martin Commission for Future Generations, of which I am a member, launched its report entitled Now for the Long Term. This calls for governments and institutions to abandon short-termism, address deep persisting inequalities, and shift priorities towards longer-term challenges that will shape our futures – hopefully a commitment which will also be a main theme of the post-2015 agenda for sustainable development. Translating such long-term vision into daily practice is very challenging, but vital if we are to avert the deep and complex crises we now face.

As a society we underestimate the scale of challenges such as the impacts of climate and demographic change, migration and globalisation, the threat of antibiotics and emerging epidemics, over-consumption and the tsunami of chronic diseases. All health systems are now struggling, they are facing new epidemiologic, geographic and technological challenges which leave them overburdened and riddled with structural inefficiencies and perverse incentives. We have to reform, innovate and work far more ‘upstream’, scaling up prevention and public health policy solutions.

Above all, we must resist the fatalistic attitude that ‘nothing can be done’ about the big challenges. We need evidence-informed optimism to persistently ask better questions and find better answers. This effort requires political science and economics as well as basic science, patient care and epidemiology, speaking truth to power, encouraging and enabling our leaders to think and act for the long term.

Honours and awards 2013
• Anne Mills elected Fellow of the Royal Society.
• Polly Roy and Brendan Wren receive Wellcome Trust senior investigator awards, and Alex Mold wins junior investigator award.
• Neil Pearce, Andrew Prentice and Anthony Scott elected Fellows of the Academy of Medical Sciences.
• Andy Hall received a knighthood in the Queen’s birthday honours’ list.
• Clare Gilbert wins Prize Vision Award in recognition of her work on prevention of childhood blindness.
• Nick Black awarded a Career Achievement Prize in recognition of his contribution to advancing the use of patient reported outcome measures and along with Ben Goldacre, named in the inaugural Clinical Leaders list by Health Service Journal.
• Peter Piot awarded the Heibye Naguchi Africa Prize for Medical Research by Japan’s Prime Minister Shinzo Abe (right).

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Improving health worldwide: sub-Saharan Africa

T

hanks to painstaking medical research over the past few decades, millions of lives have been saved and health improved across Africa, but millions more people continue to suffer and die from preventable and treatable conditions: not only malaria, AIDS and tuberculosis, but undernutrition, diarrhoea, the complications of childbirth and, increasingly, hypertension, diabetes, cancer and cardiovascular diseases. We are also confronted by the emerging threats of new infections and pandemics. The School is engaged in collaborative research and teaching with many partners across the region. These links have been further enhanced by our participation in a growing number of international research consortia, which strengthen the capacity of African institutions to carry out world-class research.

Selected projects and partnerships

East Africa
National Institute for Medical Research, Tanzania
Mwanza Intervention Trials Unit
Human papillomavirus vaccine trials – sub-Saharan Africa
Program for resistance, immunology, surveillance and monitoring (PRISM)
Good School Toolkit to prevent violence against children
Treating child sickle cell disease
Improving newborn survival in southern Tanzania (INSIST)
Treatment of HIV-positive patients with tenofovir disoproxil fumarate
Ciclosporin in leprosy reactions clinical trial

West and Central Africa
Medical Research Council Gambia Unit
Centre MURAZ – Burkina Faso
GENIWADE Project – parasite population genomics and functional studies
Programme for improving mental health care (PRIMH)
Improve the evidence base on disability and health
IDEAS for maternal and newborn health
Radio health messages to reduce child mortality
Community-based prevention of non-communicable diseases

Southern Africa
Youth-friendly health services – HIV prevention clinics
Zambia AIDS related tuberculosis project (ZAMBART)
Sport and HIV prevention
Human papillomavirus in Africa research partnership (HARP)
Zimbabwe study for enhancing testing and improving treatment of HIV in children (ZENITH)
CONCORD Programme – surveillance of cancer outcomes
Nutritional support for Africans starting antiretroviral therapy (NUSAART)
VISION 2020 Links Programme – eye health

Malawi Epidemiology and Intervention Research Unit
The Karonga Prevention Study was established in Malawi in 1979, and has since expanded to include tuberculosis, HIV, demography, and most recently, cardiovascular disease and diabetes, as the epidemic of non-communicable diseases spreads across Africa. Today, a uniquely detailed database links work over more than three decades on around 300,000 people. A new site recently opened in Lilongwe, and the combined programme has been brought together as the Malawi Epidemiology and Intervention Research Unit (MERU), with Professor Mofat Nyirenda appointed director in July 2013.

African Meningococcal Carriage Consortium
African SNOWS Consortium: Scientists Networked for Outcomes from Water and Sanitation
African Meningococcal Carriage Consortium (AfriMEN)

Capacity strengthening consortia
Artemisinin Combination Therapy (ACT) Consortium
Consortium for health policy & systems analysis in Africa (CHEPSAA)
Malala capacity development consortium (MCDC)
South African consortia research for excellence (SACORE)
Southern African centre for infectious disease surveillance (SACIDS)
Tackling the structural drivers of HIV (STRIVE)
Training health researchers into occupational excellence in East Africa (TREWE)

These pages show just a few of more than 50 projects and partnerships across Africa. For more details, please read our 2013 regional publications. These are available on our website, as well as a map of our work in over 100 countries worldwide www.lshtm.ac.uk/aboutus/introducing/map

Protecting children through Seasonal Malaria Chemoprevention
Work by School researchers and partners in Senegal, Mali, Burkina Faso, Gambia and Ghana over the past decade has led to the introduction of a new prevention strategy known as Seasonal Malaria Chemoprevention. Children without symptoms of malaria receive a dose of an antimalarial drug combination once a month during the high malaria transmission season. In 2012/13, this was incorporated in a pilot programme under the National Malaria Control Programmes of each country.

These have led to a dramatic reduction in the incidence of all cases of meningitis by 94% and in deaths due to meningococcal disease by 99%.

Results published in September 2013 showed that vaccination of almost 2 million people in Senegal, Mali, Burkina Faso, Gambia and Ghana over the past decade has led to the introduction of a new prevention strategy known as Seasonal Malaria Chemoprevention. Children without symptoms of malaria receive a dose of an antimalarial drug combination once a month during the high malaria transmission season. In 2012/13, this was incorporated in a pilot programme under the National Malaria Control Programmes of each country. These have led to a dramatic reduction in the incidence of all cases of meningitis by 94% and in deaths due to meningococcal disease by 99%.

A major trial is now underway to test a new drug combination that offers reduced resistance risk and is administered only twice a year instead of monthly. This will be implemented in Malawi, Burkina Faso and Senegal, to determine whether the efficacy of the vaccine can be extended to children below two years of age. This innovative approach has the potential to greatly reduce the burden of meningitis in Africa.

Improving newborn survival in southern Tanzania (INSIST)
Tuberculosis, HIV, and drug-resistant tuberculosis in children aged 0–11 years.

Good School Toolkit to prevent violence against children
Nutritional support for Africans starting antiretroviral therapy (NUSAART)
VISION 2020 Links Programme – eye health

The GwADAR study is examining the effectiveness of the Generation-Side programme for reducing risk behaviour among 15-19 year olds and girls in Cape Town and Port Elizabeth.

Improving health systems, services and policy
In recent years, School researchers have been conducting pioneering research on health economics and health policy change. The Consortium for Health Policy and Systems Analysis in Africa, led by Lucy Gilson, joint professor with the University of Cape Town, is a partnership of seven universities in Africa and four in Europe. Kara Hansson, Lucy Gilson and colleagues are also working in seven countries across Africa and Asia in the Resilient and Responsive Health Systems research programme to improve governance, human resources and financing.
Excellence and impact

Since 2012 we have held an annual School symposium to bring all staff together, including those based overseas. In 2013 the theme was ‘Achieving impact’, and we showcased good practice within the School and discussed how to address specific difficulties around achieving impact. One of the sessions, ‘From innovation to implementation: the example of vaccines’, featured speakers engaged in the whole pipeline of vaccine research, from antigen discovery and development of a novel approach, to the synthesis of glycoconjugate vaccines, through to evaluation of vaccine effectiveness, policy and advocacy.

Our impact is primarily on improved health outcomes achieved through research that has led to the development and evaluation of new interventions, and has influenced health policy at regional, national and global levels. In recent years, our research has led to changes in policy worldwide, for example in India, Brazil, China, Peru, Tanzania, and Zambia.

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The School is also having a major impact in terms of contribution to the public debate on a range of issues, with a dramatic increase in media coverage in recent years, including many front-page articles in national and global media. We also increased our presence in evidence-based information and indirectly through the influence of our research via better numbers and evidence, leadership development, improvements to health policy and practice decisions.

More than doubling to 4,400. Many School researchers are also highly networked on social media, with Martin McKee and Ben Goldacre named among the most influential health commentators of 2013.

Evidence into policy case study: Txt2stop rolled out as national smoking cessation programme

Smokers are twice as likely to succeed in quitting when they receive encouraging text messages. The Txt2stop study, a major randomised controlled trial undertaken by Dr Caroline Free at the School, examined the long-term effects of specially-designed mobile text messages on 5,860 volunteer participants. Published in The Lancet, the study was named Research Paper of the Year by the Royal College of General Practitioners and Novartis, and won the Medical Research Council and Bupa Foundation Healthy Lives Prize.

Dr Free worked with the Department of Health to roll out the programme as a service to smokers across England, and since the launch of the service in 2012, more than 50,000 people have received smoking cessation support. 42% of participants reported quitting after 4 weeks – results which have been widely covered in professional and global media, and led to the development of smoking cessation support programmes by text message in Sweden, USA, India and Italy, and the World Health Organization.

LEHTIM Research Online, our open access repository offering free public access to our research outputs, has grown to over 3,700 papers and 1,900 full text abstracts, and we are now developing an online data repository to facilitate the reuse and reanalysis of data and the validation of research findings both internally and externally.

School Centres

Bloomsbury Centre for Genetic Epidemiology & Statistics
Advances the understanding of the genetic mechanisms underlying health and disease through the development and application of computational tools and quantitative methods and models.

Centre for Evaluation
Improves the design and conduct of public health evaluations through the development, application and dissemination of rigorous methods, and facilitates the use of robust evidence to inform policy and practice decisions.

Centre for Global Mental Health
Fosters research, capacity building and advocacy in prevention, treatment and care, with the ultimate objective of reducing the global burden of mental, neurological and substance use disorders.

Centre for Global Non-Communicable Diseases
Strengthens and promotes research, training and international networking in non-communicable disease research and health policy.

Centre for History in Public Health
Promotes and undertakes high quality research in order to contribute to the development of the historical discipline and to historical understanding in the field of public health policy.

MARCH Centre for Maternal, Adolescent, Reproductive & Child Health
Improves health for adolescents, women, newborns and children through better numbers and evidence, leadership development, and active policy engagement.

Centre for the Mathematical Modelling of Infectious Diseases
Uses models to understand and predict the spread of infectious diseases and to test and guide interventions.

Centre for Statistical Methodology
Enhances methodological cross-fertilisation among public health researchers.

Centre for Tuberculosis (TB Centre)
Provides a focus for the School’s long-established global research expertise in tuberculosis epidemiology, immunology, diagnosis and treatment.

European Centre on Health of Societies in Transition ECONOM
Research into diverse aspects of health and health care arising from social, political and economic transformation.

International Centre for Evidence on Disability
Improves health and well-being among people with disabilities through excellence in research, teaching and knowledge translation.

International Diagnostics Centre
Facilitates the development, evaluation and implementation of accessible, quality assured in-vitro diagnostics for global health through information sharing and advocacy.

Malaria Centre
Provides evidence for policy and practice in the prevention, diagnosis and treatment of malaria around the world.

Vaccine Centre
Research from antigen discovery to the evaluation of vaccine effectiveness, policy and advocacy.

Media coverage 2011–13

- Bed sharing and cot death risk for young babies
- Estimated premature deaths attributable to UK summer heatwave
- John Snow bicentenary symposium and exhibition
- Malaria infected mosquitoes attracted to human odour
- Malaria Vaccine: latest findings from the RTS,15 phase III clinical trial
- Medical tourism and the National Health Service
- National Survey of Sexual Attitudes and Lifestyles results
- Portable eye examination kit may revolutionise prevention of blindness in low income countries
- UK Flusurvey results from 2012/13 and launch with British Science Association in 2013/14
- World Health Organization and the School report on global prevalence of violence against women
Evidence for decision making

In local government

With the abolition of Primary Care Trusts, local authorities are now responsible for public health, with guidance from NICE, and this change will potentially have major impacts across England. As partners in the NHS-fund School for Public Health Research, we are working with policy-makers and practitioners to develop new evaluative research to support action on social determinants of health across a range of policy sectors including regeneration, housing, transport, crime and alcohol licensing.

Diversity of providers in the NHS

One of the key aspects of the Health and Social Care Act 2013 is the policy of broadening the types of provider of healthcare to patients to include organisations which are not part of the National Health Service itself; and to encourage those organisations which remain in the National Health Service to increase their autonomy by becoming National Health Service foundation trusts.

Pauline Allen, working with colleagues at Bristol and Leeds Universities, is undertaking a series of studies funded by the National Institute for Health Research to examine the extent, nature and effects of increasing the diversity of providers.

Policy Research in Commissioning and Healthcare Systems

The new Policy Research Unit in Commissioning and the Healthcare System focuses on the relationship between the School and the Universities of Manchester and Kent, works with the Department of Health to inform the development of policy on commissioning, and how it can improve services and access, increase effectiveness and respond better to patient needs. The Unit also supports the Department of Health on policy development around Personal Health Budgets, and explores the relationship between primary care expenditure and outcomes, and competition and co-operation as strategies in local health systems.

Reducing preventable hospital deaths

There is evidence that 12,000 preventable deaths are incurred in hospitals in England every year due to problems with health care, however this is less than a third of the number previously thought. In a study published recently, Helen Hogan and Nick Black found the majority of poor care associated with preventable deaths was the result of poor monitoring of the patient’s condition, wrong diagnosis or errors in medication or fluid replacement.

Engagement and voice in commissioning

There is good evidence that patients, particularly those with long term conditions, benefit from involvement in their own care. The Engagement and Voice in Commissioning project is funded by the National Institute of Health Research to examine how patients and the public are involved in local commissioning of services, and how health organisations, including Clinical Commissioning Groups, engage with service users and enable their voices to be heard. From 2010 to 2013, researchers worked with over 90 patient groups, health care professionals and individual patients in these sites across England, focusing on diabetes, neurological conditions, and rheumatoid arthritis.

Air pollution and heart attacks

Comparing air pollution data with the records of over 150,000 acute coronary patients in England and Wales, Cathryn Tonne and Paul Wilkinson found that death rates after leaving hospital were higher among patients who lived in areas with increased exposure to particulate matter emissions from road traffic and industry. Published in the European Heart Journal in February 2013, the results show that patients living in London had the highest exposure to air pollution levels, and that patients from poorer backgrounds were more at risk of early death.

Healthy transport

The School’s Transport and Health Group has recently worked on several high-profile studies for the World Health Organization, the UK Department for Health and Transport for London on road safety and accident prevention and urban cycle commuting. Results from these and the recent On The Buses study of the links between free bus travel, health and wellbeing of older people and young people received widespread coverage throughout 2013.

Factors affecting lung cancer survival

Lung cancer survival rates in the UK are lower than in six comparator countries, according to a new international study carried out by the Cancer Research UK Survival Group at the School. While Sweden had the highest rate of one-year survival from the most common form of the disease (non-small cell lung cancer) at 48%, the UK ranked lowest at just 30%.

Dietary salt and cardiovascular disease

The number of people in England adding salt to their food at the table fell by more than a quarter in five years, according to work by Aan Dangour and colleagues published in January 2013 in the British Journal of Nutrition. The researchers found that since the salt awareness campaign began in 2003, the proportion of people reporting that they add salt at the table dropped from 32% to 23% in the following five years.
Knowledge translation and innovation

The overarching aims of our knowledge translation and innovation activities are to stimulate take-up of research findings and tools, maximise the impact and benefit of the School’s research through actively expanding areas of application, exploiting our expertise and innovation, and setting up responsible partnerships with industry.

We have major strengths in the genome sciences, drug resistance, disease transmission and pathogenic mechanisms, which enable us to exploit biomedical and technology advances and translate that knowledge into new drugs, vaccines, diagnostic reagents and disease control strategies. These innovations are widely disseminated through our global networks, and partner institutions in disease endemic countries are key collaborators in this research.

We are continuing to work with private companies. For example, the Merck for Mothers Evaluation team, based at the School, is assessing the impact of the $500 million 10-year Merck for Mothers initiative, which focuses on product innovation and advocacy. It supports maternal health projects in six countries spanning Africa, Asia and the USA with the aim of identifying sustainable solutions based on evidence from the evaluation.

This year, we also launched Charkit Innovations Limited, a wholly-owned subsidiary of the School, to focus on commercially-viable knowledge translation activities. The School’s Arthropod Control Product Test Centre (Arctec) is now a world-leading independent test centre for consultancy and the evaluation and development of arthropod pest control technologies. It provides laboratory and field evaluation of repellent sprays, pump, lotions, impregnated textiles and insecticide-treated products.

Dr Samuel Assefa recently joined the Department of Pathogen Molecular Biology as Research Fellow in Population Genomics. Led by Professor Brendan Wren, researchers are using genome sequencing technologies to identify pathways and exploit bacterial glycosylation systems for glycoengineering and novel vaccine design. The research group exploits a range of post genome research strategies to gain a comprehensive understanding of how bacterial pathogens function, how they evolve and how they interact with their respective hosts. More details of this work are on page 17.

Diagnostics are under-valued in global health, yet important advances have been made, especially in point-of-care diagnostic tests for malaria, HIV, syphilis and other infectious diseases. These can greatly improve the quality of clinical care, and have a major role to play in improving surveillance and targeting for elimination. Our International Diagnostics Centre works with companies and regulatory authorities worldwide to reduce barriers to market entry for new diagnostic tests.

Diagnostics research conducted by School staff in the past five years has already led to important changes in public health policy and practice in many countries. With collaborators in more than 100 countries in Africa, Asia and South America, we have access to a unique range of clinical material for the evaluation of new diagnostics, and are particularly well placed to study the impact and cost-effectiveness of new diagnostic tests in a wide variety of settings.

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Long-life insecticide treated bed nets are one of the most important insect vector control products.

Infectious and parasitic diseases account for nearly 20% of all deaths worldwide. Although great strides have been made to control the ‘big three’ — HIV, malaria and tuberculosis — they still claim more than four million lives every year, mainly in low-income countries. The emergence and spread of new and drug-resistant diseases is a major and growing global challenge. In the UK, thousands die from hospital-acquired infections, and treatment and prevention of antibiotic-resistant strains of pathogens costs the National Health Service over £1 billion annually.

The Bloomberg Research Institute is a joint venture between the London School of Hygiene & Tropical Medicine and University College London. Its mission is to discover and develop new tools for the control and treatment of infection, through improved understanding of pathogens and the dynamics of infectious disease in global populations.

Over the next few years, we aim to bring the Institute together under one roof in state-of-the-art facilities. This will create a centre of excellence for research and enhance engagement with industry and international networks. It offers an innovative model for research and training that integrates advances in basic science with those in population sciences and computational biology, to bring new understanding to disease treatment, prevention and control.

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2013: the year in review

Selected highlights and events

January
- London Centre for Neglected Tropical Diseases launched, a partnership with Imperial College London and Sichuan University, China, to tackle diseases including leishmaniasis, soil-transmitted helminths and leprosy, which affect more than one billion of the world’s poorest people.

- Mobile phone technology, including text messaging, shown to help people adhere to antiretroviral treatments in a systematic review led by Caroline Fairley.

February
- The School received a highly positive review from the UK’s Quality Assurance Agency for Higher Education, with praise being given for the School’s approach to staff development, and how research excellence and our diverse student body support educational programmes.

- Programming for Nutrition Outcomes, a free, open access distance learning module, developed with the Department for International Development to meet training needs in countries facing a high burden of undernutrition; over 15,000 people from 181 countries have already accessed the module.

- Major international study by the Cancer Research UK Survival Group at the School finds lung cancer survival rates in the UK are lower than in six comparator countries.

- The Lancet Series on Europe launched at the School: researchers identified many disparities in access to services and health outcomes.

March
- The biennial conference of the John Snow Network, focused on global health policy and the influence Scottish public health policy in their flavour.

- Research by David Corney and colleagues shows that malaria vector Anopheles albimanus mosquitoes use a combination of visual and olfactory cues for oviposition in genetically complex than previously thought due to interbreeding.

- A gift from Janssen Pharmaceutical NV to the Centre for Global Mental Health established a £1 million scholarship fund to support Master’s students. A further nine scholarships were announced in November.

April
- Anopheles and colleagues shows that the alcohol industry distorted evidence on alcohol control and harm, highlighting the need for independent public health policy to support their work and lifestyle.

- Jim McCormack and colleagues found that the alcohol industry distorted evidence on alcohol control and harm, highlighting the need for independent public health policy to support their work and lifestyle.

- Agreements signed with the Kenya Medical Research Institute to collaborate on the mosquito genome and capacity building.

- The School joins Pathogens Genomics launched, organised and taught jointly with the Wellcome Trust Sanger Institute.

- Research led by Bob Carpenter found that the risk of cot death among unvaccinated babies increased when the parents did not smoke and the mother had not consumed alcohol or drugs, prompting the UK government to urgently examine its guidelines on co-sleeping.

May
- The School researchers discovered mosquitoes infected with malaria parasites are significantly more attracted to human odour than uninfected mosquitoes, with important implications for vector control and malaria eradication.

- Agreement signed with the Kenya Medical Research Institute to collaborate on the mosquito genome and capacity building.

- A new MSc module on Pathogens Genomics launched, organised and taught jointly with the Wellcome Trust Sanger Institute.

June
- Study led by Charlotte Watts with the World Health Organization and South African Medical Research Council found that as many as one in three women are victims of gender violence. The report has influenced policy and research.

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July
- A study led by Kate Nuttall found that publication of death rates for individual surgeons in England may fail to identify poor performance in specialties where low numbers of key operations lead to unreliable results.

- Population and Addiction Reproductive and Child Health International parliamentary briefing for the Towards Inappropriate Caps programme launched to improve the health of babies, girls and women worldwide.

August
- Ben Armstrong calculated around 800 premature deaths could be attributed to the behaviour in England in July 2013. Nick Black commissioned by the UK Department of Health to lead a study into avoidable hospital deaths.

- The China Medical Board awarded scholarships to Chinese students for postgraduate studies at the School. We welcomed the first students of this new scheme.

September
- PopMKT, a major study in South Africa and Zambita to test a new approach to the prevention and control of HIV and AIDS in Africa was launched led by Richard Hayes.

- The School topped the tables of the world’s leading research-focused graduates schools in the world. The first students at the School.

October
- Research led by Johanne Havelund showed that foreign patients coming to the UK for private medical treatment are an important source of income for NHS Trusts, and that more UK residents currently travel abroad for treatment than international patients travel to the UK.

November
- Research led by Johanne Havelund showed that foreign patients coming to the UK for private medical treatment are an important source of income for NHS Trusts, and that more UK residents currently travel abroad for treatment than international patients travel to the UK.

December
- Students secured £180,000 in pledges in the first three weeks of our flagship Drowning Campaign 2013/14, putting it on course to exceed last year’s successful campaign raising £670,000 for people, partnerships and projects.

- The School awarded a €1.5 million grant by the Horizon 2020 project led by Raya Wedigs at the School and Dame Kate Johnson at UCL, revealed how British sexual attitudes and behaviour have changed in recent decades.

- To mark the 25th anniversary of the Department of Health Research and Policy at the School, a symposium was held to explore how our work has helped meet the challenges faced by health services and systems in the UK and abroad, and how our research has supported and guided changes and reforms.

- The School launched a new Master’s course in One Health, delivered jointly with the Royal Veterinary College to study disease at the interface between humans, animals and the environment.

- A new Master’s course in One Health, delivered jointly with the Royal Veterinary College to study disease at the interface between humans, animals and the environment.

- The School’s approach of good practice including text messaging, educational programmes.

- London School of Hygiene & Tropical Medicine

Annual Report 2012
Faculty review: Epidemiology and Population Health

KEY INFORMATION
Dean of Faculty: Professor John Edmunds
Staff total: 370
Academic: 275
Professional support: 95

DEPARTMENTS
Department of Infectious Disease Epidemiology
Head: Professor Carne Rensmann

Department of Population Health
Head: Dr Philip Edwards

Department of Medical Statistics
Head: Professor James Carpenter

Department of Non-communicable Disease Epidemiology
Head: Professor Liam Smeeth

Research Degrees Directors: Professor Suzanne Filteau and Professor Simon Cousens

Taught Course Director: Craig Higgins

NUMBER OF DOCTORAL STUDENTS 2012/13
Student total: 122
UK/EU: 63
Overseas: 59

Top 5 grants awarded 2012/13
1. International Initiative for Impact Evaluation (3ie) – Population Impact of Conjugate Vaccine on Pneumococcal Transmission in Children

2. Wellcome Trust – Research Degrees Directors


4. Department of Health – VALET (Vaccines and Accidental Early-Death Trial) £2.0 million

5. Medical Research Council – Systematic and Disease in Kenya £2.0 million

6. Research Degrees Directors: Professor Suzanne Filteau and Professor Simon Cousens

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Our Cancer Survival Group currently involves over 270 cancer registries in 66 countries with data for around 30 million cancer patients*

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Thibela tuberculosis project trialled interventions among HIV-infected gold miners in South Africa

Not all trials are blind, and disease in patients with late-stage disease are often considered to be too late to be useful. However, disease in patients with late-stage disease are often considered to be too late to be useful. However, disease in patients with late-stage disease are often considered to be too late to be useful. However, disease in patients with late-stage disease are often considered to be too late to be useful. However, disease in patients with late-stage disease are often considered to be too late to be useful. However, disease in patients with late-stage disease are often considered to be too late to be useful. However, disease in patients with late-stage disease are often considered to be too late to be useful. However, disease in patients with late-stage disease are often considered to be too late to be useful. However, disease in patients with late-stage disease are often considered to be too late to be useful. 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Faculty review: Infectious and Tropical Diseases

KEY INFORMATION
Dean of Faculty: Professor Simon Croft
Staff total: 360 Academic: 295 Professional support: 105

DEPARTMENTS
Department of Clinical Research
Head: Professor Philippe Mayaud
Department of Disease Control
Head: Professor Mark Rowland
Department of Infection and Immunology
Head: Dr Colin Sutherland
Department of Pathogen Molecular Biology
Head: Professor John Kelly
Research Degrees Director: Dr David Baker
Taught Course Director: Dr Graham Clark

NUMBER OF DOCTORAL STUDENTS 2012/13
Student total: 149 UK/EU: 68 Overseas: 81

Top 5 grants awarded 2012/13
1. Commission of the European Community – TANDEM £5.0 million
2. Medical Research Council – Seasonal malaria chemoprevention in African children Brian Greenwood £4.0 million
3. UNITAID via World Health Organization – Global Network to Improve Access and Quality of HIV Monitoring Technologies Rosanna Peeling £3.0 million
4. Medical Research Council – Oligoclonal Malaria Cerebral malaria and host response in Asplenic patients Shemman Winer £2.4 million
5. Commission of the European Community – GENINVADE David Conway £2.4 million

The faculty has led the development of a number of School Centres (page 7), for example the International Centre for Evidence in Disability, TB Centre, International Diagnostics Centre, and is a key partner in the Centre for Evaluation. Our teaching partnerships have also grown with the East African Diploma of Tropical Medicine and Hygiene, based in Moshi Tanzania and Kampala Uganda, now well established (with 20 students from Africa and 40 international in 2013), and this year we have launched a new MSc in One Health with the Royal Veterinary College, and a new MSc module on Pathogen Genomics, organised and taught jointly with members of the Wellcome Trust Sanger Institute.

The Wellcome Trust Bloomsbury Centre for Global Health Research 2013 meeting included 32 Clinical Fellows, who presented the results of their research in 14 countries in Africa and Asia and celebrated the renewal of the Centre, with Wellcome Trust funding, for a further five years.

Whole genome sequencing technologies continue to drive research on pathogenesis, epidemiology, virulence, and drug and vaccine development. Studies, funded through a Biotechnology and Biological Sciences Research Council Responsive Mode grant, have shown for the first time that malaria infected mosquitoes respond more to human odour than uninfected mosquitoes. Research on hygiene and sanitation, also in collaboration with industry partners, has demonstrated the success of a new approach to changing behaviour. This “SuperAma” animated video campaign and evaluation uses emotional cues such as disgust and nurtures to encourage mothers to wash their hands with soap. With St John’s Research Institute Bangalore, this approach significantly increased rates of handwashing with soap in trials. Hygiene researchers also played a lead role in another School study, across faculties, which showed, through the first systematic review and meta-analysis, the importance of water, sanitation and hygiene on childhood nutrition and growth.

Clinical interventions and patient care are being supported through our research innovations. Researchers in our International Centre for Eye Health have shown that the Portable Eye Examination Kit (Peek), a smartphone-based tool, can enable comprehensive eye examinations to aid the delivery and co-ordination of eye care in remote locations. Our continued input, through the Artemisinin Combination Therapy (ACT) Consortium into malaria control, has shown the crucial role of rapid diagnostic tests in targeting drugs to those who need them, both through public health services and in the private sector, in Ghana and Uganda.

We are also conducting pioneering work on neglected tropical diseases, mainly parasitic in origin. Our work continues on the Global Atlas of Helminth Infection, disease mapping for helminth control, and efforts to eliminate trachoma, the most common infectious cause of blindness with 21 million cases worldwide, have been boosted by the launch of the Global Trachoma Mapping Project. School researchers are working in a consortium with Sightsavers and the International Trachoma Initiative, Ministries of Health, and other NGOs and academic partners to complete baseline mapping worldwide by 2015.
The mission of the faculty is to improve health globally through research, teaching and engagement in areas of health systems and services, health policy, and the individual, social and environmental determinants of health. We undertake cutting-edge research and contribute directly to policy in areas of current and future importance to public health.

This year has seen a major public focus on gender violence: our Gender, Violence and Health Centre, within the Department of Global Health and Development, led work for the Global Burden of Disease in assessing the global prevalence and health impacts of violence against women and of child sexual abuse. The findings, launched with the World Health Organization and Medical Research Council South Africa with publications in Science and The Lancet, showed that 30% of partnered women globally have experienced violence from a partner. More broadly, the Centre’s evidence on effective interventions helped inform the growing prevention agenda, with staff input into a range of high-level consultations. This expertise also led to the successful launch of a new short course on Researching gender based violence: methods and meaning.

It is now beyond doubt that environmental change profoundly impacts health and well-being. Our Environmental Epidemiology Group, based within the Department of Social and Environmental Health Research, works at the forefront of this area, influencing national policy. Together with colleagues in the Policy Innovation Research Unit in our Department of Health Services Research and Policy, the group was commissioned by the Department of Health to evaluate the Cold Weather Plan for England, introduced in 2011. Early findings have led Public Health England to review the temperature thresholds used to trigger cold weather alerts to the NHS, social services and other agencies.

The National Institute for Health and Care Excellence contracted the Environmental Epidemiology Group to assess evidence on the effectiveness of interventions to alleviate adverse health effects from cold housing and cold weather. The group also won a prestigious European Research Council grant to investigate the relationship between particulate air pollution and risk factors for heart disease in India.

At the macro level of climate change, a new EU Framework funded project IMPRESSIONS (Impacts and Risks from High-End Scenarios: Strategies for Innovative Solutions) will focus on broader scenarios relating to climate change, and a partnership funded by the Medical Research Council and Natural Environment Research Council with Exeter University will create a platform linking climate and other environmental data with health and well-being data.

Sexual and reproductive health is another area in which we are taking a lead. In March, researchers from the Anthropology, Politics and Policy Group within the Department of Global Health and Development launched the findings of the Integra Initiative, the largest ever evaluation of different models of HIV and social and reproductive health integration. The study found that integration of HIV and reproductive health services in Kenya, Malawi and Swaziland can lead to better health outcomes and service experience, decreased stigma and cost savings.

This autumn saw the culmination of work by staff within the Department of Social and Environmental Health Research on the third 10-year UK National Survey of Sexual Attitudes and Lifestyles (NATSAL). Over 15,000 adults aged 16–74 years participated in interviews on sexual behaviour, fertility, contraceptive use and sex-related diseases. Funded by the Medical Research Council and the Wellcome Trust, with support from the Economic & Social Research Council and the Department of Health this is one of the largest ever studies of sexual behaviour undertaken in a single country. The results, published in a special issue of The Lancet, reveal how sexual behaviour and attitudes in Britain have changed in recent decades.

Our faculty also continued to be a leading source of advice to the UK NHS. Staff from the Department of Health Services Research and Policy, in partnership with Royal Colleges representing surgeons, obstetricians and gynaecologists, advised a number of surgical specialties on how best to report clinical outcomes for individual clinicians and contributed to the national debate on achieving greater transparency on the performance of health care providers. Staff also advised on the introduction of value-based pricing within the National Health Service to inform how National Institute for Health and Care Excellence will decide which treatments are funded by the National Health Service and at what price.

In October, Nick Black, Professor of Health Services Research, was awarded a global Career Achievement Prize by the International Society for Quality in Healthcare, in recognition of his work on the use of patient reported outcome measures (PROMs). Research with collaborators at the University of York, funded by the National Institute of Health Research looking at the implications for the National Health Service of inward and outward medical tourism, was published. The largest empirical study of medical tourism to date, the findings received widespread coverage in professional and national media.

In November, the School held a symposium to celebrate 25 years of Health Services Research, and assess future challenges. Looking ahead, in an exciting new joint venture coordinated through UCLPartners, faculty staff will play a leading role within the National Institute of Health Research Collaboration for Leadership in Applied Health Research and Care, to carry out applied health research with a population of six million people living in north and east London and the surrounding areas.

Top 5 grants awarded 2012/13

1. National Institute of Health Research – Regional Anti-Trafficking Programme
   £0.6 million

2. National Institute of Health Research – Using Patient Reported Outcome Measures to Assess Quality of Life in Dementia
   £395,000

3. Family Health International USAID – Multi-drug resistant Tuberculosis in Myanmar
   Richard Coker
   £700,000

4. National Institute of Health Research – The Impact of home energy efficiency interventions and winter fuel payments on winter and cold-related mortality
   Sarah Smith
   £1.5 million

5. Bush Foundation – Reinventing and creating fiscal space for HIV through co-investments in interventions and winter fuel payments on winter-and cold-related mortality
   Hannah Babad
   £1.5 million

Tina Mayhew and President Joyce Banda speaking at the launch of the School’s Integra partnership project report at the UK Houses of Parliament, March 2013

"Integrated services, provided by trusted and competent providers, can be a step in the right direction to ensuring access to more health services for all!"

Professor Richard Smith, Dean of Faculty: Professor Richard Smith
Staff total: 286  Academic: 255  Professional support: 31
DEPARTMENTS
Department of Global Health and Development
Head: Professor Katy Hanson
Department of Health Services Research and Policy
Head: Professor Jan van der Meulen
Department of Social and Environmental Health Research
Head: Professor Kaye Wellings
Research Degrees Director: Judy Green, Nicki Thorogood (Deputy)
Taught Course Director: Hannah Babad
KEY INFORMATION
Dean of Faculty: Professor Richard Smith
Staff total: 286  Academic: 255  Professional support: 31
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Research Degrees Director: Judy Green, Nicki Thorogood (Deputy)
Taught Course Director: Hannah Babad
NUMBER OF DOCTORAL STUDENTS: 2012/13
Student total: 135  UK/EU: 72  Overseas: 63

Top 5 grants awarded 2012/13

1. National Institute of Health Research – Regional Anti-Trafficking Programme
   Cathy Zimmerman
   £1.5 million

2. National Institute of Health Research – Using Patient Reported Outcome Measures to Assess Quality of Life in Dementia
   £395,000

3. Family Health International USAID – Multi-drug resistant Tuberculosis in Myanmar
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   £700,000

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   Sarah Smith
   £1.5 million

5. Bush Foundation – Reinventing and creating fiscal space for HIV through co-investments in interventions and winter fuel payments on winter and cold-related mortality
   Hannah Babad
   £1.5 million
The Student Representative Council participated fully in the review and, as always, worked with staff throughout the year to help improve the student experience. In addition to organising activities around student social, welfare, charity and sports activities, the Council contributed to developing enhanced support in areas such as careers guidance.

To mark the centenary of the Medical Research Council, the School was awarded funds to create a competitive award for a 6-month postdoctoral fellowship. The fellowship was won by Dr Sarah Hultgren, building on her PhD research working with Dr John Rayner to investigate the development of clinical immunity to malaria.

In December, the Higher Education Funding Council for England announced new funding to support an innovative ‘pre-doctoral’ programme in social science for mature students at the School and three other University of London partners. This will be developed and delivered by the Economic and Social Research Council-funded Bloomsbury Doctoral Training Centre.

With major changes to the funding environment in UK higher education, we are planning ahead to meet the needs of future generations of postgraduate students. This includes working with sector bodies to address funding and other challenges. In 2013/14, we are undertaking a major internal review of our education programme to ensure it remains globally competitive and relevant for students’ future careers.

In March, despite the snow, we hosted our largest Graduation Day ever.

Research poster showcase event

The report identified a number of examples of good practice, including our approach to staff development, the mechanisms for world-class research activity to inform and enhance student learning, and facilitate student peer support networks.”

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We aim to recruit, manage, develop and retain excellent staff based in the UK and elsewhere to deliver the School’s mission. We have also made great progress in improving the School’s management and administration.

The School embraces and values the diversity of its staff and student population and seeks to promote equality as an essential element in contributing to the improvement of health worldwide. Our ‘talent and Educational Development Programme provides a range of training workshops, seminars, online courses and other personal and professional development opportunities for staff across the School.

Our Values
The School seeks to foster and sustain a creative and supportive working environment based upon an ethos of respect and rigorous scientific enquiry.

We are committed to:
- Excellence and creativity
- Maximising synergies between research, education and knowledge translation and innovation
- Sharing expertise to strengthen capacity globally
- Partnerships based on mutual respect and openness
- Equity and diversity
- Financial and environmental sustainability

“The School’s success is founded on its committed staff, its collaborators and the synergies that result from these interactions.”

We are developing the programme to meet individual training and our Postgraduate Certificate in Learning and Teaching (PGCILT) is accredited by the Higher Education Academy. We support learning and transferrable skills development for early career researchers.

The School is an equal opportunities employer, and part of the Athena Swan award scheme to promote women in Science. In 2013, two faculties secured Bronze departmental awards, in addition to the Bronze Award for the School last year. We are currently working towards achieving Silver awards across the School in 2014.

In October 2013, we appointed four members of staff to the Aurora programme, the leadership development initiative for women, run by the Leadership Foundation for Higher Education. Aurora aims to enable a wider range of women in academic and professional roles to become future leaders, developing their skills and advancing their institutions.

In November, the School was one of the first Higher Education Institutions to be accredited as Living Wage Employers by the Living Wage Foundation. To be accredited, an employer must ensure all directly-employed staff and contractors receive the Living Wage, which is calculated according to the basic cost of living (currently £8.80 in London). This award recognises our commitment to fair pay.

This year, the School joined the Stonewall Diversity Champion programme, Britain’s good practice employers’ forum on sexual orientation. We will be working with Stonewall and other employers on the programme to ensure that we are a workplace of good practice.

The School is a certified user of the Two Ticks Disability Symbol Scheme, and is committed to employing people with disabilities.

Research income: grants and contracts

Research income has increased over recent years and represents 63% of our total income, amongst the highest proportion of any UK Higher Education Institution. Staff have been successful in generating research grant income, with an above average success rate for UK research council funding. In addition, the School has a broad portfolio of funders, including large charitable organisations such as the Wellcome Trust and the Bill and Melinda Gates Foundation, the UK Research Council and government departments, the USA’s National Institute for Health, the European Union, industry, small charities and individual donors.

The School’s research encompasses a spectrum from fundamental laboratory research in infectious diseases and studies of disease causation, through development and assessment of novel interventions and services, to advising on implementation in real life settings of interventions, service and system reforms, and evaluation that informs policy and practice.

Our strategy 2012–17

The purpose of the Strategy is to provide a framework to guide decisions focused on School-wide priorities over the next five years. The strategy enables the School to:

- Identify key areas of development and investment, appointments, research directions and collaborations, education programmes and capital projects
- Frame communication with key stakeholders and audiences
- Prioritise development of facilities and support services to optimise efficiency and effectiveness
- Ensure the School’s reputation continues to grow globally, helping us to fulfil our vision and mission

The Strategy document can be downloaded from www.lshtm.ac.uk/aboutus/introducing/mission

Income from all sources 2006/07 to 2012/13

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<td>Total</td>
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<td>Other</td>
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<td>Tuition fees</td>
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<td>Higher Education Funding Council for England (HEFCE) grants</td>
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<td>Research grants and contracts</td>
<td>125.1</td>
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Research income by source 2006/07 to 2012/13

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<td>18.4</td>
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<td>Other sources outside the EU</td>
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<td>EU Commission and other government bodies</td>
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<td>Charities based outside the UK</td>
<td>1.4</td>
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<tr>
<td>UK government departments and health authorities</td>
<td>4.7</td>
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<tr>
<td>UK charities</td>
<td>1.9</td>
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Management and governance

Organisational structure from December 2013

**Key**
- Academic Department
- Professional Support Services
- Executive Office
- Deputy Chair:
  - Dr Diana Walford
- Dean: Sir Tim Lankester KCB MA (Camb) MA (Yale)
- Chair:
  - Dr Simon Tanner BM MSc MRCGP FFPH

**Academic Department**

- Department of Clinical Research
  - Taught Course Director: Graham Clark
- Department of Hospital Epidemiology
  - Taught Course Director: Carine Ronsmans
- Faculty of Epidemiology & Disease Control
  - Dean: Professor John Kelly BSc PhD
- Faculty of Global Health & Development
  - Dean: Professor Paul Wilkinson BSc BM BCh MRCP (UK) MSc
- Faculty of Infectious & Tropical Diseases
  - Dean: Carine Ronsmans
- Faculty of Medicine
  - Dean: Professor Richard Banson MSc PhD DLSHTM
- Faculty of Non-Communicable Disease Epidemiology Research
  - Taught Course Director: John Edmunds
- Faculty of Public Health & Policy
  - Taught Course Director: Alison Fox

**Executive Office**

- Professor Baron Peter Piot CMG MD PhD FRCP FRCPath FFPH FRS
- Director: Peter Piot
- Deputy Director: Franco Feser
- Assistant Director: Mark Mandy

**Professional Support Services**

- Department of Administration & Population Health
  - Dean: John Edwards
- Department of Research Management
  - Dean: Professor Nicholas Barber BPharm PhD MRPharmS
- Department of Pathogen Immunology & Infection
  - Dean: Philippe Mayaud
- Department of Social & Global Health & Development
  - Dean: Richard Smith
- Department of Tropical Medicine
  - Dean: Simon Croft
- Department of Tropical Diseases
  - Dean: Simon Cousens
- Department of Infectious Disease Epidemiology
  - Dean: Liam Smeeth
- Department of Medical Statistics
  - Dean: James Carpenter
- Department of Non-Communicable Disease Epidemiology
  - Dean: John Edmunds
- Department of Occupational Health & Safety
  - Dean: Tim Rhodes
- Department of Environmental Science
  - Dean: Graham Clark
- Department of Clinical Research
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- Faculty of Epidemiology & Disease Control
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  - Dean: Carine Ronsmans
- Faculty of Medicine
  - Dean: Professor Richard Banson MSc PhD DLSHTM
- Faculty of Public Health & Policy
  - Taught Course Director: Alison Fox

**Council (At 1 December 2013)**

**Chair:** Sir Tim Lankeseter KCB MA (Cantab) MA (Yale)
**Deputy Chair:** Dr Diana Walford
**Ex-Officio Members**
- Mr Gino Motti, Chair, Student Representative Council
- Dr David Jolliffe as RCI (Chairman of Court)
- Professor Baron Peter Piot CMG MD PhD FRCPath (Director)

**Appointed by the Secretary of State for Health**
- Dr Simon Tanner BM MSc MRCGP FFPH (to 31.03.13)
- Appointed by the Secretary of State for International Development
  - Dr Andrée Carter PhD FRSGS MClinMed

Appointed by the University of London

- Professor Nicholas Barber BPharm PhD MRPharmS
  - (to 31.08.13)

**Academic Staff Members**
- Ms Mandy Clarke BSc ACA
- Dr Diana Walford CB MSc MD FFPH (to 31.08.13)

**Honorary Fellows**

- Alfred Sommer
- John Hilary Smith
- Amartya Sen
- K Srinath Reddy
- Sir Eldryd Parry
- Sadako Ogata
- David Nabarro
- Tony McMichael
- Halfdan Mahler
- Dame Sally Macintyre
- Hattie Marlar
- Tony McKMichael
- David Nabarro
- Sadashe Ogata
- Sir Eldryd Parry
- Sir Richard Pet
- K Srinath Reddy
- Amartya Sen
- John Hilary Smith
- Alfred Sommer
- Robin Weiss
- Peter Williams