



# UCL Institute for Global Health



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# About the UCL Institute for Global Health

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The UCL Institute for Global Health (IGH) is a world-leading centre of research and teaching excellence in global health, based in the heart of London. Our unique approach combines interdisciplinary work with community engagement, to develop and implement practical solutions to global health problems.

We aim to tackle the major health problems affecting the poorest communities. As the strategic centre of interdisciplinary global health research collaborations across UCL, the Institute convenes and engages the breadth and depth of expertise available across the university.

Our research, teaching and enterprise activities address the broad determinants of health and the major causes of death and ill-health. Our work ranges from tackling issues affecting the most disadvantaged in society to addressing the major challenges affecting everyone, such as climate change.

Equality and diversity are integral to our approach to research, teaching and enterprise. We hold an Athena SWAN Charter Silver award, are committed Friends of Out@UCL, and champion all aspects of equality. Innovation in equality is central to what we do.

We will continue to influence policy through our research, teaching and engagement with communities and policymakers and to impact national and international guidelines and policy.



**Professor Ibrahim Abubakar**  
Director, UCL Institute for Global Health

# Our vision for the future

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Our vision is of a world in which interdisciplinary research creates solutions to global health challenges, stimulating policy change and better health for all.

## **Our high-level strategic goals over the next five years, aligning with UCL's 20-year strategy (UCL 2034), include:**

- Providing academic leadership grounded in intellectual excellence: we are building a cadre of early-and mid-career academics with a view to enhancing our international standing as a world-leading global health institute
- Offering global leadership in the integration of research and education, underpinning an inspirational student experience
- Building on our successful education programmes by expanding our education portfolio to include new postgraduate programmes and short courses, providing students and professionals with opportunities for lifelong learning through our world-class research-led teaching expertise
- Addressing global challenges through our disciplinary excellence and distinctive interdisciplinary approach, specifically embarking on grant-funded projects that involve co-investigators from other Institutes across UCL and across the academic community both in the UK and abroad
- Making the Institute an accessible organisation, actively involved in public engagement and discussion on issues with the greatest impact on global health. We shall deliver global impact through an expanding network of innovative international activities, collaborations and partnerships
- Continuing to carry out inclusive research with disadvantaged and vulnerable groups, sharing our programmes within the UK and worldwide, and building relationships with business and philanthropic partners for mutual benefit
- Valuing and appreciating our workforce, students, research partners and health communities and enhancing the careers of our staff and students

## Our centres

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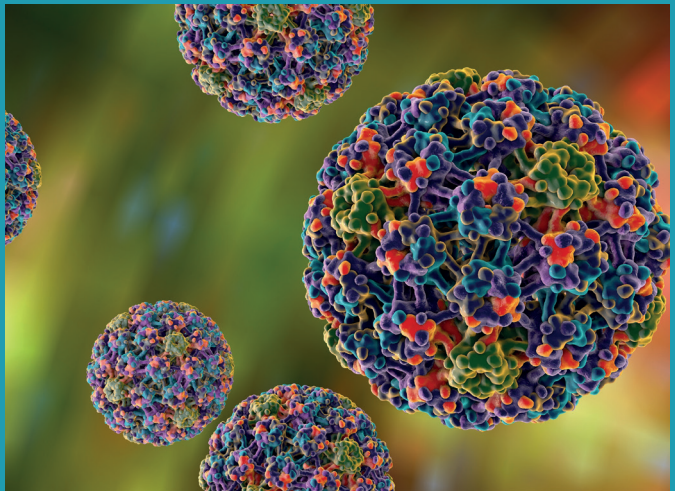
Our ten research centres collaborate to optimise interdisciplinarity and serve as the core for wider collaboration within and across disciplines in UCL. They also contribute to our education programmes; see page 26.

1. Centre for Clinical Research in Infection and Sexual Health
2. Centre for Pragmatic Global Health Trials
3. Centre for Clinical Research, Epidemiology, Modelling and Evaluation (CREME)
4. Centre for Global Health Economics
5. Centre for Population Research in Sexual Health and HIV
6. Centre for Molecular Epidemiology and Translational Research
7. Centre for the Health of Women, Children and Adolescents
8. Centre for Global Non-Communicable Diseases
9. Centre for Gender and Global Health
10. Centre for Climate Change, Migration, Conflict and Health

## Controlling human papillomavirus infection in men who have sex with men

Men who have sex with men (MSM) are at a high risk of acquiring human papillomavirus (HPV) infection, MSM with persistent high-risk HPV infection are at risk of developing otherwise relatively rare cancers, such as anal cancer. MSM who are also living with HIV are at even higher risk. A national HPV vaccine programme in girls started in 2008 but, unlike heterosexual men, MSM will not benefit from the effects of herd protection (when the vaccination of a substantial portion of a population provides a measure of protection for other individuals who do not have immunity).

We have carried out a programme of work to estimate the prevalence of HPV infection in MSM, and developed a mathematical model in collaboration with Public Health England (PHE) which has been used to investigate strategies to control HPV in this population. This work supported the case for a targeted programme of HPV vaccination in MSM, which was piloted in a joint programme with PHE, NHS England and the Department of Health and Social Care, and shown to be feasible. It is now being implemented across the UK.



The Human Papillomavirus

“This work supported the case for a targeted programme of HPV vaccination ... it is now being implemented across the UK.”

# The Centre for Clinical Research in Infection and Sexual Health

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The Centre is committed to carrying out world-class research to improve the treatment and prevention of infectious diseases, particularly sexually transmitted infections, and to promote improvements in sexual health.

The Centre leads a programme of clinical research to address the most pressing research questions in sexual health, HIV and other infectious diseases using a wide range of methodologies. Our programme includes randomised clinical trials, cohort studies, surveys and mixed methods work.

Our primary focus is on improving the care of patients in the UK, and the services provided by the NHS. To this end, we work very closely with one of the largest sexual health and HIV treatment services in the UK, run by Central and North West London NHS Foundation Trust. However, the research that we undertake always has broader applications, including to other healthcare systems and populations. We have close links with the other research groups in UCL, both within the Institute for Global Health and more widely. Our aim is to both lead world-class research, and to be the preferred partner for collaborative and multi-centre studies led by others in the UK and overseas.

## **Our research**

We have a team dedicated to clinical research, including clinicians, statisticians, research nurses, research assistants and support staff. Much of our work is focused on HIV treatment, and prevention, and on the complications of long-term infection in the era of effective antiretroviral therapy. We have active research programmes in HPV infection, hepatitis C, gonorrhoea and other sexually transmitted infections, addressing questions ranging from case-finding, treatment and prevention to service delivery.

## **Where we work**

Most of our work is carried out in the UK, often as part of multi-centre projects. A proportion of our work is also based overseas, with the largest part being in collaboration with the Africa Health Research Institute in South Africa. We actively collaborate with other centres in Europe, Africa and North America. Our work is funded by the National Institute for Health Research, the Medical Research Council, the Wellcome Trust, the British HIV Association, the NHS and the National Institute of Health amongst others.

**i** To find out more visit:  
Website: [ucl.ac.uk/global-health/igh-centre-list/centre-crish](https://ucl.ac.uk/global-health/igh-centre-list/centre-crish)



## Tackling tuberculosis in South Africa

“The Centre is contributing to the design and analysis of a randomised trial of the impact of conditional cash transfers and pre- and post-TB test counselling.”

The centre is working on a project to tackle tuberculosis (TB) in South Africa, an important public health challenge in the country. This research is funded by the MRC Newton Fund (UK and South African Medical Research Councils) and brings together researchers from the National Institute for Communicable Diseases in South Africa, the University of Witwatersrand, University College London, and Public Health England amongst others. The project aims to reduce pre-treatment loss to follow-up and improve successful patient outcomes.

Early work addressed the role of data and systems improvement in TB services. Following this stage in the project, the centre is contributing to the design and analysis of a randomised trial of the impact of conditional cash transfers and pre- and post-TB test counselling to reduce the total loss to follow up across the continuum of care.



A counsellor at Vosloo Poly Clinic in Vosloorus, instructing a study participant on sputum collection.



# The Centre for Pragmatic Global Health Trials

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The Centre for Pragmatic Global Health Trials conducts randomised trials to assess the effectiveness of interventions in real-world conditions, using and promoting methodological excellence, to improve global health.

Working with other centres in the UCL Institute for Global Health, and through strong links with the UCL Institute for Clinical Trials and Methodology, we lead clinical trials addressing research questions of global importance.

Our diverse expertise includes the methodology of trial conduct, data collection and management, qualitative methods, pharmacokinetics-pharmacodynamics, health economics, and all statistical aspects of trial design and analysis.

We build on the strength of our previous experience in designing and conducting trials but also approach each trial afresh so as to select the optimal design and methodology. We recognise that many aspects of trials methodology need improvement. Our research extends to the development and adaptation of methodology in trials including key contributions to the recent advancements in cluster randomised trials such as stepped wedge designs.

## **Our research**

Our current and recent trials address key health questions in sexual health and HIV, treatment of tuberculosis and other infections, women's health, neonatal infant and adolescent health, nutrition, and domestic violence.

Besides work addressing the design of cluster randomised trials we are also actively researching the design and analysis of non-inferiority trials, and trials for which multiple primary outcomes are required to interpret the findings. We also use clinical pharmacological concepts to understand the relationship between drug levels and the drug

effect. We use these so-called pharmacokinetic-pharmacodynamic models to optimise dosing regimens and the design of prospective clinical trials using computer simulations.

## **Where we work**

We undertake research all over the world in countries including India, Kenya, Malawi, Nepal, Sierra Leone, South Africa, the United Kingdom and Zimbabwe. We collaborate with the other centres in the UCL Institute for Global Health, a variety of other institutes at UCL, and with a number of external academic partners, governmental partners, foundations and NGOs on our research. Our current academic partners include the Liverpool School of Tropical Medicine, the National Institute for Communicable Diseases South Africa, the University of Witwatersrand, the Stockholm Environmental Institute, King's College London, and Queen Mary University of London.

In trials methodology research our key partners are the University of Birmingham, the University of Leeds and Queen Mary University of London (UK), Duke University (US) and Monash University (Australia). Our research funders include the Wellcome Trust, the UK Medical Research Council, the Bill and Melinda Gates Foundation, and UK Aid.

**i** To find out more visit:

Website: [ucl.ac.uk/global-health/igh-centre-list/centre-pgnt](https://ucl.ac.uk/global-health/igh-centre-list/centre-pgnt)

## Understanding HIV transmission risks in Europe

The PARTNER study is an international two-phase study led by CREME and the University of Copenhagen, looking at whether HIV transmission can occur when an HIV positive person is taking effective antiretroviral therapy (ART).

PARTNER recruited HIV serodifferent couples (couples in which one person is living with HIV and the other person is HIV negative) across 14 countries in Europe, in which the positive partner was on ART. Phase 1 followed both heterosexual and gay serodifferent couples from 2011 – 2014 (PARTNER1) and phase 2 continued recruiting and follow up in gay men only to 2018 (PARTNER2).

PARTNER1 results were published in 2016 in The Journal of the American Medical Association and gave a rate of within-couple HIV transmission of zero. In PARTNER2, although some of the HIV negative partners did become HIV positive, none of these cases were linked to their HIV positive partner so the rate of within-couple HIV transmission risk was zero.

This supports the message that a person who has a virus that is not detectable will not transmit HIV to their partners.



The PARTNER team collaborated with the artist John Walter on his work 'Alien Sex Club' (2015), exhibited as part of 'Somewhere in Between' at the Wellcome Collection in 2018

“Our research supports the message that a person who has a virus that is not detectable will not transmit HIV to their partners.”

# The Centre for Clinical Research, Epidemiology, Modelling and Evaluation

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The Centre for Clinical Research, Epidemiology, Modelling and Evaluation (CREME) applies a range of multidisciplinary research methods to understand disease, epidemiology, health, mental health and the economic impact of public health interventions to improve population health and policy direction.

We undertake world-class research to understand the mechanistic pathways of infectious diseases, variations in prognosis and complications of disease and its treatment, with the aim of improving health outcomes. The centre is home to a number of national and international collaborations focusing on HIV infection and we apply a range of multidisciplinary research methods to understand different disease epidemics and the impact of social, psychological, structural and clinical factors on their evolution.

Our research also includes developing and applying mathematical modelling to understand the health and economic impact of public health interventions allowing us to contribute to the policy decision-making process. We evaluate programmes, interventions and innovative models of healthcare delivery in order to gain insight into health and management to inform population health and policy direction.

We contribute to undergraduate, postgraduate and short course teaching at UCL.

The Centre hosts the National Institute for Health Research (NIHR) Health Protection Research Unit (HPRU) in Blood Borne and Sexually Transmitted Infections, a partnership with Public Health England and a collaborative undertaking with the London School of Hygiene and Tropical Medicine. The HPRU conducts research to improve the health of the population and helps develop policy guidelines for those working in health protection.

## **Our research**

Our research focuses on infectious diseases and we lead a number of national and international collaborations which examine HIV and ageing, drug toxicities, resistance, HIV co-infection and changes over time in treatment patterns and outcome. We also conduct research on sexual behaviour and HIV testing in people without HIV. Our mathematical modelling includes developing and fitting a model to the HIV epidemic in men who have sex with men and in specific countries with generalised epidemics, including Zimbabwe and Malawi.

## **Where we work**

We collaborate with a number of partners and funders worldwide. These include the World Health Organisation, the Bill & Melinda Gates Foundation, the Africa Health Research Institute, Médecins Sans Frontières, the National Institutes of Health and the EU. Within the UK, research is mainly funded by the NIHR and the Medical Research Council.

**i** To find out more visit:  
Website: [ucl.ac.uk/global-health/igh-centre-list/centre-creme](https://ucl.ac.uk/global-health/igh-centre-list/centre-creme)

## CASE STUDY:

# Improving childcare practice in India and Pakistan

The Sustainable Programme Incorporating Nutrition and Games (SPRING), funded by the Wellcome Trust, brings together researchers from the London School of Hygiene and Tropical Medicine, University College London, and the University of Liverpool, along with the NGO Sangath in India, and the non-profit Human Development Research Foundation in Pakistan.

SPRING provides home-visit interventions from pregnancy through the first 24 months of life, promoting optimum childcare practice, mother-child interaction and stimulation through play. The impact of SPRING on child development and growth is being evaluated through a cluster randomised controlled trial in Pakistan and India. In Pakistan, SPRING is delivered through routine monthly home visits carried out by government-appointed Lady Health Workers. In India, it is delivered by project-appointed workers.

The Centre for Global Health Economics is involved in analysing the cost and cost-effectiveness of interventions at scale. Our work also measures key factors on the pathway to change, such as maternal agency, capability and time use.



A baby playing with a water pot carrying base during a home visit in Rewari, northern India.

“The Centre for Global Health Economics is involved in analysing the cost and cost-effectiveness of interventions at scale.”

# The Centre for Global Health Economics

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The Centre for Global Health Economics offers world-class research and training in economics and decision science, to help find pragmatic and sustainable solutions to global health problems.

We undertake innovative research and apply it to the significant global health challenges of the 21st century. Our researchers contribute expertise in the fields of health, Behavioural and Development Economics, decision science, and mathematical and epidemiological modelling.

We understand that economic, social, cultural and policy factors play significant roles in determining the demand and supply of health care goods and services, so we conduct rigorous and cutting-edge economic evaluations of complex global health trials, complemented by analyses of scalability, sustainability, affordability and efficiency to explore, and help address these issues. Our research also extends to the development and application of statistical, mathematical and economic models to assess the effectiveness of interventions to reduce disease burden, and guide the optimal allocation of resources to inform national health policy and spending priorities.

## **Our research**

Our research expertise includes economic evaluations within pragmatic trials of complex health interventions to improve maternal and child health, nutrition, and non-communicable diseases. We are also conducting exploratory work to identify scalable and sustainable service delivery mechanisms for early child development, and macroeconomic modelling of efficient health spending on HIV, tuberculosis, nutrition and universal health coverage.

## **Where we work**

We undertake research in Afghanistan, Australia, Bangladesh, Belarus, Ethiopia, Iran, India, Kenya, Malawi, Mozambique, Nepal, Niger, Nigeria, Pakistan, Papua New Guinea, Peru, Romania, Somalia, South Africa, Sweden and Uganda. We collaborate with a number of governmental partners, Foundations and NGOs. These include the World Bank, the Bill and Melinda Gates Foundation, the World Health Organisation, and the UK Department for International Development.

**i** To find out more visit:  
Website: [ighe.org](http://ighe.org)  
Twitter: [@UCLIGHE](https://twitter.com/UCLIGHE)  
Facebook: [facebook.com/igh.cghe](https://facebook.com/igh.cghe)

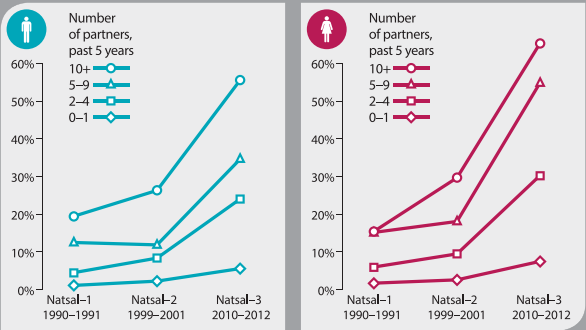
# Surveying sexual behaviour across Britain

The National Surveys of Sexual Attitudes and Lifestyles (Natsal) are the world's largest, most detailed studies of sexual behaviour. People are randomly selected based on their postcodes, and invited to participate, so the surveys represent the general population in Britain. The multi-disciplinary project is being led by UCL, and brings together researchers from the London School of Hygiene & Tropical Medicine, the University of Glasgow, and NatCen Social Research.

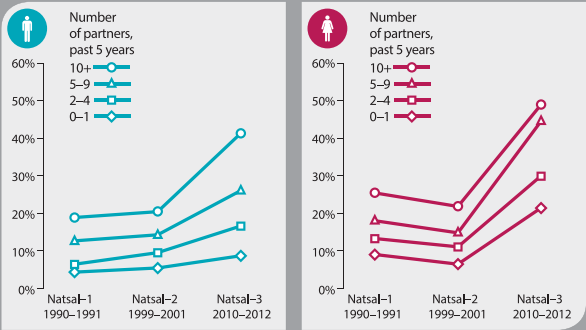
Natsal has taken place every 10 years since 1990 and has interviewed more than 45,000 men and women, spanning those born through much of the twentieth century. The next survey in 2021 will collect information from 10,000 people aged 15-59 using computerised questionnaires to ensure privacy. Survey answers will be combined with information from biological samples (such as urine to test for STIs) and routinely-collected data (such as health records).

By combining Natsals, we will create a resource that provides a comprehensive picture of the sexual health of the nation and show how this has changed over time and across generations. The findings will guide policy on services and interventions (such as chlamydia screening, sex and relationships education) to improve sexual health in Britain.

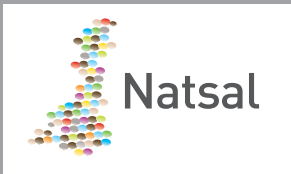
Sexual health clinic attendance, past 5 years (people aged 16–44)



HIV testing, past 5 years (people aged 16–44)



Highlights from Natsal-3  
Conducted: September 2010 - August 2012



“We will create a resource that provides a comprehensive picture of the sexual health of the nation and show how this has changed over time and across generations.”



# The Centre for Population Research in Sexual Health and HIV

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The Centre for Population Research in Sexual Health and HIV aims to deliver world-leading research that benefits the population and impacts policy and practice, locally, nationally and internationally.

The Centre brings together a multidisciplinary team of public health specialists, epidemiologists, clinicians, statisticians, health service researchers, and social and behavioural scientists who have an interest and expertise in a wide range of issues relating to sexual health and STIs, including HIV/AIDS.

Our researchers work on projects spanning public health; health services research (including eHealth); epidemiology (classical, molecular); mixed-methods research (combining quantitative and qualitative methods); statistics (methodological, applied); and intervention development and evaluation.

## **Our research**

Our research aims to address key sexual health questions to inform policy and practice for the general population, specific communities, marginalised groups and service users. We deliver a programme of high-quality research that benefits from uniting bio-behavioural, social, epidemiological, health service and public health expertise and perspectives. Our research includes the British National Surveys of Sexual Attitudes and Lifestyles, which are among the largest and most detailed scientific studies of sexual behaviour in the world. It also includes a range of projects to prevent and reduce the risks of blood-borne and sexually transmitted infections, including HIV.

## **Where we work**

Our main focus is UK-based research on sexual health, STIs and HIV in the general population, specific communities, marginalised groups and service users. Where applicable we translate this experience to other settings. Our major international collaborators are based at the Africa Health Research Institute (AHRI) in South Africa, with other international collaborations, predominantly in sub-Saharan Africa.

Our funding comes from a range of sources, including the National Institute for Health Research (NIHR), the Wellcome Trust, and UK Research and Innovation (UKRI).

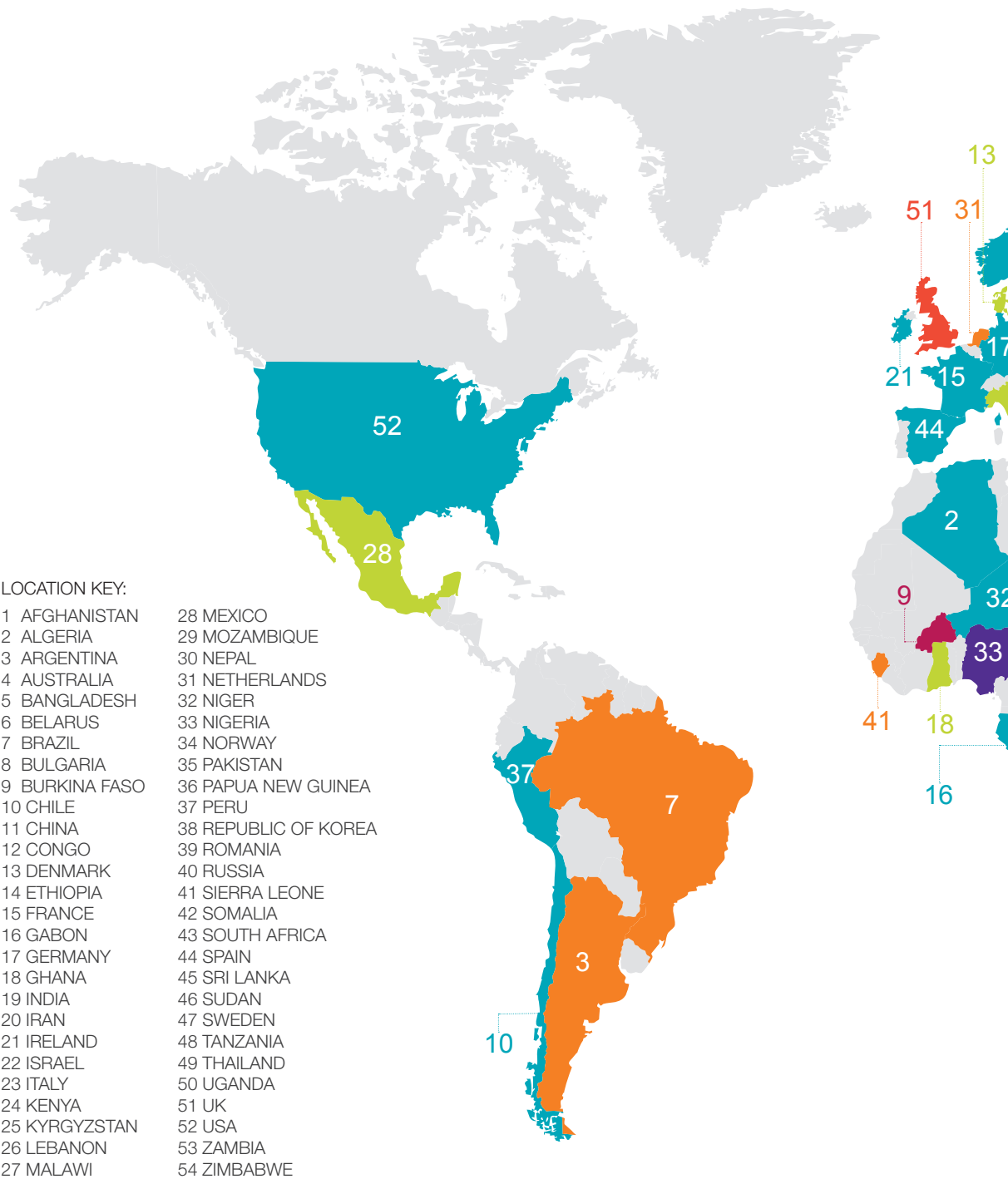
**i** To find out more visit:

Website: [ucl.ac.uk/global-health/igh-centre-list/centre-prshhiv](https://ucl.ac.uk/global-health/igh-centre-list/centre-prshhiv)

Twitter: [@UCL\\_SexHealth](https://twitter.com/UCL_SexHealth)



# Research Map



COLOUR KEY:

1 study

2 studies

3 studies

4 studies

5 studies

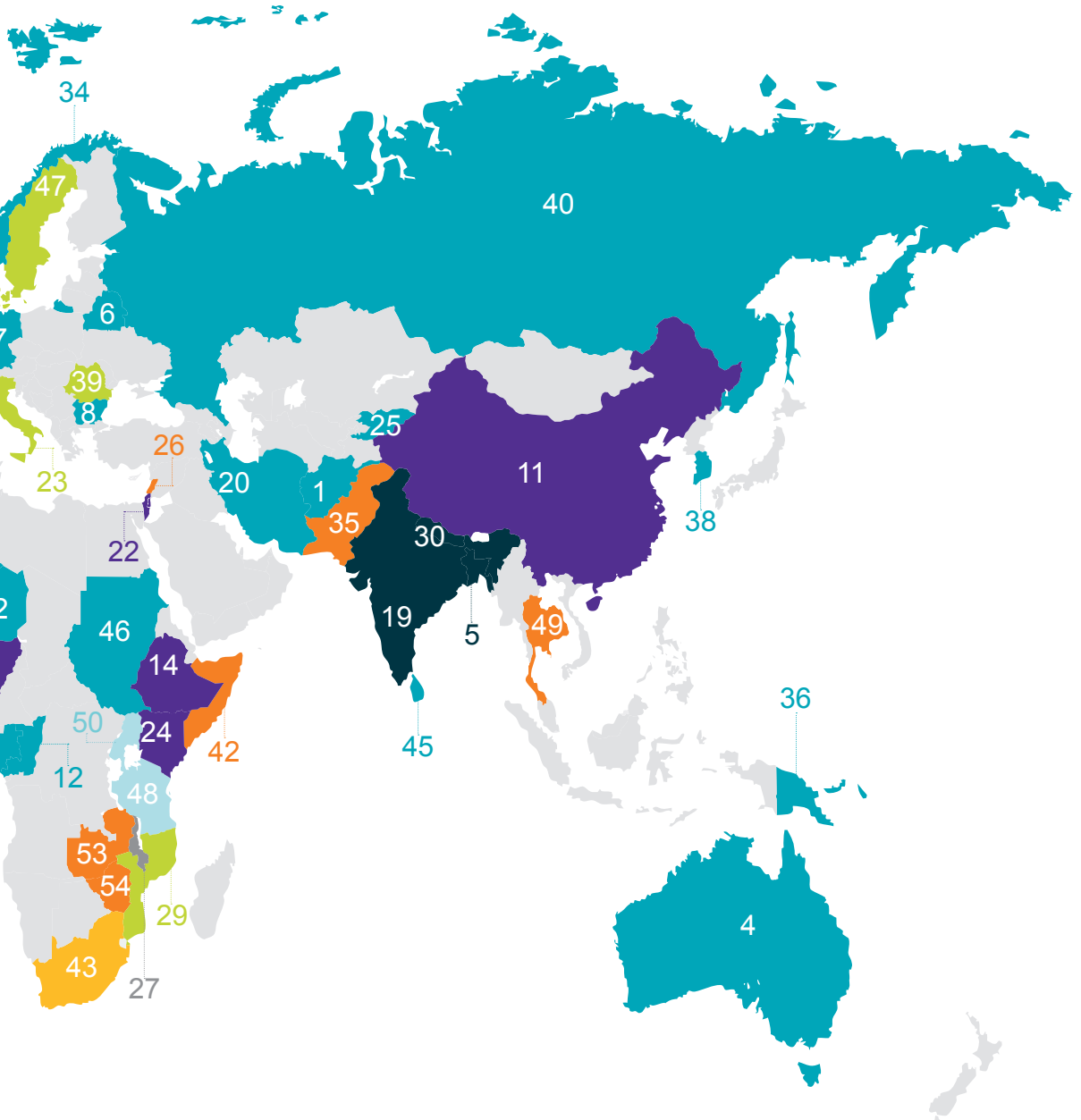
6 studies

10 studies

12 studies

18 studies

50 studies



## CASE STUDY:

# Studying the impact of early life gut microbiota on human health

Baby Biome Study is a new UK birth cohort study, which responds to an evolving understanding that differences in early-life gut colonisation, and interactions with the immune response, affect health in childhood and later life. Observational studies already provide strong evidence of associations between events such as Caesarean section or early life antibiotic exposure and obesity or asthma. This is concerning because rates of elective Caesarean section and intrapartum use of antibiotics are increasing, with yet unknown implications for long-term health of infants or the selection of antimicrobial resistance.

This study aims to provide a population level view of the complex interactions between microbial and host genetics, and biological, social and environmental factors to understand the role of gut microbiota and immune response variation in driving obesity, asthma and long-term health. These insights could be used to inform future clinical and public health interventions. The project has already undertaken a large pilot study funded by the Wellcome Trust, which recruited nearly 3,500 mother-baby pairs and the Centre for Molecular Epidemiology and Translational Research is hoping to expand the study to 40,000 mother-baby pairs.

For further details see:  
[ucl.ac.uk/igh/research/a-z/baby-biome-study](http://ucl.ac.uk/igh/research/a-z/baby-biome-study)



The Baby Biome pilot study recruited nearly 3,500 mother-baby pairs at birth

“The study aims to provide a population level view of these complex interactions... to inform future clinical and public health interventions.”

# The Centre for Molecular Epidemiology and Translational Research

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The UCL Centre for Molecular Epidemiology and Translational Research aims to drive world-class interdisciplinary global health research, with a particular focus on infectious diseases, through whole system epidemiological approaches, incorporating molecular and ‘omic’ technologies into large-scale population and clinical studies.

Infectious disease epidemiology is changing rapidly, driven by advances in microbiological technologies and statistical methods. The Centre sits at the intersection of epidemiology and biological sciences, with a strong emphasis on clinical and public health medicine applied to complex global health problems. We provide a focal point for interdisciplinary research by catalysing collaboration between population health researchers, microbiologists, clinicians, basic scientists and computational biologists.

Our researchers combine deep understanding of the core principles of infectious disease epidemiology with expertise in molecular and omics technologies, big data, and globalisation. We understand that an interdisciplinary and integrated approach is needed to ensure that our combined datasets are interrogated with good understanding of their limitations and a firm sense of the wider picture. This underpins our undertaking of robust causal inference epidemiology, and allows us to effectively develop and evaluate interventions, including those targeted at the most disadvantaged populations globally. We developed STROME-ID as a STROBE extension reporting guideline for infectious disease molecular epidemiology, which has been adopted by the Equator Network.

## **Our research**

Our research spans high, middle, and low income settings, and a range of conditions, including sexually transmitted infections, HIV and other blood-borne viruses, Ebola, tuberculosis, influenza, malaria, antimicrobial resistance, childhood infections, the microbiota, and vertically transmitted infections.

## **Where we work**

We undertake research and advise on international policy all over the world in countries including, Brazil, Europe, the United Kingdom, Malawi, Myanmar, Romania, and South Africa. We work with the Association of Human Rights Institutes, the World Health Organisation, the Wellcome Trust, the National Institute for Health Research, the Medical Research Council, the Sanger Institute – pathogens group, Public Health England, the European Centre for Disease Prevention and Control, the UK Department for Health and others.

**i** To find out more visit:

Website: [ucl.ac.uk/global-health/igh-centre-list/centre-metr](https://ucl.ac.uk/global-health/igh-centre-list/centre-metr)

#### CASE STUDY:

## Mobilising communities to address violence against women and girls in India

In a partnership with the Indian non-government organisation Society for Nutrition, Education and Health Action (SNEHA), the SNEHA-TARA trial is testing the effects of community mobilisation using groups and volunteers to prevent violence against women and girls. In India, 29% of women reported suffering physical violence in the last year, 7% sexual violence, and 30% multiple forms of violence, causing physical, mental, societal, and economic harms.

Our community intervention has been developed over 16 years of programmatic experience and two years of preparatory research, and our understanding of its effects is encapsulated in a theory of change. We are comparing 24 areas receiving support services, community group, and volunteer activities with 24 areas receiving support services only, primarily to assess the effects on the occurrence of intimate partner violence and domestic violence in the last year. Backed by public engagement, advocacy, and open publication, our vision is of a replicable community-led intervention to address the public health burden of violence against women and girls on a global scale.



Photo by Tejal Pandey for SNEHA

“Our vision is of a replicable community-led intervention to address the public health burden of violence against women and girls on a global scale.”

# The Centre for the Health of Women, Children and Adolescents

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The Centre for the Health of Women, Children and Adolescents aims to improve maternal, child and adolescent health across the world through inclusive research and engagement with community members, healthcare service providers, academics, and policymakers.

We conduct research using qualitative, quantitative, mixed methods, and participatory approaches to understand opportunities to improve the health of women, children, and adolescents, and to evaluate complex interventions through implementation science and controlled trials.

We promote research as a collaboration between researchers, community members, healthcare providers, and policymakers by increasing their engagement at each stage of the research cycle, from asking questions and designing research to collecting and analysing data, and reporting. We emphasise the inclusion of research participants and potential beneficiaries, with specific attention to those facing challenges linked with disability, poverty, gender-based discrimination, and structural violence.

We are a centre for education and training in maternal, child and adolescent health, as well as formative and evaluation research methods. We offer training opportunities for doctoral and postdoctoral students, and mutual capacity building as part of collaborative research with non-governmental organisations and policymakers.

## **Our research**

Our current research partnerships are with academic institutions and non-government organisations in Afghanistan, Bangladesh, Brazil, China, Egypt, Ethiopia, Guatemala, India, Kenya, Liberia, Malawi, Mali, Mexico, Nepal, Niger, Nigeria, Pakistan, Sri Lanka, and Uganda.

The issues we are addressing include maternal, newborn, and child survival, early childhood development, nutrition, and mental health, particularly in the contexts of violence against women, child marriage, modern slavery, civil conflict, urbanisation, labour migration, and health system improvement.

## **Where we work**

Our work is currently supported by the Academy of Medical Sciences, the Bill and Melinda Gates Foundation, the British Academy, the Economic and Social Research Council, the Leverhulme Trust, the Medical Research Council, the National Institute of Health Research, UK Aid, the Wellcome Trust, and the World Bank.

**i** To find out more visit:

Website: [ucl.ac.uk/global-health/igh-centre-list/centre-hwca](https://ucl.ac.uk/global-health/igh-centre-list/centre-hwca)



## CASE STUDY:

# Mobilising communities to prevent and control diabetes in Bangladesh

Bangladesh Diabetes Mellitus: Action through Groups or Information for Better Control (D-Magic) is a three-year project to develop, implement and evaluate population-level interventions to prevent and control diabetes in rural Bangladesh. The project is led by the centre and funded by the UK Medical Research Council through the Global Alliance for Chronic Diseases.

Initial research into the social drivers and consequences of diabetes in rural areas was used to develop mHealth (the use of mobile phones to improve health) and community mobilisation interventions to prevent and control risk factors and disease. These interventions were implemented across a large population and then evaluated for effectiveness and scalability through a range of methods, including epidemiological surveys and a cluster randomised controlled trial, economic evaluation and process evaluation. This interdisciplinary, mixed-methods implementation science approach provides an understanding the effectiveness of the interventions and their potential scalability and transferability to tackle diabetes in other parts of Bangladesh and beyond.

For further details see:  
[gacd.org/research-projects/diabetes/dm13](http://gacd.org/research-projects/diabetes/dm13)



Blood glucose testing in rural Bangladesh

“This approach provides an understanding of the effectiveness of the interventions and their potential to tackle diabetes in Bangladesh and beyond.”



# The Centre for Global Non-Communicable Diseases

The Centre for Global Non-Communicable Diseases provides leadership in research and capacity building for the prevention and treatment of non-communicable diseases (NCDs) in high, middle and low-income settings.

The risks and impact of NCDs such as cancer, heart disease, diabetes and chronic lung diseases on both individuals and populations are driven by a complex mix of factors. These include early-life experiences, nutrition, environment, behaviour, society and politics.

Our centre undertakes research and education on NCDs, with a particular focus on low and middle-income countries. Our aim is to build an evidence base of effective community, health system and policy interventions to prevent suffering and premature mortality. The centre encompasses a global network of researchers spanning UCL and other leading academic centres, as well as clinical and community partners in diverse settings.

## Our research

We use quantitative, qualitative and economic methods to undertake interdisciplinary research to better understand and mitigate the occurrence and consequences of the world's largest causes of morbidity and mortality. Our research examines the drivers, distribution and effects of NCDs and their risk factors at the individual, community, health-system and policy levels. Our work includes anthropological studies, intervention development, implementation and evaluation, health systems research and policy analysis.

## Where we work

We undertake research across a growing number of countries, including Bangladesh, Nepal, India, Kenya, Uganda, Senegal, Somalia, Malawi, South Africa and Saudi Arabia, and we collaborate with a number of governmental and non-governmental partners, such as the Diabetic Association of Bangladesh.



**i** To find out more visit:

Website: [ucl.ac.uk/global-health/igh-centre-list/centre-gncd](https://ucl.ac.uk/global-health/igh-centre-list/centre-gncd)

Twitter: @UCL\_NCD

## Accelerating gender equality in global health

Global Health 50/50 aims to address how we can fast-forward the pace to change to make global health more gender equal. The project does this by emphasising advocacy based on evidence, transparency for accountability and a belief that progress is possible and necessary. The primary output is the Global Health 50/50 report, heralded as 'a landmark in the history of global health' by The Lancet, which engages directly with 140 global health organisations to assess the gender responsiveness of internal workplaces and external programmes. The report includes a series of concrete recommendations organisations can use to advance gender equality.

The initiative reflects the Centre's continued commitment to improving gender equality in the global health workforce. Given the high number of our students who go on to work in this sphere, this is a key area of focus for us, alongside pushing boundaries and working across all sectors to advocate for a more nuanced understanding of the complex relationship between gender norms and health status.

For further details see:  
[globalhealth5050.org](http://globalhealth5050.org)  
Twitter: @GlobalHlth5050



At the launch of the 2019 report in Addis Ababa, left to right: Dr Vera Songwe, Executive Secretary of the UN Economic Commission for Africa; Mr Michel Sidibe, Executive Director of UNAIDS, Prof Sarah Hawkes, UCL; Dr Senait Fisseha, Chief Advisor to Director General of WHO; Her Excellency Sahle-Work Zewde, President of the Federal Democratic Republic of Ethiopia; Dr Kent Buse, Chief, Strategic Policy Directions, UNAIDS; Dr Fitsum Arega, Ambassador of the Government of the Federal Democratic Republic of Ethiopia to the USA

“The initiative reflects the centre’s continued commitment to improving gender equality in the global health workforce.”

# The Centre for Gender and Global Health

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The Centre for Gender and Global Health comprises a multidisciplinary team that conducts research and works alongside policymakers and policy influencers to address the complex relationships between gender norms and health status.

The centre seeks to unpick the complex relationships between gender norms and health status. Working as an interdisciplinary team, alongside policymakers and policy influencers our expertise ranges from anthropology to applied policy analysis.

We view gender as both a determinant of health behaviours and a key influence on how the health sector responds to everyone's rights to health and wellbeing. Working with partners in civil society and policy spheres, and colleagues from across UCL and other academic institutions, we aim to ensure that gender is recognised as a key determinant of health outcomes, and that policies and programmes, which address how gender norms influence health, are informed by rigorous evidence of effectiveness, acceptability and feasibility.

Alongside our research, we host a regular speaker series on gender and global health featuring a diverse range of disciplinary perspectives, and a monthly blog on gender, intersectionality and health.

## **Our research**

Our research focuses on addressing the complex relationships between gender norms and health status. Areas include gender-based violence, gender and non-communicable diseases (NCDs), policy analysis, maternal and child health, gender and disaster, mental health and gender equality within global health organisations.

## **Where we work**

We work across the globe, from the smallest island states, to the informal settlements of the world's most populous nations, and many locations in-between. The countries we work in include Afghanistan, Bangladesh, India, Iraq, Mexico, Nepal, Pakistan, Peru, South Africa, Tunisia, Turkey, the United Kingdom and Vietnam.

We collaborate with a range of governmental partners, NGOs, research institutions and universities around the world on our research. Current funders include the Medical Research Council, the European Union, the Wellcome Trust, the Arts and Humanities Research Council and the Government of Sweden.

**i** To find out more visit:  
Website: [ighe.org](http://ighe.org)  
Twitter: [@UCLGenderHealth](https://twitter.com/UCLGenderHealth)  
Blog: [ighgc.org/blog](http://ighgc.org/blog)

#### CASE STUDY:

## Investigating the impact of forced migration on health in Somalia

Forced migration, as a result of conflict and disasters, often poses high risks to health. In southern Somalia, mass displacement of people occurred during the famine of 2011 and the food crisis of 2017. Following on from work done on a controlled cluster trial of humanitarian cash transfers in Somalia in 2015-2016, we piloted a nutrition and mortality monitoring system to follow the impact of the 2017 food crisis on internally displaced people arriving in to camps near Mogadishu.

Working together with our partner, Concern Worldwide, we reported monthly data on key health and nutrition indicators to humanitarian agencies via the cluster coordination system. Motivated by this data, which indicated crisis-level mortality rates and extremely high levels of malnutrition, we pursued funding to carry out qualitative research with internally displaced people to better understand why, when, and how they take decisions on migration and how they perceive the associated risks to health.



MUAC measurements being taken by a community health worker (CHW) in a camp near Mogadishu

“Data indicated crisis-level mortality... we pursued funding to carry out qualitative research to better understand why.”

# The Centre for Climate Change, Migration, Conflict and Health

The Centre for Climate Change, Migration, Conflict and Health provides world-leading expertise on the links between global health and climate change, migration and conflict, while also examining policy and humanitarian responses to disasters.

The Centre aims to build the evidence base and enhance knowledge and understanding of the key threats and opportunities facing global health from climate change, migration, and conflict; and how they interact. We also design and evaluate effective policy and humanitarian responses to disasters to protect and enhance global health. We publish our research findings in high impact journals and ensure effective dissemination to decision makers and stakeholders.

## Our research

Our research expertise includes investigation of the health impacts of climate change, conflict, migration, and natural disasters, and the development of testing of interventions to mitigate those impacts. We adopt a multi-disciplinary approach to our work and utilise a range of mixed methods to address the most pressing research questions within our chosen topics. We are looking at the development of indicators for climate change and health and we host the Lancet Countdown: Tracking Progress on Health and Climate Change initiative. We are developing the use of longitudinal nutrition and health surveillance systems to improve epidemiology and response in humanitarian emergencies and undertake controlled cluster trials of cash transfers, mHealth, and other interventions in these contexts. We also study the impact of humanitarian emergencies and migration on mental health and investigate how people with disabilities are affected by disasters as well as their involvement in disaster risk reduction. We host the UCL-Lancet Commission on Migration and Health.

## Where we work

We undertake research in countries around the world, including Somalia, Niger, Lebanon, the polar regions and Small Island Developing States. We work with numerous governmental partners, foundations and NGOs. A major collaborator is The Lancet, and we also work with the Natural Environment Research Council, the Research Council of Norway, Concern Worldwide, the University of Agder in Norway, the London Polar Group, and the Polar Research and Policy Initiative, amongst others. Our donors include the Wellcome Trust, ClimateWorks Foundation, the European Climate Foundation, the Department for International Development, USAID, and the European Community Humanitarian Office.



**i** To find out more visit:

Website: [ucl.ac.uk/global-health/igh-centre-list/centre-ccmch](https://ucl.ac.uk/global-health/igh-centre-list/centre-ccmch)



# Study with us

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We take a unique, cross-disciplinary approach to global health that is reflected in our approach to teaching. We use our position within a multi-faculty university to draw on the expertise of staff from across UCL in our taught and research programmes.

## Postgraduate taught programmes

### [Applied Infectious Disease Epidemiology MSc](#)

Infectious disease epidemiology is changing rapidly, driven by advances in microbiological and statistical methods. This programme builds on UCL's research strengths, and provides training in core epidemiological skills. This programme will also focus on new technologies for analysing pathogens ('omics) and their applications in tackling complex global public health challenges. Graduates are equipped for a career at the intersection of epidemiology, biology and clinical medicine.

### [Global Health and Development MSc/PGDip/PGCert](#)

This MSc takes a unique cross-disciplinary approach to global health and attracts students from a range of academic and professional backgrounds. The programme challenges students to understand the complex forces that shape health worldwide, by developing their understanding of the principles underlying research, policy and practice in global health, fostering critical thinking, and building transferable skills. Core modules on global health, research methods, health systems and power and politics are followed by a wide range of optional modules from within the department and across UCL.

### [Global Health and Development: tropEd programme MSc](#)

This programme combines UCL modules of the MSc Global Health Development with modules taken at tropEd network institutions in the UK, Europe and around the world. This route maximises professional and educational networking opportunities and international experiences that enhance employability. Mobility across leading international institutions prepares students to work effectively in multicultural and multidisciplinary environments. Students also experience diverse learning styles and perspectives on global health problems.

### [Health Economics and Decision Science MSc](#)

This innovative programme spans the disciplines of economics, statistics and epidemiology – training students in applied problems, while providing the theoretical foundations expected of an outstanding UCL postgraduate degree. Students complete eight taught modules in economics and decision science, and a research project. Some students will have the opportunity to undertake an industry internship. Alumni from this programme now work in academia, the pharmaceutical industry and consultancy in the UK and globally.



## Postgraduate research programmes

### Global Health MPhil/PhD

Our MPhil/PhD programme offers opportunities to students from a range of backgrounds to explore topics within a broad global health agenda. The programme aims to equip students for the diversity and demands of a career in global health. Research areas include: adolescent health; child health and development; climate change and the environment; disability; economics of global health and development; infectious diseases; newborn health; noncommunicable diseases; nutrition; population and family planning; quality of care; urban health; and women's and reproductive health.

MPhil/PhD research at the Institute for Global Health normally has an international dimension, often with field work carried out abroad. This may require travel to the study site to collect preliminary data. The Institute also runs a weekly seminar programme which provides an opportunity for our research community to share experiences and ideas through presentations.

### Global Health and Infection MD (Res)

This MD(Res) is suitable for clinical trainees in infectious diseases, sexual health, HIV medicine or public health. Students will benefit from the institute's strong research base in infectious diseases, including tuberculosis, sexually transmitted infections, HIV and viral hepatitis. Those with an interest in sexual health and HIV will gain from our links with the Central and North West London NHS Foundation Trust, which is a very

large provider of both sexual health and HIV services. The institute also has substantive links with UCLH and the Royal Free London Trusts, which specialise in tuberculosis, HIV and infectious diseases.

### UCL International Summer School

We run an undergraduate-level module, called Global Health: Local and International Perspectives, as part of the UCL International Summer School. The module provides an overview of the major themes within the discipline of global health focusing on how decisions made at international and national levels affect the health of individuals and communities.

### Short courses

We offer a range of short courses, including:

- Climate Change and Health
- Gender and Global Health
- Research Methods: HIV, Sexual Health and Infectious Disease

Find out more about our short courses at [ucl.ac.uk/lifelearning/courses](https://ucl.ac.uk/lifelearning/courses)

Find out more about studying at the Institute for Global Health: [ucl.ac.uk/global-health/study](https://ucl.ac.uk/global-health/study)





Photograph by IGH PhD student Daniel Strachan, taken during field work for his thesis; “Ugandan community health worker motivation: using the Social Identity Approach to explore an accepted constraint to scaled up health strategies”. Pictured is a volunteer community health worker travelling to visit villagers in Western Uganda.

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the Institute for Global Health:

[ucl.ac.uk/global-health/study](https://ucl.ac.uk/global-health/study)

## Disclaimer:

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Knocking over 'bad' foods with 'good' food at a funfair about preventing and controlling diabetes in Janakpur, Nepal (photo by Anuj Adhikary)



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