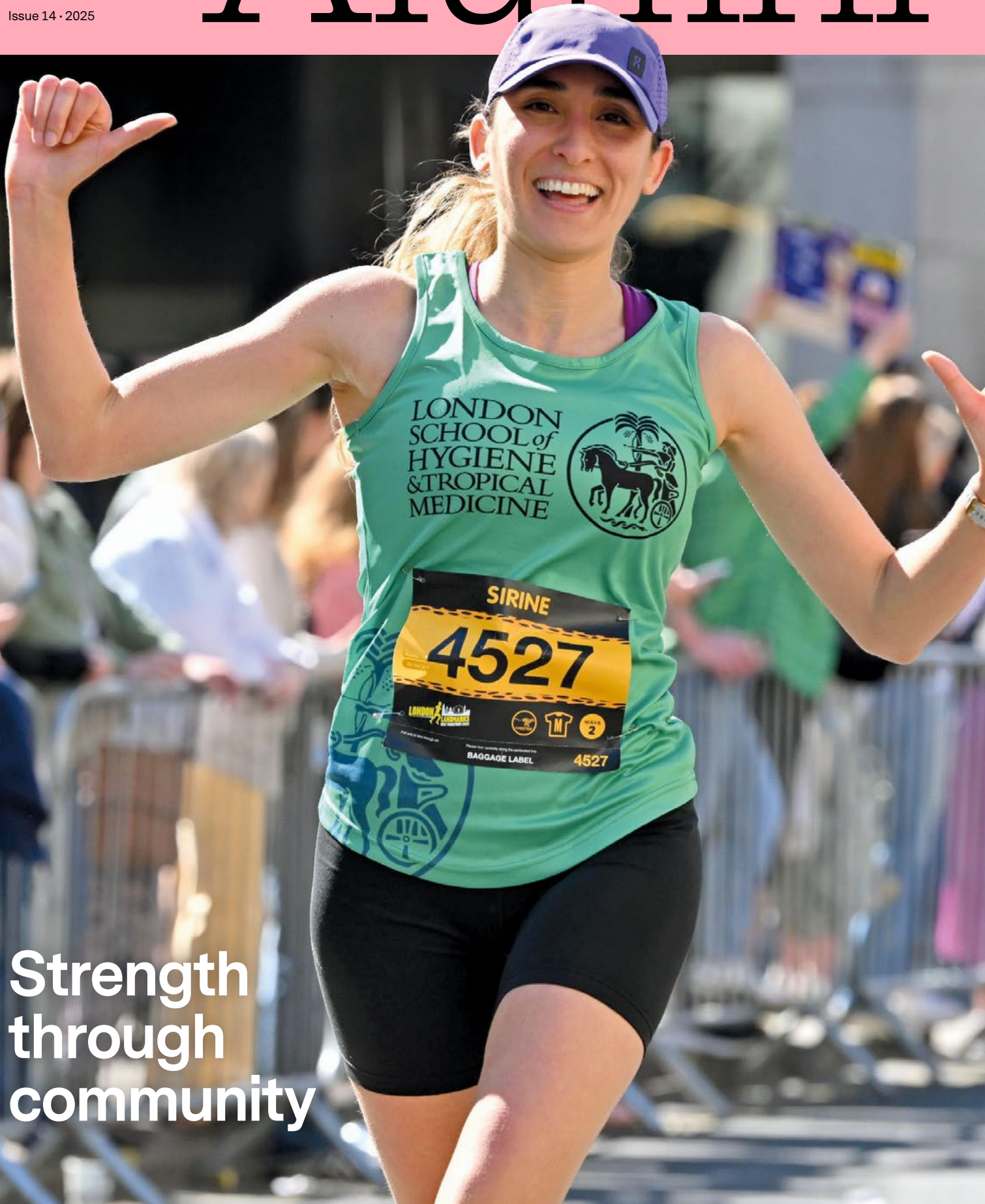




Alumni

Issue 14 • 2025



Strength
through
community



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From the editor



“For me, these global networks represent more than professional ties; they are communities rooted in shared values of compassion, equity, and scientific progress.”

Tasdik Hasan
MSc Global Mental Health, 2018

Welcome to the latest edition of your Alumni News! In challenging times, we are delighted to bring you tales of inspiration, of innovation, and, dare I say it, perspiration!

Turbulent global events continue to take their toll, and of course it’s the communities least able to withstand such impacts that are worst affected. The LSHTM family – alumni, students, staff and partners – have always sought to support the vulnerable and are now stepping up to support each other.

In this issue we highlight examples of courage, resilience and compassion, and we wish to reassure our alumni that your alma mater continues to stand up for public health and health equity around the world. Whether it’s our research on health inequities in maternity care or our toolkit for academics challenging dangerous misinformation, we are leading the conversation in so many ways.

I have personally experienced countless examples of our community coming together to support each other this past year. At our chapter events, where connections are forged and renewed, or through online mentoring and sharing of career opportunities, and, most strikingly, in the awe-inspiring response to this year’s telephone fundraising campaign, you have demonstrated care and consideration for others, knowing that we are stronger and better together.

I would like to share a quote from Tasdik Hasan, a graduate of our MSc Global Mental Health, who speaks so eloquently on the power of our alumni network:

“For me, these global networks represent more than professional ties; they are communities rooted in shared values of compassion, equity, and scientific progress.”

Thank you to everyone in the Development & Alumni Relations team, across LSHTM and beyond, who has worked so hard to bring you this magazine. I hope you enjoy reading and please continue to share your ideas on how we can stay stronger together!

Chris Conneely
Head of Alumni Relations & Regular Giving

Cover: Sirine Dehmani running the London Landmarks Half Marathon in support of LSHTM scholarships



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Opposite: The Pumphandle Social space at LSHTM has taken on many forms over the years. In 2023–2024, it was renovated to create a welcoming and versatile environment for students and staff to study, socialise, and host events. © LSHTM

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LSHTM's Director, Professor Liam Smeeth, who this year received a CBE in the King's Honours for services to public health and education, shares his reflections on global challenges and the need to come together to bring about a fairer, healthier world.

Director's update



Since the 2024 issue of our alumni magazine, it feels as though the world is a very different place. There is no denying that we face challenging times politically and economically. Cuts to international aid have had a huge impact on public health programmes and research around the world. I have heard from many friends and colleagues who are having to deal with the often devastating fallout that such recent decisions are continuing to have on the health of the most vulnerable. Health services and research programmes are being damaged, with jobs lost and grants suspended.

LSHTM's mission is to improve health and health equity worldwide through two interwoven activities: research and education. In such a challenging landscape, where many political leaders are turning against science, against international co-operation, and are not giving human suffering the priority it needs, it is tempting to give up on both of these. But I argue that this is exactly the time when we need to recommit to our mission.

When resources are in short supply, better understanding of fundamental drivers of health and what the most cost-effective interventions are to improve it becomes more important – not less. Research provides the evidence needed to underpin our united efforts to improve health and health equity in the belief that the future of public and global health is an ongoing commitment to improving the lives of everyone in society.

In a time of accelerating change and uncertainty, in which so many of our communities face ever more complex challenges to human health, the expertise and knowledge that come from education are needed more than ever. Strengthening human capacity, training the next generation of health scientists and leaders, becomes ever more vital. As in the past, if we're going to continue to survive and thrive, we'll need the insights and disciplines of public health to play their part.

Thus far, I am relieved to say that LSHTM has been spared significant direct impact on our work; we of course stand with our colleagues and partners around the world and will continue to work closely with them to deliver on our collective mission to bring about health equity.



Liam congratulates Brian Greenwood on his lifetime achievement award at WHO

“In a time of accelerating change and uncertainty, in which so many of our communities face ever more complex challenges to human health, the expertise and knowledge that come from education are needed more than ever.”

The climate for UK higher education also remains challenging and we are taking steps to ensure we remain financially stable and build greater resilience to weather the strong headwinds that are currently buffeting many British universities. I and my colleagues are immensely grateful to alumni who support our student recruitment work, whether you are one of our alumni ambassadors or you engage with prospective students through our extensive global network of alumni chapters, your authentic voice speaks volumes about the impact LSHTM can have.

We were delighted to learn that LSHTM has now risen to number two in the world for public health (Shanghai Rankings 2024), testament to the calibre of our teaching and research and I congratulate my fellow colleagues, students, and alumni who collectively have contributed to our world-leading reputation. We continue to develop our London estate to enhance the student experience and the latest example of this can be seen in the stunning redevelopment of the old refectory, into the new Pumphandle Social. I warmly encourage you to see it for yourself, perhaps by coming back for an alumni event or attending one of our fascinating evening lectures where there's usually an opportunity to network with staff and students in our rather swish new social space. Later in the coming academic year we look forward to the completion of our new education centre on Tavistock Place; a purpose-built, modern and inviting learning environment that incorporates the newest technologies, enabling hybrid ways of learning that will continue to make our courses more accessible.

A key theme of this magazine is 'leading the conversation', highlighting how LSHTM is leading the way in research and education and using its unique position to promote health equity and to challenge harmful misinformation. Earlier this year, I had the privilege of attending the World Health Assembly in Geneva, where a true LSHTM legend, Professor Sir Brian Greenwood, was presented with a Lifetime Achievement Award by the World Health Organization. His contributions to global health and infectious disease are awe-inspiring, and his pioneering spirit and determination have undoubtedly saved countless lives over his 60-year career. I know so many of you will have been influenced by Brian's achievements, his guidance and mentorship; this accolade is so richly deserved.

Lastly, I recently had the pleasure of meeting students who worked on this year's telephone fundraising campaign, alongside some of our community fundraisers who have taken on challenges such as cycling from London to Brighton or running half-marathons around the capital. Together, through the generosity of alumni, students, colleagues, and loved ones, you have contributed over £100,000 this year towards our life-changing scholarship programme. I know these are difficult times for us all, which makes all your contributions and support – be it financial, or your time, advice or expertise, even more valuable to our students. Everyone at LSHTM, and all those future public health leaders you have supported and inspired, are immensely grateful to you. Thank you and keep in touch!

Public health and research stories are always hot topics in the international media and LSHTM, its pioneering research, high profile academics and alumni have featured strongly in the past year. Take a look at just a few of the highlights.

In the news



TIME

Tedros Adhanom Ghebreyesus

WHO Director General Dr Tedros Adhanom Ghebreyesus (MSc Immunology of Infectious Diseases, 1992) features in TIMEHealth2025

The Economist

Distrust in public-health institutions is not just an American problem

Professor Heidi Larson explains that a lack of confidence in vaccines is an early warning that a drop in vaccine uptake is likely to follow, as US health secretary Robert F Kennedy Jr replaces the panel of experts who decide the US's vaccination guidelines.

The Guardian

One in four women in England have serious reproductive health issue, survey finds

LSHTM-led survey of 60,000 women across England, which found 28% are living with a serious reproductive health issue and 74% recently experienced at least one reproductive health-related issue. Assistant Professor Melissa Palmer highlights that the findings also suggest ethnic inequalities in maternal health extend to other aspects of reproductive health.

CNN

Gaza death toll has been significantly underreported, study finds

The death toll in Gaza has been significantly underreported, a LSHTM study has estimated. Assistant Professor Zeina Jamaluddine said the results underscore the urgent need for interventions to prevent further loss of life.

INDEPENDENT

WHO declares mpox outbreaks in Africa a global health emergency as a new form of the virus spreads

Professor Michael Marks commented extensively in the media on the WHO declaring mpox outbreaks in Africa a global health emergency as a new form of the virus spreads.

ALJAZEERA

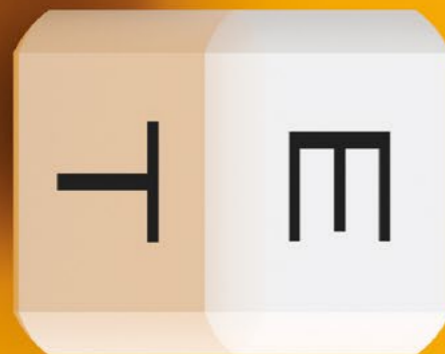
Africa HIV deaths to mount, as Trump stops funding. Here's why

Professor Anna Roca comments on the uncertainty in global health research funding following USAID cuts.

Read the latest news from LSHTM on our website: lshtm.ac.uk/newsevents

Leading the conversation

Discover how LSHTM research is shaping global conversations in public health. From cutting-edge studies to real-world impact, our work, and our people, continue to inform policy, drive innovation, and improve lives around the world.



As misinformation overtakes climate and conflict as the biggest global risk, bold collaborative action is needed to tackle the threat to science and health

LSHTM tackles misinformation

Professor Liam Smeeth, Director of LSHTM, has warned that vital public health areas such as pandemics, vaccines, climate and health and reproductive health “are at risk of being overwhelmed” by a new surge of health misinformation.

He has urged universities and research institutions around the globe to step up the fight against unprecedented misinformation attacks on public health interventions that, the vast majority of experts agree, save millions of lives each year.

Misinformation is incorrect or misleading information. This can be ‘fake news’ shared deliberately for fun or profit (disinformation) or political ends (propaganda) or shared out of genuine belief.

A new report from The World Economic Forum ranks misinformation and disinformation as the top global risk over the next two years, ahead of both extreme weather and state-based armed conflict.

Professor Smeeth said: “That misinformation and disinformation topped this ranking of global risks should be a wake-up call to institutions around the world that we have to become more agile and effective in our responses to dangerous health misinformation or risk a repeat of the kind of ‘infodemic’ we saw during the COVID-19 pandemic that put lives at risk.”

Last year, Professor Smeeth spoke out about the need to ignore misinformation circulating about the proposed WHO pandemic treaty, designed to help fight

the next pandemic, that Member States were ultimately unable to reach agreement on.

His intervention came as LSHTM developed its own plans to tackle health misinformation and, as part of this, published a set of communications principles to help staff looking to respond to health misinformation on key topics such as pandemics, vaccines, climate and health, and reproductive health.

Professor Smeeth said: “These vital areas for public health are at risk of being overwhelmed by a new surge in misinformation attacks that threaten to drown out life-saving public health advice and damage the public trust in experts who themselves are increasingly being targeted for simply talking about the scientific evidence.

“Public health depends on us being committed to our shared health while also being mindful of the needs and vulnerabilities of individuals. This is essential if we are to create a healthier, more sustainable and more equitable world.

“I’m convinced that leading public health institutions around the world have to make 2025 the year we join together to fight health misinformation in all its forms and protect our shared health. Bold action is needed, and LSHTM is redoubling its efforts to resist health misinformation attacks being generated and shared by powerful groups and individuals.

“But no institution can solve this problem alone. We need universities, research organisations, charities, and public bodies to join the fight and ensure we can do what matters: communicate the best available health information to health professionals and the public.”

“Misinformation attacks threaten to drown out life-saving public health advice and damage the public trust in experts.”

Professor Liam Smeeth,
Director LSHTM

LSHTM's counter-misinformation principles for communications

Decide your threshold

LSHTM cannot respond to every misinformation attack. A response to misinformation about key topics should be considered if it is both spreading widely and being shared by influential people/groups and likely to cause significant health harms or have a significant negative effect on LSHTM's work in this area.

LSHTM has identified four key topics related to its work at high risk of misinformation attacks: pandemics, climate and health, vaccines, reproductive health/women's health.

Choose your audience

Consider which audiences you are trying to influence. Directly targeting those generating misinformation is unlikely to work and will only fuel polarisation. Targeting the large audience of undecided 'don't knows' on any issue and, for example, persuading them not to share misinformation is a more effective strategy.

Engage with empathy

Any response should recognise that people sharing misinformation may be doing so out of genuine concerns and address those concerns sensitively. Instead of tackling core beliefs head on, which is likely to provoke a negative reaction, try a neutral framing of the topic (for example: "find out more...", "the facts about...") with accessible facts, stats, and links to credible sources people can investigate themselves.

Quarantine the attack

Only ever repeat a misinformation attack in a weakened form, otherwise you risk spreading the very misinformation you are trying to contain. If you are giving details of false claims always surround a weakened version of the misinformation with facts, strong counter-arguments, and links to credible sources.

Demonstrate consensus

People's understanding of complex science is closely linked to their perception of whether or not there is scientific consensus on an issue, so wherever possible provide evidence of consensus.

Build trust

Earn the trust of your audience by 'showing your working' at every turn and explaining the evidence clearly, accessibly, and honestly, including areas where there are real problems or uncertainties.

Join the debate:

Misinformation Unpacked

Monday 15 September 2025

[Join online](https://lshtm.ac.uk/newsevents/events/health-misinformation-unpacked) and be a part of this flagship event to discuss how to combat health misinformation: lshtm.ac.uk/newsevents/events/health-misinformation-unpacked

Further reading:

World Economic Forum Global Risks Report 2025: weforum.org/publications/global-risks-report-2025

Pete Wilton, Media Manager at LSHTM, who has been looking at how communications ideas can help us tackle dangerous health misinformation, explains how misinformation isn't a straightforward case of 'us and them'.

Decoding the spectrum of misinformation

I was preparing for a talk that I was going to give to fellow communications professionals, and had been reading about how those affected by misinformation were a diverse group and that people's beliefs on an issue were not fixed in a binary "I believe/I don't believe" position and could change over time and with experience.

That made me think about how I could apply the communications approach of segmenting your audience or choosing a target audience for potential interventions. What I came up with was 'The Spectrum of Misinformation': The idea that you could think about people as being somewhere on the spectrum (pictured below).

Generators are those who create fake news for fun or profit, *Believers* share misinformation either out of genuine belief or because it fits their agenda, *Neutrals* are "don't knows" who may be persuaded to share misinformation on an issue, *Sceptics* check claims against the facts and may be encouraged to challenge, while *Rejectors* don't understand why people believe.

The point is to make you think about who exactly you are trying to persuade and what a realistic and achievable outcome from an intervention is.

Generators of misinformation (misinformers) are a small but highly-motivated group driven by political dogma, money, or influence (or any combination of these). It's probably unrealistic to suggest they can be persuaded to stop. At best you might be able to contain their false claims, rather like quarantining an infectious individual. Stronger moderation and regulation may be the only way to cut off fake news at its source.

A more realistic goal might be to target *believers*, especially if their belief arises from genuine concerns, and convince them not to share. What specific concerns do they have? Could you address these by providing credible alternative explanations

and counter-arguments framed in a neutral way? For instance: 'find out the facts about vaccines' or 'discover the science of climate change'?

Neutrals (our "don't knows") are the largest group on most issues and are vulnerable to misinformation attacks that could persuade them to share false or misleading claims. As well as targeting them with facts and counter-arguments, stressing the scientific consensus on an issue could help to move them along the spectrum towards our *Sceptics* (this could be you!) who are, yes, sceptical of claims and likely to fact-check and challenge.

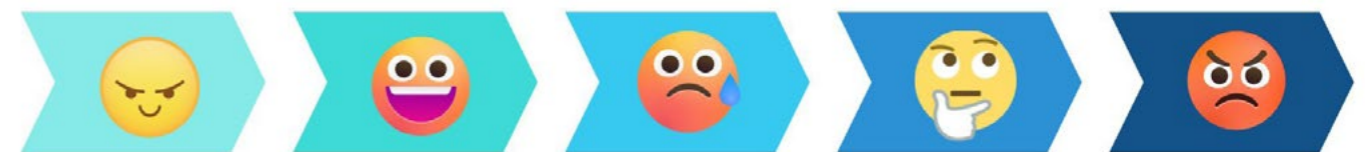
Rejectors are a group I'd never thought of before I had to imagine the polar opposite to a *Generator*. But once I did, I realised that *Rejectors* are a major issue because they don't really see what the problem is. They don't understand why anyone would believe in fake news and are reluctant to engage with it in case it damages their reputation.

Rejectors might, for example, dismiss people who believe fake news as gullible or think 'fact bombing' everyone with more and more evidence can fix things, often without thinking if it is accessible and addresses people's genuine concerns or is delivered by someone they will trust. Convincing *Rejectors*, who could be powerful allies, to engage is a key challenge.

To my surprise, this idea that started life as a rather jokey visual aid, resonated with my fellow communicators. They found it was a helpful starting point for thinking about who a particular intervention was aimed at and what it should, ideally, consist of.

For more on this fascinating topic, subscribe to Pete's blog '[The Spectrum of Misinformation](#)'

Note: This article is adapted from an original post on Pete's blog and reflects his personal views.



'Generator'	'Believer'	'Neutral'	'Sceptic'	'Rejector'
Creates fake news for fun or profit/politics	Shares from genuine belief or as fits agenda	"Don't knows" = most people, may share	Checks against facts, may challenge	Doesn't understand belief, resists engaging

Where are you on the spectrum? The Spectrum of Misinformation ©Pete Wilton



One in six infants clinically underweight across LMICs

“It’s wrong that some tragedies, such as infant and child malnutrition, continue to be largely silent, forgotten and ignored.”

Marko Kerac
Clinical Associate Professor, LSHTM

Left: MUAC on a child in Angola, 2021.
© Alexandra Humphreys

Over 10 million infants under six months may be underweight, according to a new analysis of data from low- and middle-income countries (LMICs).

The study, published in *BMJ Global Health* and led by researchers at the London School of Hygiene & Tropical Medicine (LSHTM) and the Emergency Nutrition Network (ENN), estimated the burden of malnutrition among infants using survey data collected across 56 countries.

The analysis drew on data from over 50,000 infants under six months, collected through Demographic and Health Surveys (DHS) across regions in Africa, Latin America & the Caribbean, Asia & the Pacific, and Europe.

The DHS are nationally-representative household surveys conducted across LMICs approximately every five years, and include data on the current weight, height (or length), age and weight at birth for infants.

In the study, infants with a low weight-for-age score (WAZ) were classed as underweight, infants with a low weight-for-length score (WLZ) were classed as too thin, showing signs of wasting, and infants with a low length-for-age score (LAZ) were classed as too small in length for their age. These are all globally-recognised indicators of malnutrition.

Across all of the countries measured, 17.4% of infants under the age of six months were clinically underweight, 15.5% showed signs of wasting, 19.9% were small in length for their age (stunted) and 15% were underweight at birth.

Marko Kerac, Clinical Associate Professor at LSHTM and lead author of the study, said: “Malnutrition is responsible for around 45% of child deaths globally. In 2022, undernutrition accounted for a total of 2.3 million child deaths, which equates to over 6000 deaths each and every day. It’s wrong that some tragedies, such as infant and child malnutrition, continue to be largely silent, forgotten and ignored.

“Our study also shows how crucial national datasets like the DHS are for global health research. The DHS, which provide openly accessible data for researchers like us to analyse, has currently been paused and if not restarted soon, future numbers will not be tracked. Without them, we cannot track the problem and progress and hold each other to account.

Infants suffering from malnutrition are at high risk of death, illness and poor development in the short term, and have a higher risk of non-communicable disease (including heart disease).

Marie McGrath, Technical Director at the Emergency Nutrition Network (ENN), PhD student at LSHTM, and co-author of the study, said: “Behind every one of the surveys we analysed is a personal tragedy. There is a baby suffering and devastated families experiencing daily worry and loss.

“The good news is that health services are primed to act. Growth monitoring - that helps identify underweight babies - is recommended in national health services worldwide. Babies born too early or too small need close follow-up and first vaccination at six weeks is a critical time to measure.

“National health services need direct investment in equipment, training and mentoring on identifying and managing these cases. Let’s reinvest, not reinvent.”

As this is an observational study using survey data, it only looks at a snapshot of the situation in each country. The team believe that the true number of infants experiencing malnutrition may be greater.

They also suggest that underweight scores (low weight-for-age) may be a better indicator of malnutrition compared to typically used low weight-for-length, due to higher data quality and stronger links to health risks. This supports the recently updated World Health Organization malnutrition guidelines, which now include underweight as a criteria for enrolment in supportive nutrition and health care for infants under six months.

After six decades on malaria's front lines, Professor Sir Brian Greenwood has won the WHO Director General's Lifetime Achievement Award, presented by Dr Tedros Adhanom Ghebreyesus, the WHO Director-General, at the 78th World Health Assembly.

Professor Sir Brian Greenwood receives WHO Lifetime Achievement Award

Professor Greenwood, whose work has had an extensive impact on major infectious diseases including malaria, meningitis, pneumonia and Ebola, is now the second LSHTM researcher to receive the award.

Upon accepting the award, Professor Greenwood expressed his deep gratitude to his colleagues – particularly those in Africa with whom he has worked throughout his career – as well as to his wife and two daughters for their support.

Pioneering Malaria Work

Professor Greenwood's global health career began in Nigeria in the 1960s, first at University College Hospital in Ibadan and later at Ahmadu Bello University in Zaria, where he developed a deep commitment to addressing infectious diseases and strengthening health systems in resource-limited settings. In 1980, he relocated to The Gambia to lead the MRC Gambia Laboratories as Director, where over the following 15 years he developed the institution into a globally recognised hub for tropical disease research.

In 1996, Brian returned to the UK to take up an appointment at LSHTM, where he contributed to research on meningitis, malaria and pneumonia in West Africa.

He is perhaps most widely known for his pioneering research in malaria prevention, including the introduction of insecticide-treated bed nets and leading clinical trials of the RTS,S malaria vaccine – the first to be recommended for widespread use.

Mentorship & Legacy

Professor Greenwood's impact extends beyond the communities reached by his infectious disease research, resonating with peers and colleagues around the world. He has been a long-standing advocate for medical education and research in Africa, having guided and inspired generations of scientists and public health professionals – including Dr Tedros, who credits him as a key influence in his career.

Professor Umberto D'Alessandro, outgoing Director of the MRC Unit The Gambia at LSHTM, said: "[Brian Greenwood's] commitment to mentoring the next generation of scientists has left a lasting legacy, inspiring innovation and leadership in global health. This recognition is a well-deserved tribute to a lifetime of impactful work. On a personal note, I am deeply grateful for Brian's guidance and mentorship throughout my career. His passion for global health has been a constant source of inspiration."

Looking Forward

In 2018, LSHTM established the Greenwood Africa Award to honour the achievements and future promise of mid-career African scientists working to control infectious diseases in sub-Saharan Africa. Professor Greenwood also co-founded the LSHTM Malaria Centre, now a globally recognised hub for interdisciplinary research and innovation in malaria. These initiatives help ensure that his legacy of impactful global health research continues to inspire and shape future generations. His contributions have left an enduring mark on LSHTM through both his scientific leadership and commitment to capacity building, that will no doubt pave the way for future researchers, doctors, and public health professionals for generations to come.

Brian's key milestones

1960s

Nigeria

Clinical registrar posts at University College Hospital, Ibadan, then Ahmadu Bello University, Zaria, ignited his lifelong focus on infectious diseases in resource-limited settings.

1980–1995

The Gambia

As Director of the UK MRC laboratories he built a multidisciplinary programme that transformed the unit into a world-renowned centre for research on malaria, meningitis, pneumonia and measles.

1996–2024

LSHTM

Back in London he expanded vaccine and chemoprevention studies, co-founded the LSHTM Malaria Centre and steered capacity-building consortia that trained dozens of African PhD fellows.



Professor Sir Brian Greenwood and Dr Tedros Adhanom Ghebreyesus holding the Lifetime Achievement Award by the World Health Organization

About the award

Established in 2019, the Director-General's Award for Global Health recognises individuals who have demonstrated exceptional dedication to public health throughout their careers. Presented annually, the award honours those who have shown outstanding leadership and achieved measurable impact in global health. This year, the award was also presented to Professor Awa Marie Coll Seck, Senegal's former Minister of Health, alongside Professor Greenwood.

In a recent scoping review published in *The Lancet Planetary Health*, authors assessed the strength of published evidence of shared drivers of climate change and antimicrobial resistance (AMR), highlighting outstanding research gaps, and make the case for integrated and interdisciplinary approaches to addressing these gaps.

Spotlight on AMR

Climate crisis & AMR

Key findings included evidence of so-called “harmful synergies”, or ways in which the worsening issues of climate change and AMR can have mutually reinforcing effects. Examples included studies of how rising temperatures, increased humidity, and extreme weather events can contribute to the growth and spread of commonly drug-resistant bacteria like *Escherichia coli* and *Staphylococcus aureus*. Examples of climate change potentially driving AMR were also cited, including extreme weather events (e.g. floods and hurricanes) that disrupt sanitation infrastructure, leading to outbreaks of waterborne diseases like cholera and typhoid. These drive greater antimicrobial use (AMU), accelerating resistance. In addition, climate-induced migration events may lead to crowding and disruption of health systems and sanitation, which further heightens the risk of infectious disease transmission, leading to additional opportunities for the emergence or acquisition of AMR as well as increased AMU.

Authors also identified the potential for “positive synergies” in addressing these related threats. Climate mitigation strategies, such as biofuel production and wastewater management, can simultaneously lead to reduced greenhouse gas emissions and lower antibiotic contamination in the environment. How-

ever, several key knowledge and research gaps remain. Co-authors noted a lack of comprehensive studies focusing on fungi, helminths, protists, and viruses in the context of climate change, and highlighted the need for additional empirical research on how specific climate hazards influence AMR across different settings and sectors, including healthcare, agriculture, and natural ecosystems. Additional interdisciplinary research and coordinated policies are necessary to address this dual threat, and a One Health approach that integrates environmental, animal, and human health will be essential for controlling the intertwined crises of AMR and climate change.

There is additional cause for optimism – funders like the Wellcome Trust, the Gates Foundation, and the Novo Nordisk Foundation have committed funding to incentivise innovative, cross-disciplinary approaches to jointly tackling the wicked problems of infectious diseases, AMR, and climate change, and new AMR research initiatives like the Climate AMR (CLIMAR) network have recently been established to take on these uniquely complex challenges. These are interrelated problems that we cannot afford to ignore, and that will require all our collective abilities and experiences to solve.

Below: A scientist holding a petri dish containing a variety of microbial colonies



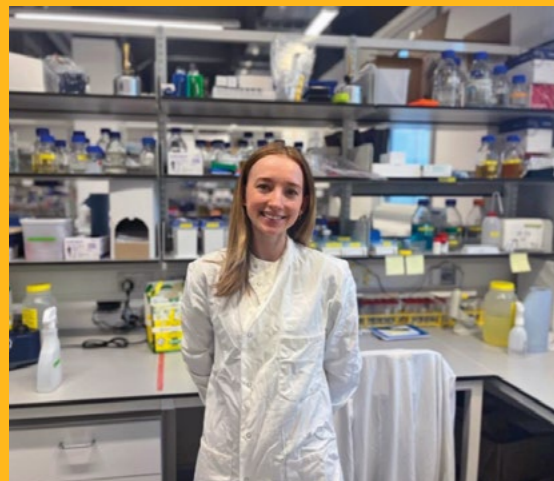
250,000 excess annual deaths by 2050

A recent report from the Intergovernmental Panel on Climate Change suggests that climate change may lead to 250,000 excess annual deaths by 2050 due to heat, undernutrition, malaria, and diarrhoeal disease, and the Institute for Health Metrics and Evaluation estimates that 4.95 million infectious disease deaths were associated with AMR in 2019.

Dr Sydney Miles is a shining example of how empowering women in science leads to transformative discoveries, particularly in the fight against antimicrobial resistance (AMR). As a researcher dedicated to tackling global health challenges, Sydney shared her experiences, the obstacles she faced, and her vision for a more inclusive future in STEM.

Spotlight on AMR

Empowering women in science: Sydney's journey



Dr Sydney Miles

"I have always had an innate curiosity and a love for learning. Ever since I was a small child, I found myself asking 'why.'" This relentless curiosity led Sydney to pursue a BSc in Biological Sciences at the University of Warwick, where a year in industry at Micropathology Ltd. cemented her passion for translational microbiology. She then embarked on a PhD at LSHTM, focusing on *Shigella sonnei*, a bacterial pathogen responsible for a significant burden of global diarrheal disease and exhibiting alarming levels of AMR.

Among her proudest achievements is the completion of her PhD. "Having been the first person in my family to attend university, I could have never imagined reaching this," she reflects. Through her research, she has generated complete genome sequences of epidemiologically important *Shigella* variants and identified increased virulence and stress tolerance as factors driving pathogen success. "It is rewarding to know that my work will drive further exploration of this important pathogen."

Despite her successes, Sydney recognises the challenges women face in STEM. The instability of academic careers disproportionately affects women, particularly when navigating family life. "Women are 40% more likely to leave a career in academic science, even in areas where representation is equal" she points out. To create change, she believes institutions must actively support women transitioning into leadership roles and reform outdated career structures that do not enable women to succeed.

Mentorship has played a key role in Sydney's journey. "I have been fortunate enough to be mentored by many fantastic role models," she shares. Strong mentors have reinforced her confidence and shaped her as a scientist. Now, she sees leadership as an opportunity to "teach, inspire, and guide a new generation to effectively advance and communicate new scientific knowledge."

For Sydney, diversity in science is essential for innovation. "Diverse voices bring a multitude of life experiences and fresh perspectives to tackling innovative research questions" she explains. Representation not only fosters creativity and collaboration but also empowers the next generation to see themselves in STEM.

Her advice to young women pursuing science? "Seek out strong mentors, build your own collaborative network, and don't be afraid to try new things. Most importantly, persist through the challenges – know that you are capable and that you deserve to take up space."

If she could tell her younger self one thing, it would be this: "Embrace the challenges, stay curious, continue to push boundaries, and most importantly, never doubt your capabilities."

Sydney's journey is driven by her passion for science and its real-world impact. "I am motivated by the meaningful work that I am involved in, the pursuit of solutions that drive change in global health," she says. But beyond that, she finds inspiration in those around her – "the collective drive to strive for change and leave a positive impact on the world."

Feeling inspired?

Learn more about the range of [research degrees](#) on offer at LSHTM.

"It is rewarding to know that my work will drive further exploration of this important pathogen."

Enhance your team through LSHTM distance learning

Our distance learning programmes are a great way to further the knowledge and expertise of your teams.

We offer a corporate discount for organisations sponsoring students on our distance learning courses.

[Find out more](#) about this valuable opportunity for your employer to invest in its staff and enhance their skills.



A new narrative on disability



Grace is a junior doctor working in London. During her medical degree she studied MSc Public Health at LSHTM (2018), returning last year to complete a Diploma in Tropical Medicine & Hygiene. She works to challenge the narratives surrounding disability, medicine and identity, most recently in her first book, *To Exist As I Am*.

Congratulations on your book, ‘To Exist As I Am’. What can you tell us about it?

I wanted to write something about disability that wasn't so individual, that wasn't so steeped in tragedy or overcoming, that spoke on the power of community, of advocacy, of recovery. It's based on the diaries I wrote when I sustained a spinal cord injury and was suddenly thrust into a new life on the other side of the bed, navigating the world as a disabled woman and now doctor, but I wanted it to be much more than just my personal story. I wanted it to be something that anyone could get value from.

You're an incredibly busy individual, both in your day job as a clinician, and as a disabled activist. What prompted you to put pen to paper?

I began a diary in hospital to anchor myself to the strange new reality of suddenly waking up as a patient, faced with an uncertain future. I wrote most days for the next few years, and it grew into a book as I began to recover, as I felt like I had something important to say, something I was searching for when I was newly injured.

I felt I had a complete lack of control over my dialogue when I was first injured, with the sudden appearance of media articles detailing what had happened to me, as well as strangers making assumptions about me, and this book has been a way to take back control of that. It's been so powerful and just such a relief to have got it all down on paper, I think I needed to do this to move on. Writing has been integral to my recovery.



Above: © Profile Books
Opposite: © Alicia Canter

Aside from writing this book, what forms does your disability activism take?

Due to the sensational nature of my injury, I have been given a platform which I have learnt I can use in my favour, to talk about things that matter to me: ableism, stigma, inaccessible healthcare. Since my injury I have realised how important good disabled representation is, so I try to be as visible as possible. In a society that depicts disabled people as having a lesser quality of life, I think joy and living a full life can be a form of activism!

How can friends, family and colleagues be better allies to people with disabilities?

I really value when people advocate for me when I am unable to, calling out inaccessible infrastructure when you see it, all the while respecting my own autonomy. I appreciate when others around me question what is presented to them in the media, question language used to dehumanise disabled people and share in the burden of complaining about lack of access and mistreatment.

“I try to be as visible as possible. In a society that depicts disabled people as having a lesser quality of life, I think joy and living a full life can be a form of activism!”

How would you describe your experience of studying the diploma at LSHTM and what support was provided to ensure you could participate as fully as possible?

I hadn't been back to Keppel Street as a wheelchair user so was unsure how accessible the course and the building would be for me. It was brilliant, from the start the team were very honest about not having a wheelchair user before on the course, but were so willing to adapt and be flexible, and put in preparations which meant I could have the same experience as everyone else. It was amazing to see the ways in which things could be adapted, particularly in the lab.

What's next for you?

Currently I am really enjoying doing some book promotion and interviews, and I begin paediatric training in the autumn. I would love to continue to work with the International Centre for Evidence on Disability at LSHTM (and any excuse to come back there!) and hope in the future to find a niche in disability, infectious disease and public health in my clinical work. My ideal future would be to work as a doctor while continuing to write.

In March 2025, LSHTM and the Missing Billion Initiative (MBI) published a groundbreaking report exposing maternity care access, experiences, and outcomes for disabled women in the UK and their inclusion in key maternity policy guidance.

Report highlights critical maternity care inequities for disabled women in the UK

The report found that disabled women – who make up 20% of women of reproductive age in the UK – face significant inequalities in maternal and neonatal outcomes, including in infant mortality.

Despite these disparities, UK maternity care policy guidance largely overlooks the needs of disabled women, with limited guidance from key healthcare institutions such as the Royal College of Obstetricians and Gynaecologists (RCOG) and the National Institute for Health and Care Excellence (NICE).

“Our report shows that disabled women in the UK experience worse maternity care and neonatal outcomes, but that there is almost no policy guidance addressing this inequity” said Professor Hannah Kuper, co-director of LSHTM’s International Centre for Evidence in Disability (ICED) and co-founder of the Missing Billion Initiative, a group of global health practitioners committed to improving access to health for persons with disabilities.

The evidence provided corroborates the findings of the 2017 report by the Committee on the Rights of Persons with Disabilities which had already flagged the multiple issues faced by disabled women accessing sexual and reproductive health services in the UK.

The report calls for urgent action, including the establishment of a UK committee – inclusive of disabled women – to assess and improve maternity services for disabled women, increased funding for disability-inclusive maternal health research, the integration of disability considerations into national maternity care policy guidance and service delivery.

“This is a vital report which looks critically at the state of maternal healthcare for disabled people in the UK. It is a comprehensive review, revealing a lack of data across the board, and glaring inequalities with the limited data that is available” said Dr Grace Spence Green, reviewer of the report. “It is a call to action for change in obstetric care within the NHS.”

The data is clear – disabled women are being left behind in maternity care in the UK. What is needed now is immediate guidance change, better training for healthcare providers, and stronger commitments to disability-inclusive maternity care provision.

Read the full report here:
themissingbillion.org/uk-maternity-report

Key findings of the report include that disabled women experience:

Higher odds of stillbirth or neonatal mortality for infants

44%

Higher odds of caesarean birth

30–69%

Lower odds of breastfeeding

35–70%

Higher odds of longer postnatal hospital stays

51–111%

Barriers to care:

- Inaccessible facilities
- Negative attitudes of healthcare providers
- Lack of continuity of care



The International Centre for Evidence in Disability

A research group within LSHTM whose mission is provide the evidence to improve the health and wellbeing of people with disabilities globally.

The Missing Billion Initiative

A catalyst for system change aiming to improve the health of 1.3 billion people with disabilities. It gathers data and evidence, develops solutions and partners with health actors to implement change at scale.

Looking to further enhance your skills and knowledge?

Take a short course and benefit from an exclusive alumni discount of 25%

Our alumni know first-hand the impact of an LSHTM education. Take the next step in your learning journey and stay at the forefront of global health with one of our flexible short courses. Delivered online or hybrid, recent topics include:

- AI in Health
- Epidemiology & Medical Statistics
- Global Disability Issues
- Infectious Disease Modelling
- Spatial Analysis in R

We also offer a range of professionally certified short courses, many of which are eligible for the [alumni discount](#).



Stronger together

Across the LSHTM community, alumni, students, and staff are coming together to support one another and drive positive change – from mentoring and fundraising, to empowering the next generation of global health leaders through scholarships.

We know that many of our alumni will have been affected by recent decisions on aid funding. If this has affected your job or future career prospects, or you are simply feeling anxious about the future for you and your fellow global health professionals, LSHTM is here for you.

Careers focus:

How we can support you



Meet your LSHTM Careers team

Fiona Telford and Josh Phillips, LSHTM Careers Consultants, are ready to support you with advice and guidance wherever you're at on your career journey. Here they share their top 4 tips for using the Careers Service:

Do your research

Free open access to workshops, events and careers resources via LSHTM Moodle

Get advice

Book a 1:1 appointment with a Careers Consultant for career planning support

Build your network

The importance of Networking via LSHTM & LinkedIn can't be underestimated; chat to us for some fresh ideas and enhance your approach to this vital skill

Be interview ready

Job applications and interview technique can be continually refined and improved upon – get the latest guidance on how to stand out from the crowd.

Get in touch: careers@lshtm.ac.uk or alumni@lshtm.ac.uk

[Find out more](#)

Our alumni are such a wonderfully supportive and influential community. We would love to assist you in reaching out to your peers for support and guidance. Here are just a few ways that you can benefit from our unique grouping of over 31,000 alumni in 180 countries:

LSHTM Connect

Our digital platform for alumni, staff and students has over 5,500 active members. It's a great place to find a mentor, search or post job opportunities, and interact with contacts in your area or those working in a similar field to yourself. If you haven't signed up, the best way to describe the platform is like a 'mini LinkedIn' just for LSHTM contacts.

Network in-person

Attend one of our events at LSHTM or find out if there is an alumni chapter near you. If so, reach out to them to find out when they're next planning a meet-up or look out for details in our monthly eNews or on our events page. Equally, we are always keen to hear from you if you would like to discuss setting up a chapter in your region.

Develop your skills

Alumni are eligible for an exclusive 25% discount on course fees for many of our short courses

Follow us on LinkedIn

We have over 130,000 followers, sharing news, events, career opportunities and thought leadership from and for our global community of public health leaders.

Share your experiences

A great way to develop your skills as a mentor is to take part in one of our regular panel events. Fun and engaging, not only will you be supporting your peers you may also learn a few things and it can also be a great boost for your CV when applying for managerial roles.

Above: Fiona Telford and Josh Phillips
Opposite: Careers event networking

Alumni Spotlight: Candela Iglesias Chiesa, MPH, PhD, founder and director of Alanda, a public and global health consultancy, charts her journey from lab worker to social entrepreneur.

An inspiring enterprise



“Alanda is a purpose-driven organisation advancing evidence-based solutions to improve public and global health outcomes.”

In 2010, I was sitting in front of a biological safety cabinet in a Biosecurity Level 2 lab, with row after row of Eppendorf tubes containing cells waiting for me to pass them through the cell-analyser machine. It was late at night, and I remember vividly asking myself why I was doing this. The lab had lost its attraction for me after nine years of biomedical studies and a postdoc.

That was a pivotal moment in my career. I started researching options and talking to people to figure out what I wanted to do next. After a few months, I learned about the term global health and realised that I really wanted to work in the humanitarian and development field. Many of the people whose jobs attracted me had a Master's in Global or Public Health, the bulk of whom had studied at LSHTM.

I started applying for jobs in these fields and at the same time I applied to do a remote MSc in Public Health at LSHTM. After some time, many rejections, a huge mindset shift and working on my own insecurities, I finally got a job in public health. I became the lead of the psychosocial support team in a third level hospital in my home country, and I got accepted into the Master's programme. I have never looked back.

I decided to complete my degree part time, as I was working in parallel in this new and exciting field. I found that I could apply what I was learning to my new job, as well as pouring a lot of insights from my role into my studies. I realised how my research skills and mindset could bring value in my new field, and I started advancing more evidence-based approaches and embracing the strengths from my previous experience.

Jobs advertised online

Jobs that never get advertised

I eventually managed to find a path into the humanitarian and development field, working with UNICEF and then entering the vast world of the Red Cross Red Crescent Movement.

In 2020, after working as an independent consultant, I founded my company, Alanda. Alanda is a purpose-driven organisation advancing evidence-based solutions to improve public and global health outcomes. We support organisations worldwide to maximise their impact through better evidence generation, sharing and use; and through effective capacity-building based on adult learning science.

As I brought in young public and global health professionals as interns, I realised there was an important gap in their studies when it came to figuring out what they wanted to do and landing their first job. Thus was born our first online course: “Thrive – How to build a meaningful career in global health.”

Today, we are building the third pillar of Alanda, our social projects, focused on solving the barriers in access to healthcare that lie beyond the health sector (transportation, shelter, health literacy, agency, etc).

Being a social entrepreneur remains an exciting journey, where new challenges and growth are always around the corner. It's an extremely satisfying path for someone with my intense curiosity, thirst for learning and drive to solve problems.

Candela's iceberg principle

If all jobs are an iceberg, the small part above the water represents the jobs posted on commonly used websites. Below the surface you will find the jobs that never get posted: positions filled through recommendations, internal candidates, and even jobs that are created for the right candidate on the spot! Students and recent graduates need to spend time building relationships with contacts at target employers so that you can be ready to access those opportunities that often go under the radar.

Candela's top tips when starting out

If you're looking to start your own business, here are some top tips that I wish I had known when starting out:

1

Don't try to do it all alone. There are myriad courses and incubators for starting businesses, purpose-driven organisations and not-for-profits. There's a lot that you don't know that you don't know, so learning it by yourself is not an option.

3

Set it up for growth. Build systems and processes from the start. For anything that you might do more than once, write down the process of how you did it. Cheat sheets, how-to guides, SOPs, folder/ file structures, wikis, these will all make it easier for you to redo the same work later, or to delegate it to others as you grow.

2

Your organisation will grow as you grow, so work on the mindset shifts you need to make to get you there. Strategy and planning alone will only take you so far. What are your personal beliefs and fears that are blocking your organisation's growth?

4

Your job is to save lives and improve health outcomes, but your business's job is to make money so you can keep doing this work. Learn how to manage your financials and bring money into your business, lean into this even if it's uncomfortable.

In September 2025, Alanda Academy will be launching its second course, supporting experienced public and global health professionals who want to make the shift into consulting.

www.alandahealth.com
projects@alandahealth.com

Connect on LinkedIn:
[linkedin.com/in/candelaiglesias](https://www.linkedin.com/in/candelaiglesias)

Alumni blog



Connecting with others as a distance learning student

Sonia Colianni

MSc Public Health

While my experience as a distance learner has been incredible due to the flexibility of studying from home, one downside to remote courses at any institution is the lack of face-to-face contact. This can lead to reduced motivation and slow down your progress, possibly delaying completion of your studies.

The solution to the challenges created by technology lies in technology itself. We have many social media platforms and communication tools to connect with our LSHTM colleagues, but have you tried [LSHTM Connect](#)?

LSHTM Connect helps bridge the gap in social interaction for remote learners by connecting them to the entire LSHTM community of students, staff and alumni.

LSHTM Connect is very user friendly. To start, you'll need to register with the email address where you'd like to receive notifications from the platform. Once you've signed up, you can personalise your profile with a photo and details about your professional role and areas of interest. This makes it easier for others with similar interests or roles to find you.

I've found the job section especially useful, as you can find job postings from both community members and the LSHTM Careers Service. The 'Groups' feature allows you to find LSHTM colleagues living in your country, city, or local area that you can connect with virtually or even meet in person. Although digital platforms are great, we can't overlook the value of in-person meetings, and that's what makes the Groups function so useful in enabling more meaningful contact. If there isn't a group for your region or interest yet, create one!

Groups are also a great place to post content that's relevant to specific audiences. This could be useful for raising awareness about particular issues, promoting regional activities, or encouraging participation in events.

If you want to connect with someone personally, you can send them a message. I've met many LSHTM colleagues from all over the world, by doing this.

LSHTM Connect offers these and many more features waiting for you to explore. If you are hesitant to step out of your comfort zone, break the ice by connecting with me – I'm looking forward to your message!

Above: Sonia Colianni, MSc Public Health, 2024

Sonia's top LSHTM Connect tips:

1. Don't be afraid to step outside your comfort zone!
2. When you're feeling demotivated, sad, or overwhelmed, don't hesitate to reach out. Many LSHTM colleagues are ready to encourage you and help you stay focused on your dreams.
3. Be sure to share your achievements to a community who is waiting to congratulate you and your triumphs!
4. Never be afraid to connect – ever.

[Get started](#)

Professional Diploma in Tropical Nursing



On International Nurses Day (12 May) alumni and colleagues of the [Professional Diploma in Tropical Nursing \(PDTN\)](#) came together to celebrate their profession, showcasing powerful stories from past and present learners.

Participants, from nurses, paramedics and midwives to public health professionals, shared how the course shaped their careers, deepened their understanding of global health, and challenged them to grow both personally and professionally. With flexible online learning, insightful content, and a supportive community, the programme continues to inspire ethical, impactful practice worldwide.

A variety of paths, one purpose

For many, the PDTN marked a pivotal moment in their careers. Christy Sze Wing Lee, an Information Officer at UK Health Security Agency (UKHSA) from the 2022–2023 cohort, shared how the course helped her build essential knowledge in infectious diseases like malaria, despite not having a strong lab background.

“I was surprised by how practical and relevant the content was, especially for someone like me coming from a non-traditional background.”

Kat Spence, an Advanced Paramedic Practitioner at University College London Hospital, described how the course opened her eyes to how much she didn’t yet know about humanitarian aid.

“It was more than an introduction - it was an immersive experience that equipped me to now go and work somewhere out there in the world. It made me realise how much more I had to learn and how much I wanted to.”

Christy, who now works in surveillance for healthcare-associated infections, goes on to say that the course helped her to shift her career focus: “Before, I worked on non-communicable diseases, but PDTN sparked a new passion to learn more about infectious disease.”

Above: Kat Spence and Christy Sze Wing Lee, PDTN alumni

What PDTN alumni say about the course

We asked participants to choose just three words to describe the PDTN. Here’s a selection of what they said:



Welcoming the next generation of LSHTM alumni



Each year, LSHTM has the wonderful opportunity to come together and celebrate the academic achievements of our newest graduates. Surrounded by friends, family, peers and LSHTM staff, graduates gathered to receive their degrees, mark this important milestone, and officially join our global alumni community.

For the first time, the LSHTM Alumni team hosted two dedicated Distance Learning Receptions following the February LSHTM and the April University of London graduations. These events celebrated graduates from our six distance learning programmes and offered many the chance to meet classmates in person for the very first time. Graduates also had the opportunity to connect with Professor Liam Smeeth, Director of LSHTM, as well as their programme directors, turning names from virtual learning spaces into familiar faces.

Left: The class of 2025 celebrating at Central Hall Westminster.
Above: New graduates celebrating alongside Distance Learning peers, current students, alumni, and LSHTM staff at the Keppel Street Library.



Get ready for an amazing experience!

Taking on a challenge event like the electrifying London Landmarks Half Marathon, London to Brighton Cycle Ride or hosting your own event is a great way to:

- Meet people
- Have fun
- Raise awareness
- Make a difference to global health

Last year our wonderful community fundraisers ran, cycled and baked their way to a fantastic £30,000 for the LSHTM Scholarship Fund and supported projects like CURE-ME and the Centre for Maternal, Adolescent, Reproductive, & Child Health (MARCH).

Ready to get involved?

[Register your interest today](#)

Community, compassion and change



Dr M Tasdik Hasan (MSc Global Mental Health, 2018) is a global mental health researcher and public health physician, currently pursuing a PhD at Monash University, Australia. He has recently won a [British Council Study UK Alumni Award](#) for his work on mental health in low resource settings. His research focuses on co-designing digital tools to support the mental health of deaf communities in Bangladesh.

Please could you describe your research/current work.

My work addresses mental health challenges in low-resource settings, the impact of the COVID-19 pandemic, and the support needs of marginalised populations. I apply global mental health frameworks and systems thinking to develop practical, inclusive solutions in LMICs. In addition, I am committed to mentorship and capacity building, supporting students and early-career professionals across diverse contexts. I also engage in policy advocacy, collaborating with media, ministries, and policymakers to advance mental health agendas through evidence-based science communication.

How has the Global Mental Health MSc shaped your career journey to date?

The [MSc in Global Mental Health](#) was far more than a degree – it was the turning point that set my life's compass. It opened doors I never imagined, from securing employment in the UK and Africa, to being awarded a fully funded PhD in Australia. What I gained went beyond academic training – it was a redefinition of purpose, a sharpening of voice, and a deepened sense of global responsibility.

Thanks to the skills and perspective I developed during my time in the UK, I've had the privilege of presenting my work and facilitating sessions at major international conferences across the globe. These stages gave me a platform not just to share knowledge, but to amplify voices often unheard in mainstream

global health discussions. My education taught me to embrace diversity, to challenge injustice, and to lead with empathy – especially in low-resource settings where mental health remains on the margins. It empowered me to question the status quo, even when my ideas felt unconventional or my accent unfamiliar. That courage became my compass, guiding me through complex projects like co-designing Bangladesh's leading mental health TV show centring on inclusion, trauma, and human rights. This journey also forged a global circle of collaborators and changemakers – people who, like me, believe that mental health is a fundamental human right. The friendships I built through the MSc now span continents, and wherever I travel, I know I'm never alone in this mission.

Congratulations on winning the Study UK Alumni Award for Bangladesh. How did you feel when you heard the news?

It felt surreal – overwhelming and deeply heartwarming. Receiving the prestigious Study UK Alumni Award in the Science & Sustainability category was a profound honour, not just for me, but for everyone who has been part of my journey. What made it even more special was that my 8 years old son, Nuraz, accepted the award on my behalf. During my time studying in the UK, he was just a one-year-old whom I often carried to university events as I balanced parenthood with academia. To see him now standing on that stage felt like a beautiful full circle.

This award symbolises the transformative power of education, the resilience it takes to pursue dreams, and the role of science in shaping a more inclusive world. I'm deeply grateful to LSHTM for fostering an environment that allowed me to thrive as a mental health scientist. My heartfelt thanks go to my global mentors, collaborators, mentees, and media partners, for championing mental health communication. This recognition is a shared achievement, and I'm excited to continue supporting fellow UK alumni in their own journeys ahead.

What do you see as the key mental health benefits of being an active participant in global networks such as our alumni community?

Being part of a global alumni network like LSHTM's has been vital to my mental wellbeing and professional growth. It offers more than academic connection – it provides a sense of belonging, inspiration, and ongoing support, especially when working in challenging field settings.

Since returning from the UK, I've actively shared my experiences through lectures, media, webinars, and international conferences, reaching thousands of people. These engagements not only help raise mental health awareness but also reinforce the strength of our global academic community. The mentorship I've received – and now offer – has been transformative. Several of my students have gone on to win prestigious scholarships and pursue advanced studies in global mental health. The alumni networks at LSHTM and King's College London have also connected me to job opportunities, collaborative research, and technical support – resources that have helped me lead complex projects in refugee settings, co-design digital tools for the deaf community in Bangladesh, and launch national-level mental health initiatives. For me, these global networks represent more than professional ties; they are communities rooted in shared values of compassion, equity, and scientific progress. They help ensure none of us feel alone in the pursuit of mental health justice – and that, in itself, is powerful for wellbeing.

“This award symbolises the transformative power of education, the resilience it takes to pursue dreams, and the role of science in shaping a more inclusive world.”



Dr Hasan's son receiving the Study UK Alumni Award on his father's behalf



Ringling the changes



We learn about this year's telephone fundraising campaign and the importance of supporting the LSHTM Scholarship Fund, in the words of our student and recent graduate callers.

What's the best conversation you had?

Rania Al-Mukhtar, MSc Public Health: "I had such a lovely chat with a GP about life in healthcare and after studying their MSc – I loved hearing about her experiences, the ups and downs of her day, and how she's navigated her career. The best part? She was incredibly kind and even offered to support me with mentoring. Having this conversation really made my day."

What three words would you use to sum up the campaign?

Catherine Khanoba, MSc Health Policy Planning & Financing: "Interesting, amazing and sometimes shocking! I've had the opportunity to speak with people I would otherwise only have heard of and get glimpses into what they have been able to do with the quality education provided by LSHTM."

What will you take away from this experience?

Dave Ojijo, MSc Climate Change & Planetary Health: "As a scholarship beneficiary myself, I now feel an even stronger sense of responsibility to support others, especially when I eventually receive a call."

Rania Al-Mukhtar: "Beyond the practical skills of fundraising, I think the biggest takeaway has been seeing just how much people want to share their experiences and offer support. So many have been eager to help, not just by donating but by giving advice, encouragement, and ideas."

What would you say to alumni thinking of donating or who have already given?

Ellie Delight, MSc Control of Infectious Diseases, 2022–23: "A massive thank you to those who have donated; it's really great to know that many alumni feel strongly about the campaign and supporting students to come to LSHTM. And to those that are thinking about it, be assured that all donations of any size are greatly appreciated!"

Catherine Khanoba: "If you are thinking of donating, give! It really does help change lives and it's not just one life, no! Your giving can be the difference between development and poverty."

The students received many wonderful messages from alumni they spoke with. Emelia Ababio (Public Health & Policy MSc, 2023) a donor and past student caller emailed to say "It's important work you are doing! I know it's not the easiest job, but it is totally worth the experience and it's a great cause!"



"If you are thinking of donating, give! It really does help change lives and it's not just one life, no! Your giving can be the difference between development and poverty."

Catherine Khanoba

If you feel inspired by our student callers, there is still time to give.

Thank you

Student and recent graduate callers

28

The calling team spoke to 731 alumni over three weeks

731

Alumni from 52 different countries pledged a gift

52

Calling hours

918

Reply messages received from alumni in response to student's videos

57

Gifts

179

A fantastic amount raised for the LSHTM Scholarship Fund!

£80,479

Opposite: The calling team
Above, left to right: Ellie Delight, Dave Ojijo and Catherine Khanoba

From health system integration for Mother to Child HIV prevention care to global cardiovascular research, meet this year's extraordinary LSHTM scholars, Sheefat and Neema. Read on to learn about their journeys so far, their resilience, and the real-world impact they are planning to make, thanks to the generous support of donors to the LSHTM Scholarship Fund.

LSHTM scholars making a global impact



“This intersection of cardiology and infectious disease, combined with the power of data science, is where I believe I can make the most impact.”

Neema Kailembo

“I felt deeply honoured, grateful, and relieved knowing someone believed in my mission.”

Sheefat Sabnam



Neema Kailembo MSc Health Data Science

What motivated you to pursue your current studies?

I was just one year old when I lost my father to a heart attack. This later inspired me to explore cardiovascular diseases and their interaction with infectious diseases, especially malaria, to improve care in underserved communities. This intersection of cardiology and infectious disease, combined with the power of data science, is where I believe I can make the most impact.

How did you feel when you learned you had received the scholarship?

I was overwhelmed with joy. After having to turn down offers of partial funding from Oxford and UCL, receiving full funding at LSHTM felt like a life-changing breakthrough.

What challenges have you overcome on your journey so far?

I faced repeated rejections, financial barriers, and limited government support. After four years of applications, I persisted through it all with support from mentors until I secured this scholarship.

I also applied to highly competitive scholarships like Chevening and Commonwealth, investing time and emotional energy into writing multiple essays and gathering references. I often worried that people around me would grow tired of constantly supporting my applications.

Has this scholarship changed your outlook?

Yes, it strengthened my desire to give back. I now lead cardiovascular research projects in Tanzania, and I plan to pursue a PhD to continue impacting global health.

What is your message to donors who support the LSHTM Scholarship Fund?

Thank you for your generosity, your kindness, and your belief in people like me. You are not just donors; you are life changers.

This was my fifth attempt. I was ready to give up. Had this scholarship not come through, I might have turned away from research entirely. The cohorts I'm leading, the students I'm mentoring, the future patients who might benefit from my research, all of that might never have existed.



Sheefat Sabnam MSc Reproductive & Sexual Health Research

What inspired you to pursue your current studies?

As a medical intern in a tertiary hospital in Bangladesh-Dhaka Medical College Hospital, witnessing preventable maternal and child deaths was deeply frustrating and distressing. After that, working with Rohingya refugees during COVID-19 strengthened my commitment to equitable reproductive healthcare and inspired me to advocate for changes to improve care and save lives.

How did you feel when you learned you had received the scholarship?

It was truly life-changing. I felt deeply honoured, grateful, and relieved knowing someone believed in my mission. The scholarship removed financial barriers, allowing me to focus completely on learning and fully realising my potential.

What challenges have you overcome on your journey so far?

This journey has challenged me to adapt in crisis settings, strengthen my skills, and stay committed to health equity. It has prepared me to contribute meaningfully to real-world impact and join the global mission for change.

What makes you proud to be an LSHTM scholar?

Being an LSHTM scholar gives me the knowledge, tools, and confidence to transform sexual and reproductive health challenges into meaningful opportunities and improve care for communities worldwide.

What impact will your studies have on you and the communities you work with?

This scholarship has broadened my vision and strengthened my commitment to improving health systems. It enables me to design effective policies and training that expand access to quality healthcare in underserved communities worldwide.

What would you say to the donors who support the LSHTM Scholarship Fund?

Thank you for investing in accessible education and supporting work that prioritises dignity and equity in global health. Your generosity empowers committed professionals like me to drive lasting improvements in health and well-being for the communities we serve.

Alumni may remember the Pumphandle bar in its various forms and have fond memories of all the social activities held there over the years.

Serving pints with purpose

“The Bar still makes a small profit, and we wanted to make sure that it went directly to helping students.”

Pumphandle Bar team

Today, the Pumphandle Bar is still run by a group of students and early-career researchers who give up their time to pull pints. Last year the volunteers behind the bar chose to donate the surplus profits to the LSHTM Scholarship Fund – contributing a whopping £10,000 in 2024.

The fund supports several scholarships, including the LSHTM Scholarship Fund for talented students from low-and-middle-income countries.

A member of the team told us “The Bar being run entirely by volunteers for many years has meant that we’ve kept the prices low, giving staff and students a fun and affordable space to meet and unwind. The Bar still makes a small profit, and we wanted to make sure that it went directly to helping students. Hopefully, they’ll enjoy both the Bar and their courses!”



Left: The new Pumphandle Bar in 2025
Above: The bar in a previous incarnation – can you tell us which year?



Keppel Street roundup

Celebrating the global impact and generosity of the LSHTM community – from alumni achievements and chapter events, to the incredible support of our donors and fundraisers.

A new look at Keppel Street

Fantastic new additions to Keppel Street campus



Alumni who have had the opportunity to visit us in Keppel Street this year can't fail to have been impressed by our brand-new dining and social spaces. Students and staff have been making the most of the newly developed Pumphandle Social on the lower ground floor and accompanying social/study space on the ground floor (respectively the old refectory and G90).

The new cafeteria is a bright, relaxing and, dare we say chic, environment where students can meet, enjoy a coffee or snack, and catch up on their assignments, and come Thursday or Friday, they can reward themselves with a well-earned beverage from the Pumphandle Bar, where proceeds are donated to the LSHTM Scholarship Fund.

The additional social space on the ground floor is perfect for collaborative working and discussion and the bright colours and murals offer inspiration while emphasising the vibrancy of our community.

If you're visiting London and would like to see our new facilities, we can occasionally offer guided tours of Keppel Street. We may even treat you to a coffee!

Email: alumni@lshtm.ac.uk



Top: New social space G90
Above: Education centre designs
Opposite: Feature staircase at Pumphandle Social

Education centre set to open in 2026

In a major boost to educational space, we look forward to the completion of our new education centre on Tavistock Place; a purpose-built, modern and inviting learning environment that incorporates the newest technologies, enabling hybrid ways of learning that will continue to make our courses more accessible.

Welcome to Lee, Lucy, and Mac!

The Development and Alumni Relations (DARO) team at LSHTM has welcomed some new faces in recent months, and we're excited to introduce three new team members: Lee Rodwell, our new Director of Development and Alumni Relations; Lucia Limb, Regular Giving Officer; and MacKenna Schwarz, Alumni Engagement Officer. Each brings unique experience and enthusiasm to the team. Get to know a little more about them and discover some of their highlights.

Lee Rodwell



I am honoured to serve as the Director of Development and Alumni Relations at LSHTM. Previously, I spent almost nine years as Director of Development at University of the Arts London (UAL), one of the world's leading art and design universities, where I helped grow philanthropic income tenfold and expand the development team to incorporate fully-fledged alumni and events operations. It is one of the privileges of my job to be a generalist working in support of specialists, and so I was delighted to be able to move to another world-leading institution – LSHTM – just a mile up the road in Bloomsbury.

With over 20 years of working in development for NGOs and universities, I have led fundraising across a wide range of fields – including the arts, human rights, and international development. Perhaps my closest prior experience to LSHTM was working at the UK-based charity Sightsavers, raising money to address avoidable blindness and loss of sight internationally. I have also served on the boards of five charities, which I find incredibly fulfilling in its own right, but which also helps to bring a different perspective to my job from my experience as a volunteer.

I am passionate about building high-performing teams and the incredible benefits which philanthropy and alumni networks can bring to higher education institutions and their students. The biggest highlight of my role to date has been meeting so many of our alumni in different locations – from events in London, Atlanta, and New Orleans; to field workers and researchers in The Gambia; to the finish line of a fundraising cycle ride in Brighton – as they impact the world in positive ways. You are all very inspiring!

Lucia Limb



I'm Lucia (Lucy) and excited to create opportunities for even more people to support LSHTM's mission to transform global health, whether that's through community fundraising, a monthly donation or leaving a gift in your will. My highlight must be the Telephone Campaign; it was wonderful to hear insights from hundreds of LSHTM alumni around the globe, to witness the student callers benefiting from the experience as well as the generosity of our alumni – inspiring!

MacKenna Schwarz



I'm MacKenna (Mac) and I'm the Alumni Engagement Officer at LSHTM. I support our global alumni community by coordinating events, communications, and engagement opportunities that help our alumni stay connected to each other and the School. A highlight for me so far has been working closely with our international alumni chapters, especially seeing the energy and enthusiasm they bring to building communities across the globe!



Catherine Lam running the London Landmarks Half Marathon in support of LSHTM scholarships

A landmark achievement

On a bright spring morning, Catherine Lam, MSc Health Data Science student set out on the London Landmarks Half Marathon to raise funds for the LSHTM Scholarship Fund. She tells us about her extraordinary journey.

Running has always been an integral part of my identity. But it was only when I lost the ability to run that I truly understood its significance.

More than two years ago, my life as I knew it came to an abrupt halt. In the midst of my second-year medical school exams, I was involved in a car accident that left me with a traumatic brain injury and a cervical injury. In an instant, everything changed. I was forced to put my MSc at LSHTM on hold and return home to Hong Kong for treatment and rehabilitation.

Recovering from a traumatic brain injury was the hardest thing I have ever had to do in my life. I had to relearn

even the most fundamental aspects of life – how to walk, how to talk, how to think clearly. Two years later, against all odds, I made a near-full recovery, completed fifth year of medical school, and found my way back to LSHTM.

Throughout this arduous journey, LSHTM remained an unwavering pillar of support. I feel proud to belong to a diverse and inclusive institution at the forefront of training innovators who go on to transform global health and advance health equity.

That's why I ran the London Landmarks Half Marathon: to ensure that financial barriers do not stand in the way of those who aspire to change the world through public health. At a time when global health crises continue to expose and deepen systemic inequities, investing in education is not just an act of generosity – it is a necessity.

“Throughout this arduous journey, LSHTM remained an unwavering pillar of support.”

Feeling inspired by Catherine's story? Register your interest in London Landmarks Half Marathon, taking place on Sunday 12 April 2026.

Thank you

We would like to say a sincere thank you to all our supporters, who enable us to continue to deliver on our mission to improve health worldwide.

We are deeply grateful to everyone who chose to give last year. Your generosity has a remarkable impact on our community and beyond, and we're proud to celebrate your support through this donor list*.

Between 2023 and 2024 over 530 individual supporters came together to support LSHTM to...



Transform more students' lives through our scholarship funds



Keep students in education when faced with financial difficulties



Treat more patients in our clinic at our MRC Unit in The Gambia



Carry out vital research into neglected conditions like ME

[Donate now](#) and become a supporter

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*This list covers the period 1 August 2023 to 31 July 2024. We wish to acknowledge everyone who chooses to give anonymously, and we remember those supporters who have sadly died since making their gift to us. If you can't find your name and think it should be here, please get in touch: alumni@lshtm.ac.uk

A stellar year for LSHTM

Each year, LSHTM alumni, staff, and students are recognised for their remarkable contributions to public and global health – and this year was no exception. From groundbreaking research to impactful work on the ground, the LSHTM community continues to make an extraordinary difference.

Please do continue to [share your accomplishments](#) with us. We truly enjoy celebrating our community and how they are playing a role in in shaping a healthier, more equitable world.

Academic Excellence



Professor Alison Elliott, Professor of Tropical Medicine at LSHTM, was awarded an Officer of the Order of the British Empire (OBE) in the 2025 King’s New Year Honours, in recognition of her services to medicine and global health.

Based in Uganda, Professor Elliott is a theme leader for vaccines research at the MRC/UVRI and LSHTM Uganda Research Unit. The honour recognises her outstanding and sustained contributions to strengthening medical research capacity in Zambia and Uganda, fostering strong research collaborations with UK institutions, and inspiring a new generation of African scientists.

Professor Michael Marks, Professor of Medicine at LSHTM (PhD Infectious & Tropical Diseases, 2016), Research Professorship from the National Institute of Health and Care Research (NIHR).

Professional Awards



Professor Moffat Nyirenda, Director of the MRC/UVRI & LSHTM Uganda Research Unit, has been formally admitted as a Fellow of the Academy of Medical Sciences. He is recognised for his exceptional contributions to medical science, pioneering research, and efforts to translate scientific advances into real-world benefits for patients and wider society.

Professor Nyirenda’s research has highlighted how local risk factors – such as infections and early-life undernutrition – shape the development of diabetes in Africa. Notably, his work identified a distinct “lean type 2 diabetes phenotype” that affects non-obese individuals due to impaired insulin production. This contrasts with the more commonly known form of type 2 diabetes, typically associated with ageing, obesity, and insulin resistance. His findings have significant clinical implications for the diagnosis and treatment of diabetes in African settings.

Professor Liam Smeeth, Director of the London School of Hygiene & Tropical Medicine, Kings Honour, CBE

Alumni Impact



Matilda “Matty” Asante-Owusu is the Sickle Cell Community Matron at Whittington Health NHS Trust in north London. With 36 years of dedicated service to the NHS, Matty was awarded an MBE in the New Year’s Honours for her outstanding contributions to supporting patients with sickle cell disease.

She is the first to hold the community matron role, delivering personalised in-home care to over 300 adults living with the condition. Matty has also been instrumental in launching patient support initiatives – such as a social club and a patient user group – to enhance holistic care and raise awareness of sickle cell challenges.

Dr Melvin Sanicas, Physician and Vaccinologist (MSc Infectious Diseases, 2015), Pamana ng Pilipino Presidential Award.

LSHTM rises to second in the world and first in the UK for public health in the 2024 ShanghaiRanking. The results are a recognition of LSHTM’s prestigious research and study programmes in public and global health. They are based on a range of indicators including academic awards and achievements, research quality, and international collaboration.

Tackling health and hygiene challenges



“Being part of the LSHTM PhD Programme funded by Reckitt has been a transformative experience in my journey toward becoming a future leader in science. The financial support has given me the freedom to focus on my research and developing my skills, without the constraints of worrying about funding.”

Rebecca Prah

Reckitt, the company behind some of the world’s best known and most trusted Health and Hygiene consumer brands, is currently sponsoring four PhD students at LSHTM. In line with Reckitt’s commitment to advancing health, hygiene, and supporting women in science, we are delighted to showcase the students’ outstanding research contributions.

Each of these dedicated women are tackling critical health & hygiene challenges in their communities, with the aim of driving impactful change – reflecting Reckitt’s belief that access to high-quality hygiene, health and nutrition is a universal right. Their projects highlight both innovative solutions and personal journeys as they navigate their paths in the scientific community.

Rebecca Prah’s PhD research focuses on the economic evaluation of school-based menstrual health interventions in Uganda, aiming to improve adolescent girls’ quality of life by providing valuable economic evidence for policy decisions.

Jenala Chipungu investigates weaning food hygiene behaviours in Zambia, aiming to document food contamination and pilot interventions to enhance hygiene practices in low-income communities, thereby reducing childhood diarrhoea.

Liliana Cândida Dengo-Baloi’s work in Maputo assesses handwashing practices and infrastructure’s role in early childhood exposure to enteric pathogens, with findings aimed at informing future health interventions.

Christine Nabirye explores the effectiveness of hygiene interventions in Kampala’s informal settlements, seeking to understand the reasons for their low impact to guide better public health strategies.

Each student is supported by the mentorship and opportunities within the LSHTM PhD Programme funded by Reckitt. These exceptional women embody Reckitt’s mission to advance clean water, sanitation, and hygiene worldwide, and we are immensely grateful for their ongoing support.



A look back at alumni chapter highlights from the past year!

- 1. New Orleans
- 2. Edinburgh
- 3. Atlanta
- 4. Mexico City
- 5. New York
- 6. Beijing
- 7. Toronto
- 8. Tokyo
- 9. Montreal
- 10. Sydney

Benefits of starting or joining an alumni chapter

- Expand your network**
Connect with fellow alumni from diverse backgrounds and sectors, and build lasting relationships with professionals working across public health, research, policy, and more.
- Professional development**
Gain access to job leads, career advice, and mentorship opportunities through new connections with experienced LSHTM alumni.
- Continued learning**
Attend events featuring guest speakers, webinars, and peer-led sessions to stay informed on the latest research, public health developments, and sector insights.
- Build community & belonging**
Reconnect with LSHTM and celebrate shared experiences and milestones – wherever you are in the world – through social meetups, reunions, and community initiatives.
- Support and advice**
Your alumni team will be with you along the way to offer support, discuss your event ideas and provide the all-important LSHTM merch that keeps alumni coming back for more!

If you are interested in starting an alumni chapter in your city, please do get in touch: alumni@lshtm.ac.uk

LSHTM in WWII

This year marks the 80th anniversary of Victory in Europe (VE) Day, when the Allies of the Second World War formally accepted Nazi Germany's unconditional surrender of its armed forces. The Archives team take a look at the war's impact on LSHTM.

At the outbreak of war in 1939, it was planned for LSHTM to remain in London for as long as possible, but we did have the offer of moving staff to Cambridge. In the end, we remained for all of the war and offered space to other organisations including the Medical Research Council, London staff of the Rockefeller Foundation, and the Air Raid Precautions warden and his staff.

LSHTM suspended regular courses in 1942 but replaced them with 14-day intensive courses on tropical medicine for medical officers. Over 2,000 servicemen were taught over the course of the war. The Archives holds records on a number of aspects of the war including administrative records, diaries and photographs.

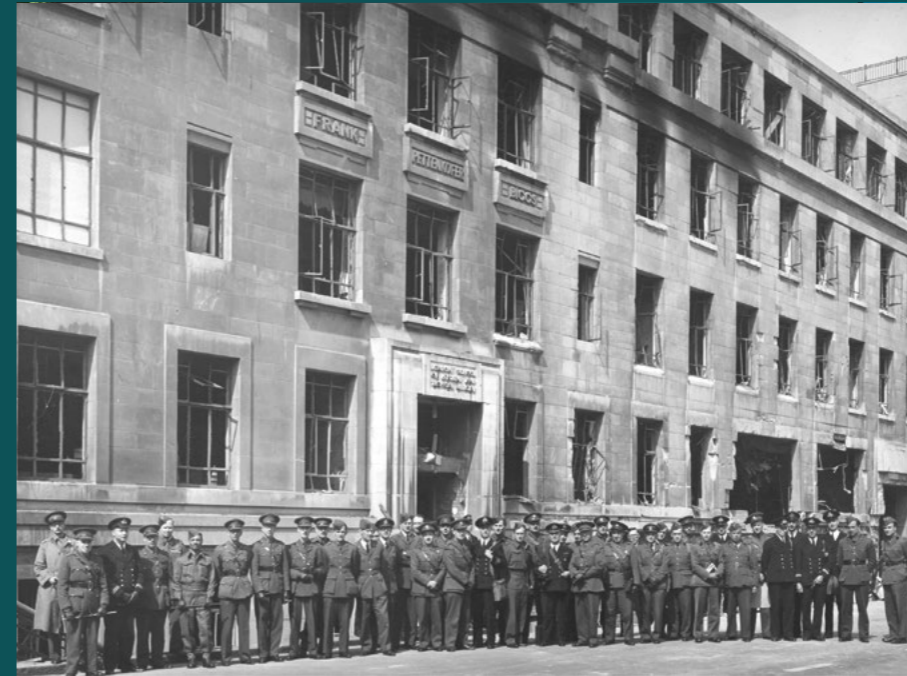
An air raid precautions document from April 1940 shows that anyone in the building during an air raid was to shelter in the Keppel Street end of the basement, which at the time included a Sanitary Engineering Museum.

The author Graham Greene undertook wartime fire watching duties in the Keppel Street building and in Senate House across the road. He later used his experiences in his post-war novels *The Ministry of Fear* and *The End of the Affair*.

The School was bombed on the night of Saturday 10 May 1941 at about 10.45 PM; four people were in the building at the time and fortunately none of them were hurt. A sixth of the building was destroyed, partly by the explosion and partly by fire, as it was not until morning that a fire brigade could be spared to come.

The explosion wrecked many rooms in the Public Health Department and the Departments of Parasitology and Chemistry, and ruined exhibits from the School museum which had been moved to the basement for safe keeping. This part of the School was not rebuilt until the early 1950s.

Further information about LSHTM's [Archives](#).



1



3



2



1. Service men course outside the School
2. Interior bomb damage to a Keppel Street laboratory
3. Exterior bomb damage, Malet Street side of building
4. Short course for Allied Services nurses heading overseas
5. Ministry of Food recipe leaflet, from our Nutrition collection



4

5

Broccoli or Cauliflower with Hollandaise Sauce

- | | |
|---|-----------------------------|
| 1 large or 2 small broccoli or cauliflowers | 2 dried eggs, reconstituted |
| 2 tablespoons plain flour | 3 tablespoons vinegar |
| ½ pint milk or stock, or vegetable water | Pepper and salt |
| 4 peppercorns (in muslin bag) | |

Separate broccoli or cauliflower into small pieces and boil until tender in very little salted water. Drain. Mix the flour to a smooth paste with a little of the milk or stock, boil remainder, pour on to flour, return to pan and boil 5 minutes with the peppercorns. Remove from heat and add the eggs carefully, boil 2-3 minutes longer. Add vinegar and seasoning and serve, poured over the broccoli, but first remove the peppercorns.

Brussels Sprouts à l'Italienne

- | | |
|---------------------------------|-----------------------|
| 1 lb. Brussels sprouts | Salt and pepper |
| Salt | Grated nutmeg |
| 1 oz. margarine | Lemon substitute |
| 1 oz. flour | 2-3 oz. grated cheese |
| 1 pint milk and vegetable water | |

Wash and clean the sprouts; cook in a little boiling salted water until tender. Drain, keeping the vegetable water. Melt the fat, add the flour and cook for about 2 minutes. Add the liquid, bring to the boil and cook for 5 minutes. Add the seasoning, a little grated nutmeg, a few drops of lemon substitute and grated cheese. Mix thoroughly. Add the sprouts to the sauce and heat through. Serve hot.

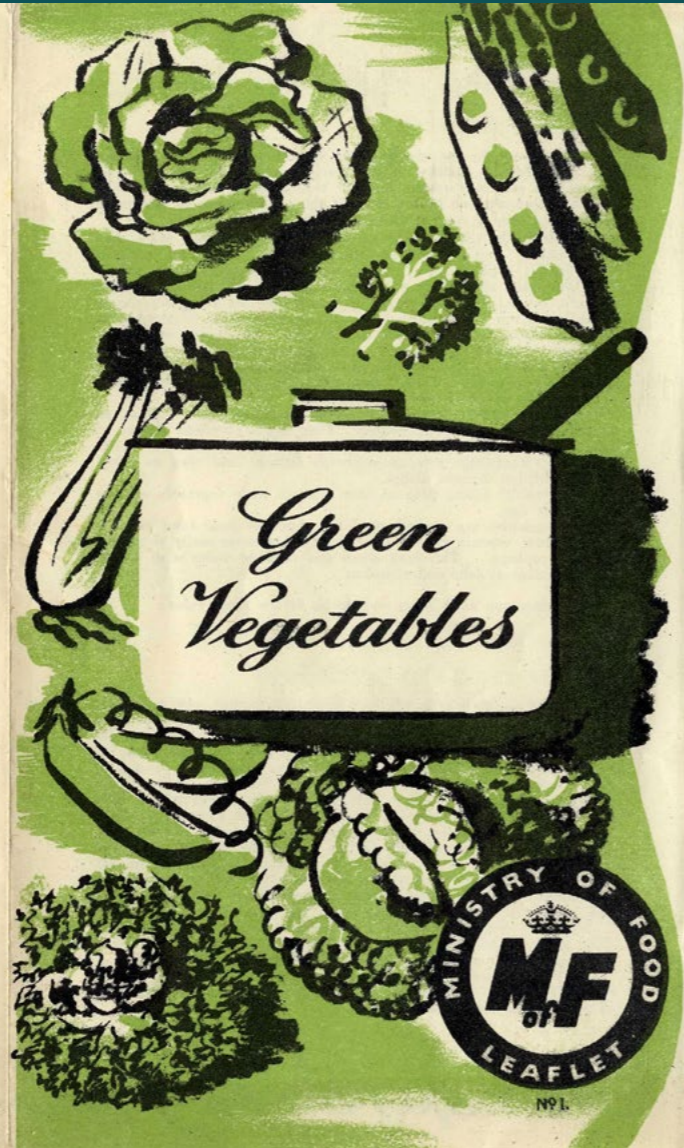
Red Cabbage

- | | |
|------------------------------|---|
| 1 oz. fat or dripping | 1 tablespoon vinegar |
| 1 lb. red cabbage, shredded | Salt and pepper |
| 1 large onion, sliced | 2 teaspoons of sugar, brown if possible |
| 1 large apple, sliced | |
| 2 tablespoons stock or water | |

Melt the fat in a saucepan and add all the other ingredients. Cover with a tightly fitting lid and boil gently until the cabbage is tender, about 30-40 minutes. Shake the pan occasionally during cooking to prevent the cabbage from sticking. Do not cook over a fierce heat or the cabbage will boil dry. This is excellent served with pork or with grilled or fried sausages.

Ask for War Cooking Leaflet No. 5 "Salads," or send a postcard to: Food Advice Service, Ministry of Food, London W.1.

Pub. Ltd. 51-1478.



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Sultana Khanum
MPhil & PhD Public Health & Policy, 1994

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