

I'm really a really nice day to actually to because we've got a few major things that have happened over the last few years in our very beautiful building on the campus

Thank you very much bringing this together and I think we should also have a bit of congratulations to the department

So this story began, it's nice following Kevin I'd been out and working here for some time, setting up the clinical draft with you. Whoever I am trying to bring together, everybody working well on research and really building careers from Europe; Research Nurse or Data Management or certain Management At the same time I was setting up the Networks of Excellence with EDCTP which any of you know about and I've come at this from 12 years or so in Industry trying to work in France so it's the heritage of malaria drugs vaccines but really recognizing that the things we were trying to solve at Inky but wider across Africa from the Networks of Excellence but also in the other programs in here in Thailand and we also did some work with the drug funding in Malawi and the MRC projects in Uganda too. It's all solving the same things that basically, the piece that holds back don't necessarily differ between the diseases and organizations and really we were some fantastic past the building that happened around some particular drugs and vaccines but we weren't really sharing the love as I say now that it was just not being spread across institutions so you have these fantastic Centres of Excellence elsewhere in Africa but you could often find the situation required where you could walk next door. In some of the big hospitals across Africa where you could see a Centre of Excellence working in Uganda for example, beautiful set up for HIV research across the campus and wouldn't know what protocol was with no experience in research. What could we do to really build careers in health research in a more sharing the expertise? So that's really how this came about when we worked when I was in Kenya and then just a quick trickle down, that's a bit political at the moment. So awesome get back into 2009-10 and then really began to explore here.

So then bring this right up to date and it's a nice segway from the pandemic preparedness, so I completely agree with you say pandemic preparedness forces bolting running down the road and we need to stop our practice here wherever they appear and I'm using a diagram here that we drew with the Hub we put together for Covid, but that that could also be true for Ebola and but it's the most important thing is that could also be true for Malaria, HIV and TB, internal health whatever you want, and the point is that to tackle any disease and then this is obviously happening over hundreds of years talking about Malaria and Zika is always my favourite example because we knew so much less about Zika than we did Ebola and then COVID came along.

So, for any disease we need a whole ecosystem of health research and I come with this proprietors and services background and industry, but we need to ask the questions in the community we need Social Science to understand perceptions and what's going on with behavior. We need to observe and characterize the disease and work out what's happening right now I began as we've been prepared for the different strain its downstream. You need to work out what you're going to do, you need to plan your operational studies and experience at that whole series of surveillance operations, clinical trials and then work out how you'll find and that's the vital connection between health research.

So it doesn't matter what disease you're working on what we've found over decades and decades proving of many really good at collective experience in this team and efforts to tackle this around teaching the skills and delivering the abilities to run all these types of research and in all these settings is what we're very very good at. In that really equitable partnerships where So what would Global Health Network been around in is around trying to provide the tools and resources about ecosystem and health research meaning and then they have the cycle through each study that needs to happen.

So this is where we've got to now, so we are 12 years in really, we're having a bit of a party in Cape Town in November that I hope many of you are coming to and we were going to do that two years ago but we're doing it this year and would have been with the group for 10 years at that point so, conference, please come and join us. But this is what it's become. This term community of practice is used all the time now, but this is what we've built and we've known that that's what we've built. But the definition of a community of practice is a group of experts, practitioners, who come together to share the same problem that they experience. So for all of us, we're all kind of set up really good quality health research and any of the questions we're looking at and working on, but we're also trying to impart skills and ability often to work independently and grow research leadership teams and I think that's the theme we're going to hear again and again today.

Capable teams work obviously the overseas programs have done just an incredible job over the decade, of building careers but that's what we do and you know it's such a well-used term now Community Practice we're trying to do some work National catch up and measure what we've done in this last decade actually actively driving these Communities of Practice and making them work. So you can consider the Global Health Network as this one massive community of practice where the focus is global health research and we're trying to correct our diseases organizations teams roles so that they can transfer knowledge between them but we're also working on Communities of Practice and so what's this evolved into it's like a massive online Science Park so we've got every component needs to practice. So they might be working on data science or Covid or Community Engagement or and so it gives them a space to work in their own Mutual Hub that's theirs and it's all lever in the technology that we've managed to build into this over the last decade largely from the Gates funding for that.

So it's sort of LinkedIn, Spotify level technology, where people just have open access to and you can share that they have their own space but it's connected together and with all the others and so if you're a data manager in report working on analysis you might go in and find a nice systems on how to set up Red Cap or a clinical whatever you need or whether you might jump into different parts and find them in some standards for doing and neutral analysis research that you didn't even know existed and then a nice video on how to talk to community about with additional classes is quite important and so you might find a nice video to help communicate that research really well and building trust and we wanted to do their studies. So it started out really as we just had this idea of creating the sort of simple website where my idea was if you're an independent researcher working not in a major overseas program like I was at the time you were working somewhere else without a big organization like that around you could I find you know a template protocol consent form an SOP so that people have to do things. It began like that and that took off really really well

from the get-go because it was disease agnostic and then over the last decade or so we've connected in all these other hubs with these other groups and colleagues have come along and said well that's a good idea, I have an area for health and economics or can I have an area for research ethics and that's how the hubs have evolved. It's completely Community Practice in that sort of random population that's happened over time and so now if there's two halves that work because we've got researcher networks and organizations using the Hub who disseminate what they're doing in an open working space and then we've got literally millions hundreds of thousands of millions of courses being taken, hundreds of thousands of documents being downloaded and we have hundreds of thousands of research teams and come to the hub all the time to access that original aim we had to

One of the things we can do now is issue DOI numbers to information shared and that means the person who's donated the resources can cite them and we can really track them so that enables us to measure the impact of where things have gone but it's really important to have that nice specific approach and community of practice and rewarding groups and sharing.

It's really come a long way and but this is where the next 5 10 15 20 years. So we've long tried to make it a very neutral, open space and the feedback we get back from the user is that's what we've achieved. People say they come to the Global Health Network because they see it as their space where they can access training or tools or find the answer to a question and we've had groups like WHO said the lots of the big NIHR funding groups Gates Foundation, Wellcome they have a hub on the platform that's importantly quite mutual. WHO has one ethics and Wellcome have a hub called MESH for many years about Community Engagement and the whole point is not Wellcome saying this is how you do community engagement but it's Wellcome saying we want share everything we've done and what are grantees have learned about Community engagement and here we have a mutual space for sharing. The same with WHO is it's about Community just neutral space where it's not you start from the top by saying I'm not going to share something because I think WHO are you know a bit scary in the press at the moment, I couldn't possibly share anything, but if you can create some neutrality in this open space and people do share and so that's how the Hubs have evolved. What we want to do now with the whole thing is really push it into centralized federated and human structure where it is it's truly set up and led in the global South. Over this last year we've got something quite significant funding now from Gates and also Wellcome to set up the Global Health Network Africa Asia and Latin America. In Africa you just heard you know we've had before with Kevin is it's really very complex massive and it's really difficult to find the right place to put an institution to be to be really looked at across a whole continent. We are delighted that we are working with the African CDC absolutely essential but we also have many other country hubs and we're working to setup the hubs with Ghana and Rwanda so we had this model that's totally centralized completely flat and it's more like a franchise so groups can be developed networks in their own way and take their own initiatives forward for having some standardized approach on quality which I'll come back to in a second.

The other thing that has happened this year is the opening of the Collaborating Centre. I'm just so proud and excited about that because we've been working really closely with the deputy director General's Head of Science Division and she has this absolute mission to get

Research into every healthcare setting and to bridge the gap between health research and Healthcare delivery and make research really accessible she always has in front of you so that every healthcare worker every nurse a provision every lab has physio really thinks about researching things that they can do and they should be part of an office assistant difficult thing that foreign Doing a lot of work with them to remove barriers and perceptions of what research is and make it more accessible.

Working in the regions of the WHO offices has been really exciting with the last few months and that's really stepped up how we can operate in the regions and have that credibility of being a WHO Collaborating Centre but still operating in a mutual space.

So exactly what do we do to make all of this happen? so these five aims here were written into the Gates grant and the Wellcome application we've got, and but it really gives us a framework to hang it all on and I'll just talk through a couple of these in a little bit more detail. So Capacity Development Scale and I really try and come up with a new word because Research systems, we need to find the new terminology so you know usually good because I do think the old perceptions and capacity building around a team come in and teach somebody for your study and it's focused on one product or one season and then they're gone, it's about strengthening the whole environment for research and research system and I'm going to come back to that in a second about research management which is for that as well.

How do we do it at scale I want to do some pretty precise examples in a second but it's learning by doing and working with the whole teams in different settings to embed research into the Healthcare System, into the university, into the charity that wants to do more research like so many different groups at the moment. It's more of an ongoing approach it could be bringing people the ability to do a master's course or a PhD, you could be doing some vocational training but it could, it should be looking at the whole research team or the whole research team that you want to have and looking at where the gaps need to be filled in across the piece and we'll come back to that second.

Pathfinder Projects are really exciting for us now and it would be great to talk to everybody in more details about this later but it's essentially add on studies methodology pieces, the mixed, methods action research, add-on studies to track different types of studies and work out where the blocks are with lots of groups in here and we've been involved with lots of done sort of quite ad hoc Pathfinder mapping projects to see how long it takes to set up a study or what you need to do to ask new questions at this today's sets but we're really going to try to formalize that and do it on scale and use that as we're learning by doing so we can have another team to do an add on study to any piece of work and they'll map the process and find out where the differences were and then in action research because they'll find out what solutions are needed to solve each steps whether it's material transfer agreement whether it's a data management system whether it's training the team to do community engagement find out what the problems are, help them solve it and then share those points to make a nice framework for it. We have at least three important bits about research management piece and I always say you can't win a five million that you're able to win a five million pounds funding grant unless you can manage the five million pound grant and so much of the skill steps that are missing are in the ability to do project management, to hire

teams, the right contracts and manage finance and we're working at this across the department at the moment and bringing in the MasterCard team and some of the other groups across the university are here and we're going to build a new Community Practice Global Health Research management and which is really exciting.

Lots of things we do in the regions are around trying to take this two teams in a hospital so instead of having a journal Club you have a research Club in setting up a bank of computers so people who don't usually get access to screen to do online learning can have that or it's simply creating an environment research within that structure. There's really lots of teams here running we provide regional activities and that's these are lots of things going to be happening in practice. We're hiring about 45 people right now across the continents and that's going up over the next year, 18 months. This will be actually what they're doing is running these activities on the region to share them across the Centres of excellence and across the whole team.

Just finishing off it's back to where I started with this research cycle and that you need all different types of research. The short version is Global Health Network is really trying to equip whole teams with the ability to undertake everything out of research and not professionally from just one and you can give the tools and resources to do every single one of those so studies to save their support and accurate and with really trying to take that form now our biggest new announcement is we've just had our new diploma open for business and this is Oxford's first funding this is learning online whatever you want to call it qualification but you don't have to come to Oxford so that is what question is going out but it's been signed off by for education and it's amazing step for Oxford. We've been having years or the first qualification so there's only taken seven years. So do come and chat to the team we'd love to work with more of you here and do lots of groups already but really Thank you.