

International Committee Enquiry - FCDO's approach to higher education and research partnerships
April 2026

Evidence submitted on behalf of Liverpool School of Tropical Medicine (LSTM).

1. The important role of higher education and research partnerships

Higher Education and research partnerships play a critical role in the FCDO's wider development strategy when focused on addressing shared global challenges. They act as key drivers for knowledge exchange, accelerating scientific discovery and innovation to support long-term economic and social impacts both in partner countries and in the UK. They strengthen capacity and systems in recipient countries, develop a pipeline of future talent of global benefit, enhance the UK's leadership and global reputation and help to develop global health security.

1.1. World-leading expertise

UK universities are recognised as world-leaders in research, with extensive partnerships and collaborations across the globe. In 2022, the UK was the fourth largest producer of research publications; with almost 62% of research outputs produced with an international co-author¹.

LSTM is a leading example of international research within UK Higher Education. As a specialist postgraduate research university, dedicated to research and education in global health and infectious diseases, international research collaboration, particularly with Low- and Middle- Income Countries (LMICs), is at the heart of our strategy:

- our specialist community of over 500 researchers work in bilateral and multilateral partnerships across more than 70 countries, many within the poorest regions
- The impact of our research is recognised internationally and was ranked 2nd in the UK in the last REF²
- 90% of our research outputs in 2024-25 were co-authored with international partners
- we have an active research portfolio of around £738m

Much of Liverpool School of Tropical Medicine's research has been underpinned by the Global Health R&D element of ODA funding. Between 2021 and 2025, LSTM successfully managed projects with a

¹ [International comparison of the UK research base, 2025 - GOV.UK](#)

² [Liverpool School of Tropical Medicine : Results and submissions : REF 2021](#)

combined value of £41.3m of ODA funding; with a further £15.4m being managed through the LSTM-supported Malawi Liverpool Wellcome Programme, and a further £2.2m through LSTM Kenya.

The impact of ODA cuts on our ability to undertake research can be seen by a snapshot of LSTM's ODA related research income. At the beginning of 2020, just before the pandemic, LSTM held £79 million of ODA related grants through FCDO, NIHR global and MRC GCRF. The equivalent figure in April 2026 is £25 million - a reduction of over two thirds

1.2. Benefits of Higher Education and Research Partnerships

ODA-funded research predominantly supports partnerships between UK universities and collaborators in LMICs, including academic institutions, research organisations and NGOs. Such programmes generate high-quality, policy-relevant evidence, strengthen research capacity, and deliver sustainable, long-term outcomes for populations most affected by poverty and health inequalities.

ODA-funded research delivers a range of demonstrable benefits, including:

- **Strengthening world-leading research addressing shared global challenges:** Between 2015 and 2025, LSTM researchers co-authored 312 peer-reviewed publications funded through ODA grants. Of these, 86 publications (28%) were cited in 273 policy documents globally, spanning 14 of the United Nations' 17 Sustainable Development Goals, demonstrating clear policy influence and global relevance (Case study 1).
- **Supporting equitable and effective global research partnerships:** ODA funding underpins long-term, mutually beneficial collaborations with LMIC partners, resulting in shared priorities and high-quality joint research outputs. 90% of LSTM's research publications are co-authored with international collaborators, reflecting a strong commitment to inclusive research practice and shared leadership.
- **Trust in the UK:** Long term partnerships are dependent upon mutual trust built over many years; leading to a broad perspective of the UK as a place for subsequent education and business connections.
- **Delivering scalable and transferable solutions:** Research and innovation developed through higher education and research partnerships are frequently adapted and implemented across multiple countries and regions, including within the UK. This enables locally developed solutions to be scaled efficiently and cost-effectively for the greatest impact (Case Study 2).

- **Developing a global pipeline of future research and policy leaders:** ODA-funded programmes contribute to the training and career development of early- and mid-career researchers, strengthening global research capacity and fostering long-term expertise aligned with UK and international development priorities (see later case studies).

Case study 1: The Emergency Obstetric and Maternal Care Project¹ is an example of ODA-funded research delivering global impact – helping to strengthen capacity and systems in partner countries, supporting the government’s strategy of shifting impact from short-term aid to sustainable, long-term development. Led by LSTM, the project brings together partners including the Kenyan Ministry of Health and County Governments to improve health worker knowledge and skills. By developing sustainable local systems for training and mentoring and introducing data-led approaches to inform local planning for critical services, it has helped reduce maternal and neonatal deaths in Kenya. In just three years, its integrated care program trained more than 1,200 health workers across Kenya, Tanzania and Nigeria – reaching more than 1.3 million pregnant women and families.

Case study 2: The ReCITE project in Liverpool¹ demonstrates how expertise and learnings from a successful ODA-funded community health research project on maternal and newborn health and HIV testing in Kenya are helping to improve UK population health. By combining local health expertise and community insights with the power of storytelling the project identifies specific health issues in Merseyside’s most underserved areas, such as low vaccine uptake, and develops targeted solutions tailored to the unique needs of each community. In one workstream, school children were invited to share their knowledge and experiences about health through interactive workshops – with their insights shaping vaccination strategies in their schools. This localised approach ensures that the interventions are relevant and effective.

1.3. Supporting UK objectives

ODA-funded research delivered through higher education and research partnerships generates clear mutual benefits for both the UK and partner countries. In addition to addressing global development challenges, this investment strengthens the UK’s international standing, develops trust in the UK, supports economic growth, enhances national resilience to global health threats, and contributes to long-term global stability.

1.3.1 Contributing to the UK’s economic growth agenda

ODA investment in higher education and research partnerships supports innovation, skills development and industrial growth within the UK. A joint report by Impact Global Health and LSTM,

published in spring 2025, examined the impact of UK public investment in research and development (R&D) for neglected diseases. The report found that the £2.2 billion invested by the UK in neglected disease R&D since 1994, alongside a further £800 million required to complete products already in the development pipeline, has the potential to ultimately generate approximately £7.7 billion in additional economic activity within the UK. This investment could also catalyse more than £4.8 billion in private-sector R&D funding and support the creation of nearly 4,000 jobs across the UK³.

1.3.2 Enhancing the UK's international influence

Investment in ODA-funded higher education and research partnerships strengthens the UK's global influence through science diplomacy, long-term institutional relationships and strategic international alliances. Alumni of ODA-funded programmes and long-standing research partners frequently progress into senior leadership positions across governments, health systems and multilateral organisations. These networks extend the UK's diplomatic reach and influence over time, reinforcing its reputation as a trusted global partner and enhancing its ability to shape international agendas in health, science and development. It also helps to position UK industry as partners of choice. (Case Study 3)

Case Study 3: Dr Olusoji Adeyi (Master of Community Health, LSTM, 1988)

Dr Olusoji Adeyi is President of Resilient Health Systems and a respected policy expert. Formerly the World Bank's Director of Health, Nutrition, and Population, he oversaw massive international health investment portfolios.

His global impact includes serving as founding Director of the Global Fund's Affordable Medicines Facility for malaria, a financing mechanism that vastly expanded access to affordable life-saving therapies. An advocate for ending aid dependency, his influential 2022 book, *Global Health in Practice*, provides a definitive framework for strengthening national health sovereignty and reforming global health financing.

1.3.3. Protecting UK public health and developing UK capacity

ODA R&D funding has played a major role in increasing the capacity of the UK to respond to global infectious diseases threats, supporting development of a cadre of scientists and clinical academics with high level infectious diseases expertise and funding technologies related to infection. The value of this was exemplified by the UK's scientific response to the SARS CoV2 pandemic. The success of the Oxford COVID vaccine and the RECOVERY trials that evaluated life-saving interventions can be

³ [A stronger and safer United Kingdom through global health R&D investment | Impact](#)

attributed to UK clinicians and scientists who had gained their expertise working within ODA funded projects.

Strong ODA-funded scientific partnerships between LMICs and the UK facilitate the relationships and systems that will help to inform surveillance of and rapid response to the next pandemic. ODA-funded fellowships, such as the NIHR Global Advanced Fellowship, develop the next generation of clinical academic leaders in global priority areas⁴, can help strengthen health systems and improve outcomes for the poorest and most vulnerable populations. Funding for such programmes strengthens UK and LMIC research collaborations, supports researcher retention, and accelerates innovation and translation into practice, delivering long-term benefits for global health security and the UK research ecosystem.

2. The importance of sustainable funding models

The reduction in ODA funding from 0.7% GNI in 2020 to 0.3% in 2027 and use of the budget for funding UK migration costs has led to significant real term reductions in ODA R&D funding with considerable negative impacts on activity, outputs and the UK's reputation as a global research leader, as highlighted in a UKRI report⁵.

In the wake of the 2020 cuts, a Universities UK report highlighted the benefits and impact of ODA funded programmes on the UK, the Higher Education sector and partner countries⁶. The recent move away from grant-funded partnership research towards short-term, expertise-led and predominantly multilateral activity will actively undermine the UK's global research leadership and risks undermining previous progress. This shift will constrain domestic economic benefit and prosperity and materially weaken the UK's ability to protect vulnerable populations from disease, poverty and climate-related threats.

The impact of the latest reductions in ODA funding, revised development priorities and the government's International Education Strategy is already being felt across the UK higher education and research sector. LSTM has seen £16.3 million of ODA funding withdrawn from approved projects that were due to commence or continue. Other universities have seen similar impact. These withdrawals have affected programmes addressing critical priorities, including maternal and child health, antimicrobial resistance surveillance, tuberculosis, and vector-borne diseases.

⁴ [Global Advanced Fellowships | NIHR](#)

⁵ [UKRI-280722-ODARReview-Consequences2021ODABudgetCuts-KeyFindingsReport.pdf](#)

⁶ [Impact-of-ODA-funding.pdf](#)

The abrupt withdrawal of funding from ongoing and planned programmes has implications for established international partnerships with collaborators; there are no immediately available sources of funding to replace the ODA gap. Thus progress in improving health outcomes is put at risk, the sustainability of UK-supported capacity-strengthening efforts is damaged and the UK's role and reputation as a long-term research and development partner is harmed, ultimately significantly affecting the wider systems and networks that underpin disease surveillance, preparedness and health system resilience.

The FCDO-funded ReBUILD for Resilience project⁷, led by LSTM with partners in Lebanon, Myanmar, Nepal and Sierra Leone, examines how health systems in fragile settings respond to conflict, pandemics and other shocks. Its research⁸ shows that recent funding cuts are already disrupting essential services in Sierra Leone, Somalia and Lebanon, including maternal and child health, family planning, malaria and TB programmes, highlighting the urgent need for sustainable funding and stronger local systems to protect previous gains and future potential impact.

2.1. Recognising the funding gap

Research partnerships play an important role in delivering innovation, high-quality evidence and locally relevant impact. However, they cannot replace the scale, predictability or system-wide investment enabled through specific ODA-funded programmes such as the Fleming Fund. Many of the most significant global health threats, including infectious disease outbreaks and antimicrobial resistance, do not recognise national borders and require coordinated, intercountry and system-level responses.

The ODA-funded Fleming Fund demonstrated the critical importance of sustained, long-term investment in core public health capabilities, including surveillance systems, laboratory networks and workforce development across multiple countries. These foundational functions are essential to global health security and pandemic preparedness.

The withdrawal of the £265 million Fleming Fund is therefore a significant cause for concern. It risks undermining decades of progress in tackling antimicrobial resistance (AMR)⁹, an area recognised as a major threat to global and national health security. Reduced investment at this stage threatens both the sustainability of surveillance infrastructure and the erosion of hard-won partnerships, expertise and institutional capacity built over time.

⁷ [Introducing ReBUILD for Resilience - health systems researchRebuild Consortium](#)

⁸ [ReBUILD for Resilience – aid cutsRebuild Consortium](#)

⁹ [The discontinuation of the Fleming fund: Implications for global mitigation of antimicrobial resistance - PMC](#)

The LSTM-led Fleming-funded GEAR-UP project¹⁰ recently completed its second phase. The programme has made a substantive contribution to strengthening equitable approaches to AMR surveillance and response, while building a global community of practice that places equity at the centre of AMR efforts. Achievements such as embedding gender and equity considerations within Uganda's revised National AMR Action Plan, conducting equity analyses of Fleming Fund AMR surveillance data to identify populations that are under-represented or undertaking research on AMR risks among marginalised populations living in urban informal settlements would simply not have occurred without the Fleming Fund investment.

Individual research partnerships simply cannot sustain core health system strengthening activities in the same way as programmes like the Fleming Fund. Critical functions including disease surveillance, laboratory infrastructure, workforce training, supply chains and long-term institutional capacity require predictable, long-term investment at scale, supporting institutions and systems.

To mitigate the impact of shifting investment priorities and reductions in ODA-funded programmes, it is therefore critical that the UK continues to fund high-quality scientific research targeted at global challenges, whether through ODA or alternative government funding streams.

Without this, there is a risk that previous investments and hard-won progress will be lost; that the UK's health security and economic growth ambitions will be undermined, that the UK's reputation as a global research leader is damaged and that vulnerable communities are exposed to increased risks of illness, instability and poverty.

3. UK scholarships as a driver for growth and impact

UK Official Development Assistance-Funded scholarships, including the Chevening and Commonwealth schemes, are a powerful driver of economic growth, global influence and scientific discovery. They are distinctive in being fully funded, merit-based and explicitly focused on capacity and systems strengthening in Low- and Middle-Income Countries. By prioritising professional experience, leadership potential and public service impact alongside academic excellence, these scholarships strengthen the global research ecosystem by building a pipeline of future researchers, clinical academics and scientific leaders. Graduates contribute to internationally co-authored research, translate evidence into policy and practice, and facilitate long-standing research partnerships that underpin the UK's leadership in global health and development research.

¹⁰ [A critical moment in gender, equity and AMR](#)

ODA-funded scholarships also act as a global soft-power asset. Alumni frequently progress into senior roles across government, academia, health systems and multilateral organisations, where they maintain enduring professional and institutional relationships with the UK (Case Study 4, 5 and 6). These relationships enhance the UK's global influence, reinforce its reputation as a trusted partner in science and education, and create long-term opportunities for research collaboration, trade and diplomacy.

Taken together, UK ODA-funded scholarships represent a high-value investment that delivers mutual benefit: supporting inclusive economic growth and resilient systems in partner countries, while advancing the UK's strategic interests in scientific discovery, global health security and international influence.

Case study 4: Dr Sarah Kuponiyi - LSTM Chevening Scholar

Dr Sarah Kuponiyi is a Nigerian public health leader and 2022 Chevening Scholar who studied the MSc in Public Health at LSTM. She has since been awarded the 2025 British Council Study UK Alumni Award for Social Action. Dedicated to eradicating period poverty, she founded Alora Reusable Pads, distributing over 20,000 eco-friendly menstrual products to keep vulnerable girls in school. Through her 'A Well-Informed Adolescent' Initiative, she champions adolescent sexual and reproductive health rights and establishes vital safe spaces for youth. Serving as a UN Women National Gender Youth Activist. Her impact includes authoring USAID-recommended health curriculums, driving crucial menstrual equity and systemic healthcare empowerment for women across Nigeria.

Case study 5: 'Evelyn's story - Shaping a healthier future'

"I am a medical doctor and professor, working between a university and a teaching hospital in Venezuela. Despite living in a country with a high burden of infectious diseases, we have a limited capacity for clinical research and need more medical specialists.

Malaria, TB, dengue, and other diseases have shaped our reality amidst a decade of political and economic instability. I want to ensure that my country has more tools and more trained people to be able to respond better to these preventable diseases - that's what brought me to LSTM as a Chevening student.

My goal is to return home with the skills and networks necessary to strengthen our health system so it can cope with the burden of infectious disease. I want to build capacity by training new doctors, supporting young researchers, and ensuring that we are prepared for the outbreaks we know will come.

This opportunity is giving me the knowledge and confidence I need to help rebuild Venezuela's health system and to train the next generation of doctors and clinical researchers our country desperately needs. I am here because I believe deeply in my country and in the power of education to rebuild it. And I plan to return home ready to teach, ready to lead, and ready to help shape a health system capable of protecting our people."

Evelyn Gadivia, 2025 Chevening Scholar, LSTM MSc Tropical and Infectious Diseases

3.1. A challenging environment for scholarships

Reduction in available funding and recent tightening of UK immigration and study visa policies is threatening these highly successful scholarship schemes. The UK is becoming less attractive as a study destination and some high-potential candidates can no longer access ODA-funded scholarships. The introduction of visa restrictions on applicants from Afghanistan, Cameroon, Sudan and Myanmar provides a clear example of how policy decisions outside the education and development sphere are having unintended consequences for international scholarships, research partnerships and long-term capacity-building objectives, with impacts felt most acutely in those areas most in need. These measures risk undermining the UK's ability to recruit and support future global health and research leaders from LMIC partner countries and potentially diminish its future influence.