He took up his appointment to the Chair – named for the Irish-American senator and pioneer in US public health policy – in April 2020. Naturally, his first year has been “surreal” with “a lot of zooming from my bedroom” but he has spent time in his two offices – at the Centre, located in Foster Place, and in the Institution of Population Health in Tallaght University Hospital.

It is of course, an extraordinary time to be taking up a leadership role in public health. “The past year has been a terrible time for individuals and communities, with so many personal tragedies, but from a health policy research point of view, it’s been a really important time. We’re trying to learn, nationally and internationally, how to get the best from this terrible situation. The changes that we make to our health system to deal with this crisis will have a long-term impact on how we develop in the future.”

He is now leading a large-scale HRB research project, with funding for five years to look at the resilience of the Irish health system and how it responds to shocks. The project is international and multidisciplinary with partners in other Trinity Schools, the University of Toronto, the European Observatory on Health Systems and Policies and the London School of Economics, and links into the government through Sláintecare [Ireland’s national programme to transform health and social care service, launched 2018].

“I designed this research project before Covid. I was very involved in setting up Sláintecare and I was aware that, in a sense, it had come out of austerity in that we used the shock of the recession and the changed political environment to do something that is genuinely transformative. So I was interested in researching into the legacy aspects, positive and negative, of major shocks and how you can use that learning to build resilience into a health system. I was designing the project with Brexit in mind, thinking that’s what would deliver the next shock, and then along came the mega shock of Covid.”

He is hopeful that the project can be part of embedding lasting reform: “Crises can be opportunities to drive radical change. The Irish government is doing the smart thing – using this crisis to address structural weaknesses within the system. The 2021 health budget was increased by 20%, with half of that related to the reform agenda, so that shows the level of commitment.”

He came to health policy through his interest in economics and the public sector. After growing up in Yorkshire, he studied PPE (Politics, Philosophy & Economics) at the University of Oxford. “I was interested in understanding the societal perspective. It probably sounds naïve but I always thought ‘why don’t we use what we have to try and make things better?’ As simple as that, really.”
After his BA (1989) he did a Masters in Development Economics and then got a job in Uganda in the Ministry of Health, which set him on his career path in health policy. He worked in Bangladesh as health and economics adviser to the government for a few years, which he loved, but decided to pivot to academia: “I think the best place to influence policy, actually, is from an academic position – when you’re in government there is never enough time. In academia, you get time to collect data and explore and then you can feed the answers back into government. There’s a wonderful quote in Proverbs: ‘It’s the glory of God to hide a matter; the glory of kings to seek it out’ – I was always very taken with the idea of seeking out answers.”

A job came up in the University of Cape Town, where he also completed his PhD on managing different stakeholders in health reform. He loved Cape Town, where he, his wife (children’s author Debbie Thomas) and three daughters were part of “a fantastic cross-cultural church in the townships”. In 2005 he moved to Ireland to take up a lectureship in Trinity’s Centre for Health Policy and Management, of which he became director in 2015.

In his new role, he will continue teaching on the School of Medicine’s PhD and Masters programmes, as well as to 4th year undergraduates. His aim with teaching is to give students a different perspective on health care and an understanding of how decision-makers deal with issues: “I want them to realise that it’s not just about the individual patient before them; it’s about how society works as whole – because policy decisions will impact how they practice medicine.” He uses role playing to get issues across: “I might ask one of them to role play the Department of Finance, another a local government official or an NGO – that gets them thinking about how different stakeholders approach issues.”

His goals over the next five years are to deliver the HRB project; to support colleagues “to enhance their own research capacity at national and international level”; and to look into developing a new masters course in health economics and health systems, comparing how different countries promote sustainable health and improve access.

For now, he is focused on supporting his family through lockdown – “they’re supporting me too – my daughters have been teaching me things like drawing.” And he runs three times a week, sometimes through the grounds of Castletown House or by the stud farms near where he lives in Celbridge. “I use running to detox and process my thoughts.”