

By endurance we conquer – what Shackleton can teach us today

We have all had to find sources of inspiration to help us in the last few months. Mine came on one of many local lockdown walks in Dublin, when I passed a house with a plaque to “the Antarctic Explorer and Leader of Men”, Sir Ernest Shackleton, whose childhood home it had been. I have been inspired by Shackleton for a long time, since I was 17 and went on an expedition which re-traced his journey to the Antarctic island of South Georgia. But it felt particularly appropriate to find him again now – to be reminded of his story of grit and determination at a time when we have all been searching for these too, and to recall his family motto: “by endurance we conquer”.

Because if I had to sum up 2020 so far in one word it would be endurance. For me, as I imagine for most of us, this has been a period we have just had to get through, separated from family and friends and unable to do so many of the things we enjoy. As many restrictions were relaxed this week, you could almost feel the national sigh of relief. We can make plans again, see people who for the past four months have only apparently existed on Zoom, begin to have fun. But even in this new normal, for as long as we continue to live with coronavirus, I suspect we’ll need endurance – and on that there is much we can learn from Shackleton.

Shackleton’s childhood home in Donnybrook, Dublin

Shackleton’s challenges may not on the surface look much like our own. When the man from Kildare, by then a veteran of two previous British Antarctic expeditions, set off from London in 1914 on his ship Endurance, it was in the hope of being the first to cross the Antarctic continent. It was a task he knew would be “most dangerous, difficult, and strenuous work, that has nearly always involved a certain percentage of loss of life.”

Famously, he failed. The ship was crushed in the ice, had to be abandoned, and he set himself a new task: “to reach land with all members of the expedition”. Between October 1916 and April 1917 Shackleton and his men drifted with the ice flow. They then struck out on three small life boats, eventually making it to the rocky outcrop of Elephant Island. With much of the crew suffering from frostbite and exhaustion, and with limited provisions, Shackleton decided that he and 5 others would have to mount a rescue mission by sailing 800 miles across treacherous seas in an open boat to the whaling stations on South Georgia. They took only enough food for a month. They left 22 men on Elephant Island not knowing if rescue would come.

Improbably, after 15 days at sea and hurricane-force winds, Shackleton did reach South Georgia, but landed on the wrong side of the island and had to cross the previously unclimbed mountains on foot. When they finally arrived at the whaling station, the manager did not recognise them. It took a further

four 4 months to get back to Elephant Island, where incredibly, he found all members of the crew still alive.

I have always felt a very personal connection to Shackleton. I had a small taste of some of what he faced when I was one of a group of young people who travelled to South Georgia to carry out scientific surveys and search for the stove he abandoned in the mountains, when he heard the whistle from the whaling station and knew he was safe. The month we spent there, in tents and on boil-in-the-bag rations, was certainly the biggest test of physical endurance of my life. As for mental endurance, the isolation and uncertainty felt by so many during coronavirus have been tougher. Not knowing whether he would make it back to Elephant Island, or what he would find if he did, Shackleton surely had to overcome his share of mental struggles too, and perhaps these were not so dissimilar to ours.

South Georgia's mountainous interior with glaciers and crevasses

Another Antarctic explorer, Sir Raymond Priestley said of his three best known contemporaries: "For scientific discovery give me Scott; for speed and efficiency of travel give me Amundsen; but when disaster strikes and all hope is gone, get down on your knees and pray for Shackleton." Shackleton himself identified four qualities as essential for overcoming adversity: optimism, patience, idealism, courage. DCU and the Shackleton committee in Athy have produced a great set of podcasts looking at the relevance of each of these during the current pandemic, which you can find here – and they have rightly suggested a fifth, kindness. Above all for me, Shackleton's ability to keep himself and those around him going when faced with yet another obstacle, is what set him apart and why he should be celebrated.

Photographs from Shackleton's Endurance expedition in British Embassy Dublin

At the British Embassy in Dublin we are privileged to have on our walls a number of photographs from the Endurance expedition. They were hung for the 100th anniversary to honour Shackleton as a great figure in the history of British and Irish Antarctic exploration. Like many workplaces, we have been operating the Embassy virtually since March. But when we do get back to the office, I look forward to seeing them again, as a reminder not only of an incredible UK-Ireland connection but of the amazing power of human endurance.

[Self-isolation lifted for lower risk](#)

countries in time for holidays this summer

- passengers returning to or visiting England from certain destinations including Germany, France, Spain and Italy, will no longer need to self-isolate on arrival from 10 July 2020
- FCO will set out exemptions for a number of destinations from its global advisory against 'all but essential' international travel, with changes coming into effect on 4 July 2020
- all passengers, except those on a small list of exemptions, will still be required to provide contact information on arrival in the UK

Passengers returning or visiting from certain destinations which pose a reduced risk to the public health of UK citizens, including Spain and Italy, will no longer need to self-isolate when arriving in England, Transport Secretary Grant Shapps will set out today (3 July 2020).

The new measures will come into force from 10 July 2020, meaning that people arriving from selected destinations will be able to enter England without needing to self-isolate, unless they have been in or transited through non-exempt countries in the preceding 14 days.

A risk assessment has been conducted by the Joint Biosecurity Centre, in close consultation with Public Health England and the Chief Medical Officer. The assessment draws on a range of factors including the prevalence of coronavirus, the numbers of new cases and potential trajectory of the disease in that destination.

The list of countries will be published later today. A number of countries will be exempted from the requirement for passengers arriving into England to self-isolate for 14 days. All passengers, except those on a [small list of exemptions](#), will still be required to [provide contact information on arrival in the UK](#).

The government's expectation is that a number of the exempted countries will also not require arrivals from the UK to self-isolate. This will mean that holidaymakers travelling to and from certain destinations will not need to self-isolate on either leg of their journey.

The exempted countries and territories will be kept under constant review, so that if the health risks increase self-isolation measures can be re-introduced to help stop the spread of the disease into England.

The Foreign and Commonwealth Office (FCO) has also updated its global advisory against 'all but essential' international travel to exempt certain destinations that no longer pose an unacceptably high risk of COVID-19.

When planning holidays or overseas travel, people should therefore check the

latest [FCO travel advice](#) on GOV.UK, including whether there are any self-isolation measures in place for their outbound or return journey.

If the country or territory they are visiting is exempt, they will not have to self-isolate on their return to England. Passengers should also stay alert to any changes to local public health measures while they are travelling, including by subscribing to [FCO travel advice updates](#).

The government continues to work closely with international partners around the world to discuss arrangements for travellers arriving from the UK and will continue this engagement ahead of the changes coming into force.

Transport Secretary Grant Shapps said:

Today marks the next step in carefully reopening our great nation. Whether you are a holidaymaker ready to travel abroad or a business eager to open your doors again, this is good news for British people and great news for British businesses.

The entire nation has worked tirelessly to get to this stage, therefore safety must remain our watch word and we will not hesitate to move quickly to protect ourselves if infection rates rise in countries we are reconnecting with.

The FCO's travel advice is based on an assessment of a range of factors that could present risks to British nationals when abroad, using different criteria to the list of countries exempted from self-isolation measures. It is based on a range of factors including epidemiological risks, capacity of local healthcare systems, transport options and law and order. These FCO travel advice exemptions will come into effect on 4 July 2020 and will be kept under review.

All passengers, except those on a [small list of exemptions](#), will still be required to [provide contact information on arrival in the UK](#), including details of countries or territories they have been in or through during the previous 14 days. Existing [public health advice on hand hygiene, face coverings, and social distancing](#) must also be followed.

The exemptions from self-isolation apply to all modes of international transport, including sea and international rail routes as well as flights.

The Devolved Administrations will set out their own approach to exemptions, and so passengers returning to Scotland, Wales and Northern Ireland should ensure they follow the laws and guidance which applies there.

Regular retesting rolled out for care home staff and residents

- Care home staff to be given coronavirus tests every week and residents monthly from Monday to identify anyone with the virus and reduce transmission
- Repeat testing will be initially prioritised for care homes primarily looking after over 65s or those with dementia before being rolled out to all adult care homes
- The government's Vivaldi 1 care home study highlights the importance of regular staff testing while there is a higher prevalence in care homes

Staff will be tested for coronavirus weekly, while residents will receive a test every 28 days to prevent the spread of coronavirus in social care. This is in addition to intensive testing in any care home facing an outbreak, or at increased risk of an outbreak.

The new testing strategy comes following the latest advice from SAGE and new evidence from the Vivaldi 1 study indicating a higher prevalence in care homes, and therefore a case for frequent testing in care homes and their staff.

The Vivaldi 1 study, which surveyed almost 9,000 care home managers and analysed data from whole care home testing, identified the higher levels of the virus among care staff, particularly among temporary staff who work in multiple care settings. The study suggests that care home staff may be at increased risk of contracting the virus, which they may then pass on to others if they have no symptoms.

Health and Social Care Secretary, Matt Hancock said:

Our response to this global pandemic has always been led by the latest scientific advice from world-class experts, and we will now offer repeat testing to staff and residents in care homes, starting with homes for elderly residents before expanding to the entire care home sector.

This will not only keep residents and care workers safe, but it will give certainty and peace of mind to the families who may be worried about their loved ones, and give staff the confidence to do what they do best.

Over the following 4 weeks, retesting will have been rolled out to all care homes for over 65s and those with dementia who have registered to receive retesting. Repeat testing will be extended to include all care homes for working age adults in August.

Minister for Care, Helen Whately said:

Social care and its workforce are at the front line of this unprecedented pandemic with many of our care homes looking after those who are most at risk from coronavirus.

It is our priority to protect care residents and staff and testing is a crucial part of that. That's why from Monday residents will be offered monthly tests, and staff will be tested every week. This is so important as it means care workers can be sure they are providing the very best care without worrying if they are carrying the virus themselves.

We will work with local directors of public health to deliver an initial round of asymptomatic whole-home testing for staff and residents at the extra care housing and supported living settings at most clinical risk. The operational details of rolling out this testing to this sector are being worked through and more details will be provided shortly.

In May, the government launched a [Care Home Support Package](#), backed by the £600 million Infection Control Fund, to minimise risks in care homes by limiting movement of staff.

David Pearson CBE, Chair of the Adult Social Care Support Taskforce has written to care providers this week outlining the importance of reducing movement between care homes, making best use of the Infection Control Fund.

David Pearson CBE, Chair of the Adult Social Care Support Taskforce said:

Protecting staff and residents inside our care homes is an absolute priority throughout all phases of the pandemic. Testing is clearly an important part of this, particularly regular testing in key areas where prevalence is likely to be high.

This new phase in our testing strategy is an important step in protecting the 1.5 million care home staff across the country and the residents they care for. We are prioritising those care homes for older residents and those with dementia, but will expand this even further by August. □

The Vivaldi 1 study results will be published today by the Office for National Statistics and on GOV.UK at 9:30am on Friday 3 July.

Asymptomatic testing in domiciliary care settings will be guided by the results from the PHE prevalence study into domiciliary care.

Government backed projects to speed up life-saving cancer diagnoses

- Patients could receive earlier and more precise diagnoses for potentially life-threatening diseases such as cancer thanks to £16 million funding from government and charity
- funding will benefit six innovative health projects across the UK using disruptive technologies such as AI, to detect chronic or terminal diseases earlier, helping to save lives
- the projects will bring together the UK's world leading academia, research institutions, NHS, charities and industry

Patients could receive earlier and more accurate diagnoses for potentially life-threatening diseases such as cancer and Crohn's disease, thanks to £16 million of new funding announced by Science Minister Amanda Solloway today (3 July 2020).

The government backed funding, delivered to 6 of the UK's most innovative specialist health projects, from Glasgow to Cambridge, will harness the most disruptive technologies, including artificial intelligence, to develop more precise medical solutions, which could enable earlier detection and diagnosis of some of the most serious and potentially fatal diseases.

One project led by the University of Oxford is working to improve survival rates in people with lung cancer, the deadliest form of cancer in the UK. It will bring together existing work being led by the NHS, universities, cancer charities and digital health companies to integrate the best of digital imaging and diagnostic science to help identify cancerous tumours in the lung earlier.

Another project, led by technology start up Motilent, is working on healthcare solutions to more effectively treat Crohn's disease, a painful, lifelong inflammatory condition affecting 180,000 people in the UK. Through the use of artificial intelligence, it will seek to accurately predict when to start and stop drug use to control the disease, which currently has a 60% failure rate, and which can lead to further, irreversible damage to a patient's bowel.

Science Minister Amanda Solloway said:

Our brilliant scientists and researchers are harnessing world-leading technologies, like AI, to tackle some of the most complex and chronic diseases that we face."

Tragically, we know that one in two people in the UK will be diagnosed with some form of cancer during their lifetime, while Crohn's disease affects up to 180,000 people across the country.

These six cutting-edge projects will improve early diagnosis, create more precise treatments, and crucially, save lives.

Other projects receiving funding include:

- Actioned, led by Queens University Belfast which is using artificial intelligence to achieve more accurate and earlier diagnosis of early relapse in cancer, improving the outcomes for patients;
- A University of Cambridge project which will help to diagnosis oesophageal cancer earlier. This type of cancer has increased six-fold since the 1990s and just 15% of people will survive for 5 years or more – often because it is diagnosed too late. Barrett’s oesophagus, a condition that can turn into cancer of the oesophagus is more common in patients who suffer from heartburn. The project aims to diagnose up to 50% of cases of oesophageal cancer earlier, leading to improvements in survival, quality of life and economic benefits for the NHS
- A University of Glasgow-led project working to identify growths that are most likely to develop into bowel cancer, which is the second biggest killer among cancer related deaths in the UK.
- University of Manchester led-research into when liver problems, which affects up to 4 in10 people, can lead to liver scarring and sometimes complete liver failure. Current tests pick up advanced scarring but do not pinpoint early disease or those patients who are destined for much worse. The project will use new software to identify liver damage earlier and more accurately.

Of the £16 million awarded today, over £13 million will be delivered by the government, while up to £3 million will be made available from Cancer Research UK, to specifically support the oncology focused projects.

The funding, delivered through the [Industrial Strategy Challenge Fund](#), is part of a government programme in data to early diagnosis and precision medicine. The competition is run by Innovate UK on behalf of UK Research and Innovation (UKRI) and forms part of the government’s commitment to increase research and development investment to 2.4% of GDP by 2027.

Notes to editors:

- UKRI’s [competition for the best integrated diagnostics](#) innovations was originally announced in July 2019.
 - UKRI works in partnership with universities, research organisations, businesses, charities, and government to create the best possible environment for research and innovation to flourish. Operating across the whole of the UK with a combined budget of more than £7 billion, UKRI brings together the seven Research Councils, Innovate UK and Research England.
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Yemen needs international help to escape tragedy

This article was originally published in the Financial Times on 1 July.

After the Arab spring, it seemed that Yemen would follow a path of peaceful political change. Civil society blossomed, and Yemenis of all affiliations, including women and young people, took part in shaping the country's future. Today, after six years of war, this hope has almost been extinguished. Yemen is on the brink of collapse.

Covid-19 is stretching the country's fragile healthcare system to breaking point. According to modelling by the London School of Hygiene and Tropical Medicine, Yemen may have surpassed 1m Covid-19 cases last week and cases continue to rise rapidly.

We have a global responsibility to ease the suffering of the Yemeni people. We – the foreign ministers of Germany, Sweden and the UK – would like to share how we think the international community can contribute to peace.

First, a nationwide ceasefire and a political settlement remain Yemen's best defence against the pandemic. Following UN secretary-general António Guterres' call for a worldwide ceasefire in response to Covid-19, the Saudi-led coalition announced a unilateral ceasefire in April.

Unfortunately, the Houthis have not reciprocated and fighting has continued. The Houthis have launched ballistic missiles towards Saudi Arabia, including at civilian targets, as recently as last week, recklessly endangering civilian lives. There is no time for further delay as civilians continue to suffer and die. The international community must press all actors to accept the UN proposal for a ceasefire. This should be the start of a political process, and the full participation of women must be ensured.

Second, humanitarian assistance needs to be delivered to all Yemenis who need it. To do that, the UN urgently needs more funding. Together, our three countries recently pledged an additional \$365m to support UN humanitarian work in Yemen this year. Other countries must step up and donate generously and quickly. We must also challenge any obstacles that continue to prevent humanitarian agencies from effectively operating in Yemen. This is particularly the case in northern areas of the country controlled by the Houthis. The Covid-19 response can only stand a chance if all Yemeni parties lift their restrictions on aid.

Third, we need to encourage implementation of existing agreements. This includes the Stockholm Agreement, which calls for a mutual withdrawal from the port city of Hodeidah, and the Riyadh Agreement. If they were properly implemented, the commitments previously agreed by the parties would bolster UN efforts to achieve comprehensive peace.

Fourth, for Yemen to effectively recover from Covid-19, its already fragile economy must be kept alive. The indirect consequences of coronavirus could be even more severe than the direct impact. In particular, Yemen's partners need to support the government of Yemen to pay public sector salaries – not least for medical staff – and to implement urgent economic reforms.

Lastly, we expect full respect of international law, including humanitarian law and human rights, from all actors. All parties have to ensure civilians are protected in this cruel war. This includes protection for religious minorities, women, children, journalists and political prisoners. We call on the Houthis to implement their announcement to release members of the Baha'i faith. The supply of weapons to the Houthis, including weaponry of Iranian origin, is a violation of the UN arms embargo, as evidenced by the UN Panel of Experts, and only extends the conflict. This must stop.

We are ready to help once an agreement is reached to end the conflict and to reverse the fragmentation of the country. A united international community must stop those who seek to extend the conflict for their personal benefit. We envisage an agreement based on shared power, compromise, and the rule of law. Two of us represent member states of the EU and we encourage it to step up its role in Yemen.

The Yemen that emerges from a peace agreement needs to play a constructive and active role in the region – contributing to the security of its immediate neighbours, Saudi Arabia and Oman. Our three countries stand ready to assist Yemen's transition into a positive force for regional security.

Under the cloud of Covid-19, Yemen is facing an enormous tragedy. It is high time the international community united in support of its people. Yemen could be transformed. Instead of being defined by suffering and as a threat to regional and international security, Yemen could become a model for other fragmented states in conflict and a catalyst for enhanced security in a region of divergent interests. We stand ready to work with and support Yemen to achieve these humanitarian and strategic goals.