



# Goal plan for 2023-26

Department of Public Health



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# Contents

<b>0. SUMMARY OF THE DEPARTMENT'S MOST IMPORTANT GOALS.....</b>	<b>3</b>
<b>1. RESEARCH. ATTRACTING, DEVELOPING, AND RETAINING ACADEMIC TALENT</b>	<b>4</b>
<b>2. EDUCATION. CLOSER TIES TO RESEARCH AND PRACTICE.....</b>	<b>7</b>
<b>3. COLLABORATION AND SOCIETAL COMMITMENT – NATIONALLY AND GLOBALLY .....</b>	<b>10</b>
<b>4. ONE UNIFIED AND FOCUSED UNIVERSITY. ORGANISATION, EMPLOYEES, AND PHYSICAL FRAMEWORK.....</b>	<b>12</b>
<b>5. PROCESS AND EMPLOYEE INVOLVEMENT .....</b>	<b>15</b>

## 0. Summary of the Department's most important goals

The Mission of the Department of Public Health is “*to provide the scientific foundation for improving public health, both nationally and globally, and to create greater insight into the links between health, the individual and society as well as the ethical, equity, sustainability, and political aspects*”.

Every day our staff delivers on this mission through high quality research and teaching. In fact the last Shanghai Ranking placed our Department as the 13<sup>th</sup> best Public Health Department in the world. The present goal plan describes how and where we will add to this solid foundation.

From a helicopter view the goal plan can be summarized as follows:

- We aim to launch cross-department mini-centers both to harvest expertise across the Department and to set the national agenda within our chosen fields. Such fields could be: a *just and sustainable* transformation of the healthcare system, *det nære sundhedsvæsen* or *complexity science* to understand health across the lifespan. We also want to further fuse our data-driven research with our lab-research and clinical specialities. All initiatives should be implemented such that they contribute to making career paths more transparent for junior staff.
- In teaching we want to utilize the synergies between the different study programs hosted at the Department as well as increase opportunities for students to include practice-oriented elements. We will contribute to the revision of the Medical program's curriculum with simultaneous special focus on both digitalization and patient-needs, which are currently transforming the health care system. Internally we want to make the allocation of teaching tasks more transparent.
- We want to increase and deepen our partnerships with external stakeholders. This will contribute to *innovation, impact as well as funding*. Themes for partnerships include advanced use of health data, digitalization, complex interventions and more. We will promote Medical Museion as a unique hub for co-creation in Denmark.
- We want to make the highly-specialized skills of the Department within e.g. statistics, qualitative research methodology, co-creation and global health accessible for the rest of the University.
- As a workplace we will further develop an inclusive work culture with an emphasis on diversity. We will strive to ensure that we have the world-class technical and administrative personal for supporting research and teaching.

# 1. Research. Attracting, developing, and retaining academic talent

The recent pandemic has shown us that good public health is a prerequisite for most other aspects of society. Indeed most societal challenges (e.g. inequality) are inherently also public health challenges. It is well-known that public health is the result of highly complex processes involving dynamic feedbacks between individual biological, social, psychological and behavioural factors, as well as structural societal and environmental conditions across time and space. Among others, these complex processes include genetics, epigenetics, social conditions and practices, environmental exposures, and global migration of people and microbes. It is also clear that improving public health in general, and our health care system in particular, in a time of an aging population, will require renewed focus on social determinants of health, digitalization of our health care system, inequality in access and quality, and “det nære sundhedsvæsen” (a “community- and citizen centered health care system”). The latter was even emphasized by the prime-minister in the 2022 New Year Speech. The Department, its research and its graduates are essential for Denmark to remain a world leader in public health research. It will continue to feed into policies and practices at multiple levels with the aim of improving population health in Denmark and contribute globally; work towards a sustainable health care system for both prevention and treatment; understand population diversity; and finally meet the political request for a “nært sundhedsvæsen”. The Department is already deeply involved in all these fields. We will continue our broad-ranging research activity. In addition, we will supplement with new Departmental cross-cutting initiatives on selected themes. This is further described below.

For recruitment and retention, the rapid development of the field of public health science is both a challenge and an opportunity. The opportunity lies in more and more talented people being drawn into the field. The challenge, however, is, that the competition for staff from industry etc. becomes more severe. Our answer to both is described in Goal 1.3.

## **Goal 1.1. Agenda setting initiatives through cross-departmental “mini-centers”**

### *Motivation and Challenge*

Meeting the challenges described above requires the full breadth of our Department’s research, but also well-defined research groups, which can provide the best evidence-based policy advice. Further, funding opportunities are increasingly being diverted to larger research endeavours

requiring substantial intersectoral and interdisciplinary efforts between academic environments. This requires novel ways of working across the Department. It is noted that the successful completion of this goal requires that the Department remains physically located together.

### *Activities*

We will:

- Develop a model for cross-Departmental research initiatives. One possible model is that such initiatives be centred around a common theme, well-defined in terms of people, and physically co-located. This will require support from the Department and in return an expectation that initiatives become *de facto* agenda-setting in Denmark (within the chosen topic) as well as attract substantial external funding.
- Discuss how and if we should introduce such a working model and ensure that this discussion is inclusive across the whole Department
- Decide the chosen theme through a transparent process. Possible examples include:
  - “Det nære sundhedsvæsen” understood as general practice, municipalities and non-admission interactions with the specialized health care system. The ultimate goal would be to foster a healthcare system and a care service which both spatially and temporally is close to the patient, which focuses on cross-sectional transitions that benefit patients where they are, and which acknowledges the complexity of illness, disease and socio-cultural entanglements in order to address social inequality in health.
  - A sustainable and diversity-sensitive health care system (in Denmark and globally) which contributes to a just green transition. Such a transition should be “just” both in terms of planetary health and its social/ethnic aspects.
  - Understanding public health through the lenses of complexity studies. This includes understanding the health effect of multi-generation life-courses as well as the interplay between individual, environmental and socio-cultural determinants of health.
  - Design of digital health and care services in relation to the people-centered healthcare.

## **Goal 1.2. Deepening links between “dry” Department research and “wet” clinical environment.**

### *Motivation and Challenges*

Whilst the majority of the Department conducts “dry” research we also have a strong lab focused on biological effects of pollution as well as clinical specialities (General practice, Social medicine and Work and Environmental medicine). This gives us unique opportunities within research, teaching and societal impact. However, we need to strengthen the links between the clinical groups, which are not physically co-located with the Department. Likewise, we should strengthen links with core wet collaborators eg. CBMR, CPR, reNEW and multiple groups at hospitals across Copenhagen and Zealand.

### *Activities*

We will:

- Develop the triangle consisting of i) our lab research, ii) classic epidemiology and iii) the clinical groups on Work- and Environmental medicine. This will among other factors require that our lab-facilities are kept updated and in close proximity to collaborators at Rigshospitalet and Panum.
- Strengthen both research and teaching links between Social Medicine and the clinical Social Medicine groups.
- Continue and expand data collection including exploiting and linking with biological material through national and international cohorts such as Danish National Birth Cohort (BSiG).
- Expand our use of – and methodological competences within - non-traditional data sources such as social media use, diverse images, and routinely collected clinical test data.
- Expand collaborative relationships between clinical environments and IFSV research environments focused on the organization of health services and the ethical challenges related to digital health infrastructures and new medical technologies.

### **Goal 1.3. Recruit, retain and develop the best talents**

#### *Motivation and Challenges*

The Department of Public Health recognizes that attracting, retaining, and developing brilliant staff at both junior and senior level is crucial. Success in recruiting, retaining, and developing talent requires management focus, communication, and facilitation of clear and transparent career paths (e.g. tenure track assistant professors and the professor promotion program) and the ability to offer competent administrative support. To attract and retain competent technical administrative staff, the

Department strives to offer an attractive and engaging working environment with development possibilities for all staff.

Our greatest challenge is that external funding is necessary for most recruitments, and budget uncertainty makes it difficult to give firm promises on future career paths. Furthermore, the external funding dedicated to specific research areas may limit the possibility of junior researchers to shape their own independent research profile.

### *Activities*

We will:

- Continue to recruit junior research talent through internationally oriented recruitment. Promote diversity in its broadest sense in the recruitment process in alignment with the six goals of the UCPH Action plan for Equality and Diversity. Ensure career possibilities are transparent already when planning new recruitments and during first interview.
- Do even more to on-board international staff, including how to navigate the university, the Danish funding landscape, the language, and society.
- Develop and support early career networks for postdocs and assistant professors to foster new collaborations as well as to keep researchers that continue their careers, including those in dual positions in e.g. industry associated with the Department.
- Promote awareness of and build on the 6 criteria of merit in order to emphasize that contributions to teaching, digital development, social impacts, SDGs etc. are assessed on an equal footing with traditional research production in recruitment and promotion.
- Actively invest in an innovative and creative working environment in order to retain and develop academic talents.
- Finalize our generation transition initiated in 2017 which – as planned - will require a continuing draw on the Department's savings in the years to come.

## **2. Education. Closer ties to research and practice**

The Department is responsible for a suite of bachelor and master programs broadly in the field of public health and contributes substantially with public health aspects to the medical and other health related study programs. Moreover, the Department is responsible for clinical courses in General practice, Social medicine and Work and Environmental medicine. Finally, the Department is

accountable for three of the PhD programs at the Graduate School of the Faculty of Health and Medical Sciences. These programs form an inspiring scientific environment for the students and the programs are aimed at initiating a relevant variety of PhD courses and scientific events within each area.

### **Goal 2.1. Thinking and teaching across programs**

#### *Motivation and Challenges*

The proposed regionalization has initiated a broad discussion across the Department and with our students. At this point in time it remains unclear how exactly the regionalization process will play out. However, the discussions unveiled possible potentials for more collaborations and co-teaching between the different study programs as well as potentials for including clinical environment and external partners in our teaching. The challenges for harvesting these potentials are mostly that: i) staff that are hard pressed by current teaching obligations, ii) limitations are imposed by regulations, not least relative to using e-based teaching modalities, and iii) there is an increasing amount of administrative work not compensated by increased administrative staff locally. In parallel, the study program in Medicine is being revised, which will require a strong input from the Department.

#### *Activities*

We will:

- Explore possible synergies between the study programs of Health Informatics and Public Health Science. Harvesting these synergies will require that the Health Informatics program is relocated, such that it is in proximity to the rest of the Department and the teaching of the Public Health Science program.
- Strengthen student opportunities to work with practice-oriented elements and engagement with external stakeholders, including through specific courses, internships, and inclusion of students in research projects in collaboration with stakeholders. We will in also draw on our “Aftagerpaneler” and our clinical speciality fields.
- Develop how public health, planetary health, biostatistics, aging, multi-morbidity and general practice are integrated into the Medical program along with the Department’s work with theory of science. In particular in relation to the ongoing revision of the curriculum.

### **Goal 2.2. High quality research-based teaching**



### *Motivation and Challenges*

A strong and inspiring academic educational environment must be fostered through strong links between research and education supported by dedicated and effective administration. Research must permeate all degree programs, and student commitment and active participation must influence and contribute to research. Moreover, research on learning in a digital world is necessary for optimal student development. The way teaching work is “counted” could be more encouraging for adapting digital teaching components.

The obligation to teach in Danish on most courses leads to teaching overload of Danish-speaking staff and limits the possibilities for international recruitment of both senior staff as well as PhD and postdoc fellows from other countries who need to develop their teaching skills as part of their academic career path. In addition, the allocation and monitoring of teaching duties needs to be transparent also for junior staff.

### *Activities*

We will:

- Increase opportunities for postdocs and PhD students to be involved with research-based teaching, building upon their own research activities or general fields of interest. One example would be to encourage junior staff to organize PhD-courses within their speciality as well as organize summer schools etc. where English speaking staff can contribute.
- Strengthen and coordinate the Department’s initiatives within educational practice and share new evidence-based teaching methods, including feedback mechanisms, tutorials etc.
- Target, develop, integrate, coordinate, and disseminate the use of digital teaching methods and educational resources.
- Incentivize course lecturers to transform their “regular” teaching material into long-lasting and widely available digital learning tools, with the ultimate goal of making it globally available (and not confined to the University of Copenhagen) either permanently or for a specified time-period.
- Frame and integrate the United Nations Sustainable Development Goals across the educational programs
- Use Medical Museion actively in our teaching and challenge classic teaching modalities.

### **3. Collaboration and societal commitment – nationally and globally**

The importance of Public Health science has never been more pertinent or recognized. As Denmark's leading Public Health department, we have an obligation both to develop basic research within our field and to improve public health in Denmark and globally through our interactions with society at large. Our Department's graduates are important conveyors of the research and competencies gained through our research-based education, and they represent an important avenue of societal impact. We also see it as our task to contribute with perspectives and questions based on our research, which may challenge dominant ideas and assumptions about public health issues in society. In parallel, we collaborate with the public sector (authorities, municipalities, regions, and the clinic at different levels), with agencies and non-governmental organizations (NGOs) in Denmark and globally, and with private companies (medical industry, IT, consultancy companies, etc.) on specific research and development projects. Finally, we have a strong media presence both when disseminating our own research findings, and more broadly, as experts for the media as well developing new public engagement methods at Medical Museion. All these activities together constitute the societal impact of the Department. Our goal is to strengthen them all.

#### **Goal 3.1. Partnerships**

##### *Motivation and Challenges*

By joining partnerships with external stakeholders the Department can have a direct and significant societal impact. We can also act as a bridge and enabler since we are in a position to contribute with highly specialized academic skills beyond what most organizations can maintain in-house.

Partnerships also offer a way to ensure funding for research projects and as such adds robustness to the finances of the Department, which indirectly support our effective academic freedom. Finally, partnerships open up more diverse careers for students and researchers alike, e.g. under dual-position models. A challenge is that partnerships, in particular with private industry, can jeopardize our independence - both actually and perceived.

##### *Activities*

We will:

- Deepen existing and initiate new research partnerships with public and private sector institutions as well as national and international agencies and NGOs. This includes for instance the

methodology development and actual use of real world evidence within drug development, complex interventions and behaviour change programs to decrease effects of social inequality and aging, as well as to lead in the coming digital transformation of the healthcare services.

- Promote the use of industrial PhDs and postdocs.
- Include student projects, internships and theses within our partnerships, offer courses to students focusing on participatory research, and generally include our non-university partners in our teaching whenever relevant.

### **Goal 3.2. Intervention research and policy evaluation**

#### *Motivation and Challenges*

Building on the research of the Department, specific intervention projects often emerge. How best to design complex interventions within public health as well as evaluate the effect of other interventions – whether complex or simple – is increasingly becoming a scientific field of expertise for the Department. Real life interventions are inherently conducted in partnership with other actors across the health care system. More broadly the goal can be described as working towards *evidence based public health*, which will ultimately close the loop across “Research” => “Interventions” => “Real life implementation”.

#### *Activities*

We will:

- Bring together all the expertise in developing, implementing and evaluating interventions from the disciplines represented across the sections at the Department to create a knowledge base benefitting both the Department and our partnerships.
- Develop new approaches to leveraging natural experiments and novel data to inform and evaluate public health interventions in diverse contexts and for different population groups.
- Bridge quantitative assessments of effect with state-of-the-art qualitative methods with the goal of fully understanding the complexity of public health intervention.
- Strengthen the participatory approach as essential to intervention studies to ensure research ethics and acceptability.
- Study intervention mechanisms and the role of context to strengthen scalability of effective interventions beyond the specific project period/timeline.

### **Goal 3.3. A hub for co-creation**

#### *Motivation and Challenges*

Given the complexity and dynamic nature of current and emerging public health challenges as well as the SDGs, it is essential to provide research and education that are responsive to societal needs, and to develop research projects through close engagement with public and private stakeholders. This has to be built on a dynamic two-way process that involves our understanding of public interests and concerns as well as the public's understanding of our research. Identified as "a jewel in the Department's crown" by a 2017 international evaluation, Medical Museion provides the Department with a world-renowned section to help progress this goal (UMAC prize winner, 2019). It represents a significant public platform not just for the Public Health Department, but indeed the University at large.

Development of co-creative stakeholders engaged in research requires substantial investments in skills and networks as well as considerations of academic integrity and freedom. Medical Museion's premises provide an ideal location to engage both stakeholders and the general public. But its historically important premises are in need of substantial renovations.

#### *Activities*

We will:

- Promote research engaging stakeholders, including e.g. citizens, patients, foundations, patient associations, clinicians, industry partners and/or policy makers, in co-creative processes with direct engagement in projects.
- Be a facilitator of co-creation and science communication processes by making the unique expertise of the Medical Museion available to external partners.
- Develop plans for modernization of the buildings at Medical Museion along with plans for better use of Medical Museion broadly by SUND.

## **4. One unified and focused university. Organisation, employees, and physical framework**

In order for the Department of Public Health to continue its development as a world-leading research and educational institution, all employees must work to ensure an efficient organisation

that focuses on the core activities as well as to search for and be open to new agendas for research and education. Management at all levels must be clear and professional to improve well-being at work, and to ensure that the Department develops the human skills and talents of all employee groups. The Department must take full advantage of being part of a large University

#### **Goal 4.1. An inclusive work culture with an emphasis on diversity**

##### *Motivation and Challenges*

The Department of Public Health shares and works according to the common values rooted in both UCPH and the surrounding Danish culture, such as trust, equality, transparency, accountability, collaboration, and balance between work and family life. We must nurture our ambitious and dedicated staff and students, and be recognised for supporting an inclusive culture that welcomes and appreciates diversity in a broad sense. It is the management's responsibility to provide the right frameworks that will support co-involvement and wellbeing. Accordingly, the cross-pressures of an ambitious academic environment (research, funding, teaching, impacts etc.) with administrative tasks and limited time are recognised by management.

##### *Activities*

We will:

- Ensure an open and on-going dialogue regarding work-life balance and expectations, as well as provide assistance in how to achieve better balance. This also includes finding the right balance between work-from-home and in-office and ensuring the right physical infrastructure (buildings, office design etc.) to enable this post-Corona work life.
- Ensure well-being at work by acting on job strains, such as inappropriate task allocations, and by promoting a respectful work culture that includes clear procedures for when and how to act on incidents of harassment and discrimination.
- Ensure that all staff, and leaders in particular, engage in recruitment and career-development processes that are unbiased and support diversity in its broadest sense. (See for instance the University's overall quality and diversity policy.) Ensure that all leaders take formal courses on leadership as provided by the HR Department of the University.
- Ensure systematic and transparent involvement of staff and students through the collegial bodies, School of Public Health, joint Research Leaders fora, and academic forums.

- Ensure that growing administrative workloads, including tasks from an increasing number of external and temporary projects, is compensated (mainly through external funding).

#### **Goal 4.2. Share the Department's speciality skills with the rest of UCPH**

##### *Motivation and Challenges*

The Department hosts a number of highly specialized groups according to methodology, which could support the entire University. We want to develop working modalities, including finance and buildings, where these groups can be fully utilized. This will benefit the rest of the University, but of course also further inspire the research at the Department.

##### *Activities*

In the following areas the Department hosts core-like facilities for the whole University:

- Biostatistics, causal inference and data science.
- Section of Global Health, which can facilitate data access and research collaboration to key-countries primarily in the global south as well as with international agencies and NGOs.
- Methods for qualitative research as well as questionnaire construction and digitally based patient reported outcomes.
- Frontrunners on conducting GDPR compliant research on highly sensitive data.
- Development and evaluation of intervention studies.
- a university museum (Medical Museion), which has expertise in establishing collaboration across the university and sharing competences related to collecting/exhibition/public research

#### **Goal 4.3. World-class administration and support**

##### *Motivation and Challenges*

The ambitious goals of the Department critically hinge on a well-functioning administrative system within the Department. Our TAP staff are performing these tasks brilliantly, but are challenged by a mismatch between funding and expectations, changing computer systems, etc. Likewise the uncertainty from the ongoing Campusplan project can negatively affect long-term planning.

##### *Activities*

We will:

- Ensure career development potentials for TAP staff, and work towards including TAP assistance in external grant applications such that tasks and resources can be better matched.

- Facilitate an inclusive and transparent process around the Campusplans.
- Further improve our budgeting and accounting work, such that we ensure delivery on financial promises to the Faculty, including for instance, as agreed, drawing on savings for generation transition.

## **5. Process and employee involvement**

During the Goal Plan revision in 2021, it was discussed and approved in LSU/LAMU as well as amongst Research Leaders, Assistant professors-, and postdoc networks, that the 2022 revision should be a more substantial revision. The current version reflects that. The process was started indirectly through the Sections Development Talks (SUS), which were held in the fall of 2021. The SUS meetings are annual meetings between senior researchers of a section and Department management. Suggestions and ideas were condensed into a proposal primarily written by management. This draft was then sent to the following bodies:

- LSU/LAMU
- Research leaders and Study Program leaders
- Assistant professor network
- Postdoc network

The networks provided feedback both written and during online/face-to-face meetings. Comments and suggestions were then condensed to create a final version.

The process was a bit time pressed since the Department was affected by appointment of new Head of Department and regionalization in the fall and winter of 2021. And Corona made Department-wide conferences essentially impossible until mid-February. This was due partly to the actual restrictions, and partly due to mental bandwidth considerations in a challenging period.

Accordingly, it has been agreed that the Goal plan will be further discussed at the Department Conference in June 2022.