



Goal plan for 2026-2029

Department of Public Health, Faculty of Health and Medical Sciences

April 2025

1. Education and teaching

Within education the Department's goals can be boiled down to "deepening the links between work/clinical life and research on the one side and our teaching on the other side". This overarching agenda is manifested through the following three specific goals:

A) **Clinical links:** We want to strengthen teaching within our three clinical specialities (general practice, social medicine and occupational medicine) through better links with the relevant clinical environments.

Main milestone: the creation of shared positions or similar deep commitments between the Department and relevant clinical environments.

Secondary milestones:

- a. to turn the links mentioned in the first milestone into new opportunities for life-long learning where the Department delivers highly specialized courses/teaching to the partner clinical fields.
- b. To explore if the teaching of clinical social medicine and occupational medicine should be more similar to the teaching of other medical specialities.

B) **AI and LLM in teaching and beyond:** We want to lead the way in critical engagement with technologies and their impact on knowledge acquisition and assessment within Public Health with an emphasis on the use of Artificial Intelligence. This entails not only algorithmic and AI literacy among educators but also students to leverage tools such as Large Language Models (e.g ChatGTP) as a pedagogical tool without sacrificing rigour and scrutiny in education.

First milestone: that we – together with study boards – will develop new guidelines for using AI-powered tools in teaching and evaluation of learning (including exams and written projects) prioritising the assessment of human reasoning. Furthermore, this aim will be expanded to not only the university but also society where AI is shaping the information we consume. We believe that in such a society our researchers, educators and students have an important role in contributing to the evidence-based dissemination of health information, and reciprocal dialogue about public health issues across our society. We also have a role to play in raising awareness about how to critically assess the origin and evidence-base of online information.

Secondary milestone: create or identify ways for current staff to increase their skills on teaching with – and in an environment of – AI and LLM

methods; this could be through course programs or other modalities.

Third milestone: We will explore teaching modalities, which move in the opposite direction of digitalization. We believe that such a catalogue/knowledgebase will increasingly be requested from educators across SUND as we become more aware of strengths and weaknesses of digital teaching. Specifically, we want to utilize Medical Museion and its collections in teaching through the development of a “parallel collection” and object-based methods for using it at Medical Museion.

- C) Teaching as part of career development and strengthening teaching coordination:** We aim to enhance the integration of teaching into the career development of scientific staff. This includes a more strategic allocation of teaching tasks, such as assigning course leadership roles to develop pedagogical/didactic leadership and organizational skills. Additionally, teaching collaborations across sections should be leveraged to strengthen interdisciplinary scientific collaborations. We also seek to improve department-wide coordination of teaching to foster stronger connections between educators working within the same study programs or covering related topics across different programs. Milestones are:
- i): Conduct a comprehensive mapping of current teaching allocation practices across the department and engage stakeholders at all career levels to develop a new guideline for fair and strategic teaching allocation.
 - ii): Establish structured networks to connect teachers affiliated with the same study programs or those teaching similar subjects in different programs.
 - iii): Conduct a thorough review of the department’s course portfolio to identify overlapping courses and assess whether consolidation would enhance efficiency and educational quality.

2./3. Research, innovation, collaboration and impact

- D) Health Data Science:** We want to accelerate the development of health data science as a scientific field. Health data science aims to construct and use advanced analytical tools to gain valuable insights by turning large volumes of data into knowledge about public health, medicine and the underlying biology. The data foundation for this transformation is typically heterogeneous spanning both the molecular and clinical levels. By situating a powerhouse on health data science within Department of Public Health, numerous benefits emerge. Firstly, such a placement

fosters collaboration between epidemiologists, clinical stakeholders, social scientists, global health researchers, biostatisticians, outreach experts, healthcare professionals, basic researchers and data scientists, facilitating the translation of raw data into insights. Secondly, it ensures that analytical methodologies are tailored to the complexities of health data, prioritizing accuracy and ethical and societal considerations. Additionally, being embedded within a medical and public health context encourages a focus on critical and ethical reflectivity concurrently with solving real-world healthcare challenges, driving innovation, and generating prevention initiatives that ultimately improve health in the population.

Currently health data science groups are scattered across SUND. We want to bring some of these together to create an internationally leading entity with sufficient critical mass to support methodological development, supporting research at the rest of the SUND, contribute to disruptive innovation projects and startups within the sector, and teaching across our study programs.

Main milestone is to develop the newly formed Section for Health Data Science and AI at the Department into a synergistic unit with productive interfaces internally within the section and externally towards the rest of the Department.

The second milestone is to attract additional, high profile young group leaders who will bring their own funding.

The third milestone is the translation of health data research to clinical practice by dissemination of tools across primary and secondary care.

E) **Interdisciplinarity, collaboration and outreach:** The 2023 research evaluation identified several key-strengths of the Department. Arguably, the one the international panel highlighted the most was our deep commitment to interdisciplinarity. We want to build on this strength through the following specific initiatives (i.e milestones):

i) the creation and strengthening of one or more cross-cutting groups, networks, centers and initiatives with a mandate to bring together researchers from different parts of the Department as well as SUND broadly.

ii) the acceleration and support of KU-wide initiatives on health promotion and disease prevention.

iii) strengthening intra- and inter-departmental collaboration on mental health and behavioural medicine-related teaching and research.

iv) Develop innovative methods to increase awareness of shared research interests, and share practical expertise with how to implement interdisciplinary and cross-sectoral collaboration. Additionally, investigate how we can better recognize and support the extra time required to

cultivate truly multi-, inter-, and trans-disciplinary research.

v) be a key-partner on the cocreation, development, implementation and evaluation of complex public health interventions whether they have been developed at the Department or have been developed by partners. This will also entail initiating committing partnerships (ie. reaching beyond a single project) with local municipalities in the city of Copenhagen and the international bodies which have a strong presence in Copenhagen such as WHO.

vi) Engage in public debates on health matters, particularly focusing on the new Struktur Kommission and Public Health Law. This will help translate evidence into policy and promote the integration of research data collection for evaluation purposes. Specific activities include: Media commentaries and public events, including the development of new event formats at Medical Museion.

In addition, see goals D and E.

F) Sustainability and planetary health: The health sector is a major contributor to the Danish (and indeed global) resource use in general and CO2 emissions in particular. Some of this is structural and hard to change, but some is changeable. Likewise, our internal workings and travels create considerable strain on our planet. The Department is committed to address sustainability both through our teaching and through how we work ourselves. Specific milestones for this work are:

i) the integration of sustainability in most of our teaching. This work spans from single elements in existing courses to large-scale teaching initiatives such as a full education-initiative on planetary health.

ii) to create an interdisciplinary group across the Department that will work with sustainability in research and in research funding.

iii) to complete a department-wide process on changing our travel habits.

4. Collaboration, partnerships, public sector consultancy, etc.

These themes are covered in the previous sections.

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5. HR and organisation

G) **Transparent career paths and work allocation.** We want to ensure an inclusive work culture with an emphasis on diversity and transparency in sustainable career paths for all staff, academic and administrative positions. To this end, the Department will continue in its alignment with the common values rooted in both UCPH and the surrounding Danish culture, such as trust, equality, transparency, accountability, collaboration, and work-life balance. We will also ensure that we are drawing on the increasing international investigations of research culture. In doing so, we will provide a nurturing environment for our dedicated staff and students. Further, we will work together for a better academic culture that value and promote excellence and kindness in the pursuit of impact, simultaneously with a supporting and inclusive culture that welcomes and appreciates diversity in multiple levels by sustaining frameworks that will support co-involvement, psychological safety, 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.

Specific milestones include:

- i) Foster an open and on-going dialogue about expectations, and incremental developmental milestones in accordance with the criteria for recognising merit at UCPH. This is to promote a healthy work-life balance in an ambitious academic environment, and culture making it explicit that not every single employer is expected to perform simultaneously on all outlined pillars. This also to promote collaborative impact within and across section in the Department.
- ii) Increase the awareness and use of promotion and advancement programs., by advertising and making transparent and fair the code of conduct of use, requirements of merits, and procedures for promotions, including tenure track assistant professorships, the associate professor promotion program, and establishment of and support to research centres/interdisciplinary hubs/cross-departmental networks. Involve relevant stakeholders, including representation from the assistant professor network, in the development of a department policy on use of tenure track and non-tenure track assistant professorships, staff scientists, and time-limited associate professorships.
- iii) Demonstrate zero tolerance for incidents of harassment and discrimination. Simultaneously, underscore that disagreement and constructive conflicts, when handled in a respectful and trustful manner, are fundamental for excellence research that produce substantial societal impact.
- iv) Be mindful and act on inappropriate task allocation or unfair allocation of un-rewarding tasks.

v) Increase the staff's understanding of financial management at the department, funding, allocation of course leadership and teaching responsibilities, and possibilities of long-term strategic impact. The management will disseminate this information in all relevant fora aimed at staff at above PhD level at meetings with possibilities of clarifying questions.

vi) Staff, at all levels and functions, are expected to take part in unbiased recruitment, and career-development. Ensure open and ongoing dialogue on recruitment and potential bias processes. Transparent involvement of staff and students through the collegial bodies including in particular our Faculty Board.

6. Resources and infrastructure

H) The large amount and intensive use of data at the department requires a sustainable and future oriented infrastructure plan for governance, storage and scalable computing. The infrastructure must be able to handle heterogeneous data, including qualitative-, visual-, survey-, register-, lab-test-, environmental-, contextual-, deep EHR data and omics data. Importantly the Department depend upon interoperability of data from the administrative registers on health and social factors, raw EHR data as well as clinical quality databases with state-of-the art research data on certified infrastructures with sufficient computing capacity. The data landscape in Denmark and other EU countries will undergo substantial changes in the years to come, and it is expected that these changes would benefit from the cross disciplinary knowledge and experience in the Department, as well as dramatically impact our data workflows. For this goal the milestones are:

i) Create a powerful internal compute and data management model that interfaces well to emerging national infrastructures (e.g. the hub and spokes model) as well as international infrastructures (e.g. the European Health Data Space).

ii) Establishing sustainable workflows and resources to maintain the data infrastructure within the department.

iii) Establish and foster workflows that facilitate sharing of knowledge regarding strengths and weaknesses of the various high-performance computing facilities.

iv) Remodelling: The development of health data science as well as our inter-disciplinary oriented groups will require some remodelling and repurposing of our buildings. The precise details are not yet known, but it will be required in 2025. Further, the use of Medical Museion as an inter-disciplinary hub – and indeed a scientific meeting place for the entire university and its external key-partners – will require a long-term

plan for remodelling and making fully useful and accessible the buildings. Our internal IFSV-milestone is to provide a full and comprehensive documentation of our needs for building changes and storage facilities.