





Department of **Global Public Health**





The Department of Global Public Health is a multidisciplinary department with the aim to advance knowledge about challenges and opportunities for public health in a local, national and global setting. This includes studying how societal phenomena affect health in a globalised world and translating research evidence into public health action.

In line with Karolinska Institutet's vision, we strive towards better health for all and give special attention to the needs of the most vulnerable populations.

"We emphasize the importance of global awareness"

We aim to be in the forefront of global public health research and education in Sweden, as well as an important international collaborative partner.

Both our research and education are focused on how different societal and individual factors affect population health, socioeconomic consequences of poor health and the need for a systems-based approach to equitable and sustainable population health.

As a university, we have a critical role in the achievement of the United Nations' Sustainable Development Goals, and as a department we emphasize the importance of global awareness and responsibility within both our research and our education.

Our education programmes prepare health experts to confront the global burden of disease. Many of our researchers are engaged in the wider community and often participate as scientific advisors in regional, national and international expert groups.

Our aim is to create a good psychosocial working environment that facilitates scientific discussions and critical reflection.



Marie Hasselberg Head of the Department

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Our research

The department has 9 research groups, about 80 doctoral students, 140 employees and just as many affiliated researchers. A large part of our research is transnational and global with a focus on resource-constrained settings in both Sweden and low- and middle-income countries. The department includes numerous interrelated disciplines, each of which contributes to the understanding and improvement of population health.

Our researchers have expertise in Global Health, Social Medicine and Public Health Epidemiology. A broad range of research methods are utilised, both quantitative and qualitative, and often in combination.

Our research aims to promote equitable and sustainable population health by producing new knowledge to aid the planning, implementation and evaluation of health systems and public health practice. We contribute to evidence-based guidance and recommendations by generating new knowledge of the impact of societal structures, health systems, organizations, and individual health behaviours on health, and highlighting priority areas for public health interventions.

We emphasize both individual approaches and population-level policies to health promotion and prevention. Epidemiology is used to study health outcomes and their determinants by time, place and socioeconomic group and to investigate determinants of high-priority health outcomes, and to evaluate the efficacy and effectiveness of health-promoting and preventive interventions.

We have a special focus on those at greatest risk of poor health and social and economic consequences of disease and strive towards equitable access to health and health care services for all.





Collaboration

We collaborate in research and education with partners all over the world, including universities, public health agencies, civil society and patient organisations.

Engaged in policy work and as experts

Our researchers continuously engage in the formulation of policy documents about public and global health challenges, for example policy briefings and guidelines produced by national agencies and WHO. We also write textbooks and popular science publications in weekly and monthly magazines.

Many researchers at our department contribute their expertise to multilateral organisations such as the UNICEF and WHO, and act as temporary advisors, members of expert committees or external experts in national research councils and organisations. We intervene in acute disaster and epidemic situations, either by preparing people before they occur or by providing support ourselves on site.

Close collaboration with public health services in Region Stockholm

We collaborate closely with the local public health services in Region Stockholm, with some staff having joint appointments at the department and Region Stockholm. Region Stockholm helps to provide an important infrastructure with local data.

We communicate our research to the public

We value close contact with the public at large and offer public lectures. Our first Massive Open Online Course (MOOC) in global health had 16,000 participants across the world. We also arrange Stockholm Public Health Lectures in collaboration with the Center for Epidemiology and Community Medicine, Region Stockholm. The lecture series focuses on key topics in the area of public health, as well as issues that concern the planning and commissioning of health care.

We give presentations at international, national and regional stakeholder conferences, cooperate with many patient organisations, and engage with the media to discuss and debate current issues.

Education

The department strives for a learning environment that prepares students at undergraduate, advanced and doctoral level to address many of the global public health challenges that the Sustainable Development Goals are adressing.



The student body in global public health is multidisciplinary and international, and we encourage students to build competences that will prepare them for working together with many sectors and disciplines. All our lecturers are active within research and our students conduct their thesis work within a research group at our or another department at KI.

Undergraduate and advanced level education

The department gives several courses in public health sciences, social medicine and global health. The focus is on health-system challenges such as human rights and health, HIV, sustainable development and medicine in disaster situations.

Master's programmes:

- Master's programme in Public Health Sciences, 120 credits (2 years)
 The programme offers two specialisations; Public Health Epidemiology and Health Promotion and Prevention.
- Master's programme in Global Health, 60 credits (1 year)
- Erasmus Mundus Master Course in Public Health in Disasters, 60 credits (1 year)

Doctoral education

The doctoral education has a multidisciplinary scientific orientation addressing critical health challenges of society today and attracts both national and international students. Around 80 doctoral students are engaged in research projects within global public health, social medicine and epidemiology, both in Sweden and in other countries.

The department coordinates:

- The Doctoral Programme in Public Health Sciences
- The Doctoral Programme in Infection Biology and Global Health

Find more information about our programmes and courses at education.ki.se

Meet our students



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It is such a privilege to be a doctoral student at the Department of Global Public Health at KI, as it is a setting where 'to change' and 'making the world a better place' is on the agenda. Since I started my journey as a doctoral student here, I have been so inspired and intrigued by my supervisors, colleagues and other staff working at the department."

Mahnoush Etminan Malek

Doctoral student, Community Nutrition and Physical Activity



Studying Public Health at KI was my first choice. Global public health is a very dynamic, evolving and new field. It was important to me that I get to study public health in a classroom that was devoted to a global perspective, in an institution on the cutting edge of health research and in a country that is at the forefront of public health. KI represents all of these things and I feel very fortunate to be here."



Lauren Wiebe

Master student, Master's programme in Public Health Sciences





The Department of Global Public Health offers a kind, stimulating and nurturing research environment with low hierarchies, mutual respect and support. The unique learning opportunities the department has offered me, such as doing my doctoral research in collaboration with partners in Nepal and Vietnam, have been truly empowering."

Olivia Biermann

Doctoral student, Centre for Global Health



Since I stepped into KI and the Department of Global Public Health as a student, I've had a very rich experience from my interactions with fellow students, lecturers and other researchers that are affiliated with the department. The programme is intensive but it's been my best life experience so far."

Phuthumani Mlotshwa

Master student, Master's programme in Global Health



Community Nutrition and Physical Activity (CoNPA)

Dietary habits and physical activity are among the most important determinants of health and well-being. An unhealthy diet and a sedentary lifestyle greatly increase the risk for chronic diseases like cardiovascular diseases, obesity, type 2 diabetes, cancer, Alzheimer's disease and premature death. Improving dietary habits and physical activity in the population can contribute to achievement of the Sustainable Development Goals.

Research areas

Our research covers population surveys and multilevel and mixed-methods health promotion research regarding dietary habits and physical activity with a universal or targeted approach.

Our projects are carried out in settings such as child health care, preschools, schools and in settings for adults with disabilities.

The group conducts research in the following areas:

- Epidemiological studies of dietary habits and physical activity and their determinants, in relation to health outcomes
- Multidisciplinary research on the development, implementation and evaluation of interventions to promote healthy and sustainable eating habits, physical activity and prevent obesity and chronic diseases

 Commissioned assignments from external partners within the groups research competence

Education and teaching

The group members participate in third-level education at undergraduate, graduate and doctoral level. The education is in the areas of public health nutrition and physical activity, theory and practice of intervention and implementation research.

Collaboration and knowledge exchange with society

The group collaborates with the Public Health Agency of Sweden, the National Food Agency, the National Board of Health and Welfare, the Swedish Royal Institute of Technology, the Swedish Association for Local Authorities and Regions, Region Stockholm, non-governmental organisations, municipalities and other research groups in Sweden and abroad.



School meals are of importance for children's diet and health. The project Optimat is about optimising and improving school meals.

Many of our researchers have a dual affiliation with the Center of Epidemiology and Community Medicine, Region Stockholm, which facilitates the translation of research to practice.

Examples of research projects

- A Healthy School Start Plus For children and parents in disadvantaged areas, health promotion and prevention of obesity
- Optimat Sweden An optimization method to reduce greenhouse gas emissions from public meals with maintained nutritional adequacy and without increasing cost
- School Food Sweden (SkolmatSverige)
 A web-based school meal quality improvement tool
- Riksmaten Ungdom A national survey of dietary habits and physical activity in youth, collaboration with the National Food Agency

Mission

To contribute to equality in health through high quality studies regarding dietary habits and physical activity.



Epidemiology and Public Health Intervention Research (EPHIR)

The research group Epidemiology and Public Health Intervention Research aims at conducting high quality research within the area of public health epidemiology, especially applied to the evaluation of public health interventions. Our research encompasses descriptive, analytical as well as experimental studies in both community and institutional settings, with focus on social, behavioural and lifestyle factors of importance for human health during the whole life span.

The research studies in our group rest on a variety of data sources, involving ad-hoc surveys, population-based registers, as well as biologic samples, particularly molecular genetics.

Collaborations

The EPHIR group holds collaborations within Karolinska Institutet, as well as with external partners, national and international., e.g. Norwegian University of Science and Technology, University Eduardo Mondale, Mocambique, University of South Africa and Novara University, Italy.

An important collaboration partner is the Centre for Epidemiology and Community Health at Region Stockholm, where several of the group's researchers have part-time commitments.

The Epidemiology and Public Health Intervention Research group is among the promoters of the European Society of Prevention Research (EUSPR).

Education

We are actively involved in education at all levels at the Department of Global Public Health and the programme director, and several course leaders, for the Master's programme in Public Health Sciences, are included in the EPHIR group.

Financing

The EPHIR research group receives funding from:

- Vårdal
- Forte
- Hjärt-Lungfonden
- Länsförsäkringar
- FORMAS
- Folkhälsoinstitutet
- Vetenskapsrådet

Examples of research projects

 KUPOL – study on mental health in adolescence





- PART population based longitudinal study on risk and protective factors for mental health
- Fitforlife an intervention study of the effects of physical exercise in persons affected by psychosis
- TOPAS Randomised controlled trial of smoking prevention in schools
- An intervention study to decrease inappropriate medication in community dwelling older adults in Saudi Arabia.



Epidemiology of Psychiatric Conditions, Substance use and Social Environment (EPiCSS)

The aim of our research is early intervention and prevention of mental ill-health and psychiatric disorders (including substance use), by understanding risk and protective factors in the context of the social environment; examining specific groups at risk; and developing and evaluating interventions. The EPiCSS research group have a strong engagement in the equity of the setup and the utilisation of psychiatric care.

Research areas

Risk Factors and Mental Disorders

The aetiology of psychiatric disorders remains elusive; however, accumulating evidence suggests causal pathways comprising interaction between genetic vulnerability and key early life environmental exposures.

The research aims to advance current knowledge about early key life risk factors for psychiatric disorders by combining an epidemiological population-based approach with analyses of biological samples.

Alcohol and Drug Epidemiology

The research in our group addresses multiple themes related to the short- and long-term health and social effects of substance use, identification of at-risk groups for harmful effects of alcohol, tobacco and drugs, the possibilities for preventive interventions at individual and community levels, and the development of more effective treatment.

Methodological Assurance and Innovation

Valid measures of health and disease are requirements for methodologically sound research. The EPiCSS research group works to develop and validate research instruments such as mental health surveys, to validate registered diagnoses against complete medical records.

Intervention

The research is broadly focused on interventions to reduce substance use, including alcohol, cannabis and other illicit drugs. Interventions studied include physical activity, internet-based treatment, and brief interventions in primary and specialist healthcare.

We also focus on interventions to increase psychiatric care utilisation among migrant children and to novel methods in first line mental health care for children.

Determinants of Health and Well-Being People who grow up and live in disadvantaged conditions have poorer



Group members of the EPiCSS research group meet to discuss ongoing projects.

health and shorter life expectancy. This is evident throughout the world.

The knowledge about the social inequalities of mental health is a relatively new field and the aim of our research is to identify social, biological, physical and behavioural determinants that contribute to inequalities.

Vulnerable Populations

There are high-risk groups of mental illness such as migrants, sexual and gender minorities, and offspring of individuals with mental illness and these groups are of particular interest to us, both in terms of understanding what risk factors that could explain the vulnerability but also physical health and social outcomes in these groups.



Equity and Health Policy (EHP)

The Equity and Health Policy research group does interdisciplinary studies of social differentials and trends over time in health, health-related quality of life, morbidity, mortality, health care utilisation, social and economic consequences of disease and the impact of policies and interventions on health in specific groups in different contexts, using innovative quantitative and qualitative methods. The aim is to facilitate equity-oriented health policy making.

Members of the research group currently work on national and international projects regarding:

- Inequalities in health and health-related quality of life
- Socioeconomic differences in social consequences of disease
- Policies to include persons with chronic illness in the labour market
- Equity in health care utilisation
- Health among disadvantaged groups and among populations in disadvantaged areas.

Collaborations

We collaborate with other universities in many of our national and international research projects. The research group also collaborates with the Health Outcomes and Economic Evaluation research group at the Department of Learning, Informatics, Management and Ethics at Karolinska Institutet.

Examples of current research projects

- The impact of market oriented reforms and management models: Can integrated care mitigate the adverse effects among older people with greater needs? (Forte)
- Social inequalities in aging, inequalities in health care utilisation among elderly persons in the Nordic countries (NordForsk)
- Tackling health inequalities in extending working lives (EU Joint Programme Initiative/Forte)
- Unravelling vaccine hesitancy in migrant communities (Public Health Agency of Sweden)
- Effects of extended postnatal home visiting to first-time parents in Rinkeby (Public Health Agency of Sweden).
- Living conditions and health among homeless persons in Stockholm (Region Stockholm)



Group members with the Equity and Health Policy research group.

Examples of doctoral theses

- Novel methods for dose-response meta-analysis, Alessio Crippa (2018).
 - Analysing equity in outpatient care in Stockholm County and the impact of using different data sources, Janne Agerholm (2016).
 - Social differentials in health-related non-employment and poverty: studies on consequences of limiting longstanding illness, musculoskeletal and mental disorders, Johanna Falk (2015).



Global and Sexual Health (GloSH)

The research group Global and Sexual Health (GloSH) is home to the origin of Hans Rosling's Gapminder Project and increasing awareness on global health development is a key priority of the group. The group consists of interdisciplinary researchers with extensive experience of study design and project implementation in weak health systems and resource-poor contexts, hard to reach and key populations, and in demographic health surveillance sites.

Gender aspects and relevance to the Sustainable Development Goals are crosscutting themes throughout all of our research.

Our research focuses on:

- Sexual and Reproduction Health and Rights (SRHR) including:
 - > HIV-related risk behaviours, prevention of mother-to-child transmission, pre-exposure prophylaxis, and antiretroviral therapy, stigma and quality of life
 - > Access to, uptake of and retention in HIV/SRH care
 - > Adolescent SRHR awareness, risk behaviours, exposure to violence and access to comprehensive sexual education
 - > Contraception access and awareness including post-abortion care
- Gender-based violence (GBV) related norms, occurrence and prevention

- Norms and values related to gender, SRHR and women's economic empowerment
- Migrant health SRHR and HIV awareness, risk behaviours, GBV
- Health systems and policy implementation – real-life effectiveness, access, uptake and retention and uptake of health prevention and care
- Behavioural economics/Health economics/evaluations
- Emerging infections Ebola and Zika;
 Migrant health healthcare services
- Non-communicable diseases cardiovascular disease (CVD), mental health
- Methods development of data collection in hard-to reach key populations, sexual network modelling, respondent driven sampling, RCTs, eHealth, and health systems strengthening



Children at the Lakeside Junior Academy Kasensero, Uganda.

- Microbiom related to HIV and SRHR
- Mental health related to SRHR and HIV

Collaborations

The Global and Sexual Health research group has collaborative exchange projects with research and educational institutions throughout Europe, the United States, Canada, Colombia, Nicaragua, Burkina Faso, Ethiopia, Kenya, Malawi, Rwanda, Sierra Leone, Somalia, South Africa, South Sudan, Tanzania, Uganda, Zimbabwe, India, Nepal, Pakistan, Myanmar, Vietnam, and Laos.

Education and teaching

Spreading awareness on global health development is a key priority for our research group. This is done through frequent participation in traditional media, as well as through web tools such as Gapminder, online teaching, and social media.

The group has been responsible for the introduction of mandatory teaching about Global Health in all study programmes and among KI faculty, as part of the university's Internationalisation Strategy.

The group also runs the very popular undergraduate elective course in Global Health at KI, which was initiated by Hans Rosling in 1996. The course now hosts 160-200 students from ten different study programmes each year.

In addition, the Global and Sexual Health research group is responsible for two blocks of the Master's programme in Global Health and runs a freestanding course on HIV, as well as elective courses on Human Rights and International Organisations, and Qualitative Evidence Synthesis.

The group also launched KI's first Massive Open Online Course (MOOC) in Global Health, with 16,000 participants across the world.

Health Systems and Policy (HSP)

The group Health Systems and Policy generates and shares knowledge through multidisciplinary collaborative research, education and policy dialogue. We work from local to international levels to improve the coverage, quality, and equity of health systems. We address global health challenges through a health systems lens and share a common approach: the challenges cannot be addressed in isolation. Successful policy development and implementation require that all components of the health systems are linked. Our research strives to be multidisciplinary and drive evidence-informed policy making.

Research areas

Our group is divided into four teams: Improving Use of Medicines; focusing on antibiotics, Global Child Health & the Sustainable Development Goals, Implementation and Quality (IMPAQT) and the Centre for Research on Health Care in Disasters.

The appropriate use of medicines is a major part of all health systems and can be used as an indicator of service delivery. Our team has contributed globally to the measuring, understanding, and improving use of medicines, with a focus on antibiotics.

Through a One Health approach we address the threat of antibiotic resistance, by improving the use of antibiotics, infection prevention and control practices, and by striving to limit the environmental spread of antibiotic residues and resistant bacteria.

We also address chronic conditions such as diabetes, cardiovascular disease, cancer and mental disorders that constitute a rapidly growing challenge to health systems globally. We are involved in studies to improve self-management of chronic conditions.

The Global Child Health & the Sustainable Development Goals team generates knowledge to improve health and equity for children of all ages and to improve the quality of care for children throughout the world. The team focuses on child health through an SDG lens.

Key foci are on identifying and addressing bottlenecks within the health system to make the most essential prevention and care available to the most vulnerable.

The team IMPAQT generates knowledge on how to develop, implement, and evaluate strategies to improve the quality



The team leaders Johan von Schreeb, Claudia Hanson, Cecilia Stålsby Lundborg, Tobias Alfvén.

of care globally. We focus largely, but not exclusively, on low-resource settings. We recognize the complexity of sustainably improving health-care quality and health systems and that strong and long-term collaborations with universities, research institutions and policy-makers throughout the world are essential.

Our research is rooted in the contextual realities and the needs of people, health providers and local managers, guided by local, national and global priorities.

We work on methods for evaluating quality and evaluate 'implementation interventions' thus such interventions that support health workers, facilities or health systems to use available resources most effectively for good quality care.

The fourth team is the Centre for Research on Health Care in Disasters, a WHO collaborating centre that aims to improve healthcare responses following disasters globally. In the team we develop

methods for needs assessments following disasters, assess its health systems effects and burden of disease. We evaluate optimal surgical management of conflict injured and define WHO standards of care.

We also develop prediction models for trauma mortality and assess management of injuries in conflicts. Policy development and implementation is core to all our research activities.

Collaborations, training and capacity building

The HSP group collaborates extensively with researchers in countries at all income levels for example in Africa; Uganda, Tanzania, Malawi and South Africa, and in Asia; India, Iraq, China, Cambodia, Laos and Vietnam.

Our training includes research capacity building and we organise courses for undergraduate and master's level students, as well as doctoral level courses, executive and professional education.

Injuries' Social Aetiology and Consequences (ISAC)

The ISAC group conducts studies on the burden, epidemiology and prevention of injuries. Injuries rank high as a cause of mortality and morbidity worldwide, with an estimated 5.8 million people dying each year and another 973 million sustaining injuries that require healthcare assistance. The risk of being injured is closely related to people's living, commuting and working conditions, and poverty is both a cause and a consequence of injuries. While there is no vaccine to prevent people from being injured, there is a host of evidence-based strategies that can contribute to and prevent either the occurrence or the consequences of injuries.

For the ISAC group social inequalities are a concern and an overarching aim is to increase our understanding of the mechanisms behind them. We have published extensively on this topic and we have presented keynote speeches in several international conferences.

We also have authored reviews for Swedish governmental agencies and WHO.

Research areas

We research major causes of injuries globally, for instance road traffic injuries, falls, burns, and poisoning.

In Sweden, we conduct large epidemiological register-based studies, in the search for either injury mechanisms or short- and long-term consequences of trauma on which it is possible to act.

In low- and middle-income countries we have contributed to the scientific-based development and implementation of mHealth applications for injury diagnostic assistance in emergency care services, for burns. We also investigate individual and environmental determinants of road traffic injuries and how to act upon them.

Examples of research projects

Artificial intelligence for burn diagnostics
Burn injuries are a substantial cause
of morbidity in some regions of the
world. We have developed a partnership
with specialists in medical technology,
emergency care and burn surgery to create
an algorithm for remote consultation for
clinicians in need of diagnostic assistance.

Medication and injury among older people Medication can help coping with poor health conditions, but it can also represent a risk factor for injurious events. We investigate the association between medication and injury among older community dwellings. So far, we have studied falls and road-traffic injuries, but recently, we looked more closely into intentional and unintentional poisonings.



Semi-rural informal settlements in Western Cape province, South Africa.

Quality of life following injuries
In many high-income countries, the improvement of trauma care has led to a higher survival rates following injury, with an increased need for both physical and psychological rehabilitation. We study the short- and long-term health consequences of injuries.

The overarching aim is to deepen the knowledge about the psychosocial consequences of injury, more specifically in terms of quality of life.

Community mobilisation package to prevent childhood injuries
While childhood deaths due to infectious diseases are declining in many low- and middle-income countries, deaths due to injuries are on the increase.

It is imperative to research how evidence-based interventions conceived in high-income countries can be implemented and sustained in resource scarce settings. In a broad partnership, we aim to develop and test the feasibility, acceptability and accessibility of an integrated package of community mobilisation interventions to prevent childhood injuries.

Building research capacity

The group coordinates bi- and multilateral research-training programmes at master and doctoral levels in Tanzania and Mozambique.

The Swedish International Development Agency (Sida) sponsors these programmes, where we train doctoral and masters students in sandwich programmes to build sustainable research capacity in the countries. Injury control and prevention is a central topic and the research projects are conceived in complementarity to one another.

Prevention, Intervention and Mechanisms in Public Health (PRIME Health)

The research group Prevention, Intervention and Mechanisms in Public Health is a multidisciplinary research team with competencies in social medicine, epidemiology, psychiatry, biostatistics, nutrition, psychology and physical activity. The group has a broad interest in the areas of prevention, intervention and mechanisms in public health and our research reflect this

Our research falls into the four areas mental health, parental health and support, tobacco and alcohol, obesity and physical activity.

Mental health

We carry out research on a range of topics related to causal and protective factors of poor mental health and associated long-term health, these include:

- Protective and risk factors of poor mental health in young people.
- Labour market position among young people, intervention and mental health related mortality.
- Body dysmorphic disorders, risk behaviours and long-term health outcomes.
- Autism spectrum disorders, causal factors, social and mental health in adulthood.
- Dementia, the role of education as a causal factor.

Parental health and support

Research in the area parental health and support include:

- Evaluation of parenting support programmes.
- Identification and prevention of domestic violence.
- Post-natal depression among new mothers and fathers.

Tobacco and alcohol

Our research on tobacco and alcohol use includes:

- Smokeless tobacco use and related health outcomes.
- Long-term effects of alcohol exposure to increased availability of alcohol in foetal life and adolescence on health and social adjustment.

Obesity and physical activity

The group is involved in a variety of research on obesity, such as:



- Preschool and school outdoor environments and children's health.
- Childhood obesity causes, prevention and health outcomes.
- Gastric bypass surgery, health consequences and quality of life.
- Diabetes, determinants and related illness.

Examples of research projects

Migration, vitamin D-deficiency and risk of autism spectrum disorders This project will help clarify the link between migration and risk of autism.

Causal effects of education on life-course cognitive ability and dementia

The causal effect of education on dementia, and possible mediation via intelligence, will be assessed in this project.

The Swedish Collaboration on Health Effects of Snus Use
This national consortium has been established to reliably generate new knowledge about the health effects of snus.

A novel technique with artificial intelligence to assess physical activity, sitting and screen-time behavior
This project aims to develop artificial intelligence technique machine learning algorithms for accelerometer data to assess physical activity.



Social Medicine, Infectious Diseases and Migration (SIM)

Health is improving in Sweden and globally but widening income gaps, further marginalization of some groups and increased forced migration are contributing to growing health and social inequities. Closing the health equity gap requires actions both within and outside the health sector. Broad social protection, including Universal Health Coverage, needs to be coupled with tailored delivery models for the most vulnerable, as well as technological innovations that enable better outreach and access.

Research areas

The SIM research group uses social epidemiology, qualitative methods, as well as health economy and implementation research methods to:

- identify social determinants and consequences of poverty-related infectious diseases, including malaria, tuberculosis (TB), and human immunodeficiency virus (HIV)
- evaluate interventions to improve health care access and equity
- assess impact of social protection interventions on poverty-related diseases
- develop and evaluate innovative mobile and digital technologies that improve equitable access
- assess the effectiveness and cost-effectiveness of TB screening programmes in high- and low-TB burden countries

 determine health needs of migrants and evaluate health examinations of asylum seekers and refugees.

Examples of research projects

E-Detect: Early detection and integrated management of tuberculosis in Europe E-Detect aims to contribute to TB elimination in the European Union by implementing and evaluating interventions to ensure early diagnosis and improve integrated care. The group leads work to develop a multi-country migrant TB screening database.

Social protection for TB patients in Mozambique, Nepal, Vietnam and Uganda The project tests and compares different types of interventions to improve the social and financial protection for people with TB.

TB-Sequel

TB-Sequel is a multi-country cohort study designed to determine the long-term medical, social and economic consequences



Active TB case-finding in Nepal as part of the research project IMPACT-TB.

of TB in Gambia, Mozambique, South Africa and Tanzania.

Epidemiology, risk factors and transmission mechanisms of the emergence of multidrug and extensively drug resistant tuberculosis. This project is about determining the extent, nature and risk factors of M/XDR-TB on population level in China, through epidemiological studies in combination with whole-genome and bacteriological analyses.

MoMic: Point-of-care diagnostics of infectious diseases and using mobile digital microscopy and artificial intelligence

MoMic has developed a mobile technologybased microscope which is used in point of care diagnosis of parasitic, bacterial and helminthic diseases, as well as cancer.

IMPACT-TB: Implementation and evaluation of TB screening and social support interventions in Nepal and Vietnam IMPACT-TB is about determining the effectiveness and cost-effectiveness of different implementation models for

active TB case-finding and examine barriers and enablers for scale-up. We lead the work package on knowledge translation and dissemination of the research findings.

Interdisciplinary Strategies for TB Elimination in Sweden (ISTE)

ISTE is about assessing current strategies for TB screening among migrants in Sweden, including epidemiological analyses of screening coverage and outcomes, identification of barriers and enablers for optimal implementation and an economic evaluation.

Research networks

The group hosts two research networks:

- The Centre for Tuberculosis Research a collaboration between six departments at Karolinska Institutet
- Social Protection Action Research and Knowledge Sharing network (SPARKS)
 – a global network facilitating research on the public health impact of social protection.



Our administration

The administration unit provides administrative support to the department and our 9 research groups. The unit's mission is to work in close cooperation with researchers, teachers and students and provide top class support. Efficiency, teamwork and constant change are core values for the administration.

Educational administration

The educational administration supports teachers and students at doctoral education and undergraduate and advanced level education. We also have a study counsellor at the department, supporting students with study related issues.

Human Resources

Our HR team handles for examples employments, affiliations, compensation and benefits, work environment questions.

Finance

The finance team is responsible for legal accounting, supplier invoices and expense reports, but the team also supports researchers in financial budgeting, monitoring and the reporting of research projects.

Secretariat and communication

At the secretariat there is administrative support to the Head of Department. Communication, internal and external, as well as managing our website is another important task. Archive and document coordination are handled by our archivist.

Infrastructure

The infrastructure team deals with matters regarding internal mail, deliveries, telephony and some IT-related issues.

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