

# Annual Report



Karolinska  
Institutet

# 2024

# Centre for Health Crises



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# A word from our Director



In 2024, the Centre for Health Crises continued to develop and expand our operations. In a year that saw several ongoing health crises, we delivered fit-for-purpose education and trainings, created forums for discussing policy development based on experience and research, and provided expertise to the field.

During the year, we have, in reports and investigations from the government and other agencies, noticed an increased focus on crisis preparedness within the health sector, especially the need for training and education. The Centre for Health Crises welcomes this focus and have stepped up our efforts to develop new courses based on real clinical experience and consolidated our educational activities within the concept of a “Health Crises Academy”.

We have assumed a role to act as an interface between universities, the health care sector, government agencies, and decision-makers. In our work we drive science-to-policy development and provide forums where synergies can be explored. In November 2024 we organised the first Health Crises Forum that brought together key stakeholders to outline and discuss the role of universities in health crises preparedness and response, and as part of the Total Defence.

The Health Crises Network has grown and now has 40 members from 17 universities. The network gathers a wide range of multidisciplinary expertise, several of them were involved in the Health Crises Forum.

These are some illustrations of our ongoing work. The rest of this report will delve into specific details. All in all, 2024 has shown that the Centre for Health Crises remains more relevant than ever and that there is a significant role for universities to play in health crises preparedness and response, but that their role needs to be better defined and clarified. This will require more work and investments from both public authorities and universities to remain relevant for society in upcoming health crises. Through our work and commitment, we continue to strive towards our vision of a society better prepared for future health crises.

Handwritten signature of Johan von Schreeb in black ink.

Johan von Schreeb

## Vision

A society better prepared for future health crises

## Mission

Building the next generation of health crises experts through research, education and interdisciplinary collaboration

# About the Centre

2024 was the Centre for Health Crises' third year in operation. Karolinska Institutet's (KI) intention behind establishing the Centre in the wake of the COVID-19 pandemic, was to create a platform through which the universities' capabilities in research, education, and interdisciplinary collaboration could contribute to improvements in the regional, national and global preparedness for health crises and pandemics.

The Russian invasion of Ukraine, which occurred just weeks after the Centre became operational, thrust our organisation into reacting to a health crisis as it occurred. Since then, we have remained alert and ready to lend our expertise and support through secondments, developing educational activities, providing expertise, and facilitating science-to-policy interaction to both ongoing health crises and to improve the preparedness for future ones.

The Centre has an all-hazards approach to health crises and argue that they need to be addressed using a multidisciplinary and multisectoral approach. We argue that universities, as providers of skills, resources and knowledge, can have a larger role in supporting the surrounding society before, during and after a health crisis.

We have a small coordinating office that oversees the day-to-day work, and a pool of expert coordinators in several subject-matters related to health crises. The Centre also coordinates the Health Crises Network, with experts from Swedish universities. The Director of the Centre reports directly to the President of KI, with the support of our steering group.

## Strategic goals

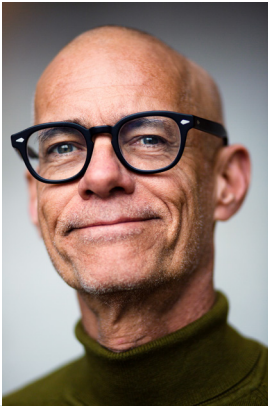
Our work is guided by our five strategic goals:

1. Catalyse research collaborations within the field of health crises and create meeting spaces for interdisciplinary collaboration.
2. Stimulate and participate in the development of new education within different health crises subjects.
3. Gather existing and build new health crises expertise, and supply specific know-how and competence.
4. Drive policy development and in collaboration, set the agenda for increased health crises preparedness.
5. Act as KI's and its managements sensor for new health threats, and contribute to the coordination of KI's efforts in a health crisis.

# Staff

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# Health Crises Forum

On 27 November 2024, the Centre for Health Crises organised Sweden's first Health Crises Forum. It brought together over one hundred specially invited representatives from universities, regions, the Government Offices and other government agencies, professional associations and civil society organisations. The purpose was to, in light of the increased focus on civil defence and crises preparedness in Sweden, bring these actors together to discuss the role of universities in health crises preparedness and management. We discussed this both in general, and within specific fields, such as disaster medicine, pandemics and extreme heat.

The President of KI, Annika Östman Wernerson, opened the forum. Four speakers then gave presentations on the topic based on their professional roles: Jonathan Suk, Principal Expert in Emergency Preparedness at the European Centre for Disease Control (ECDC); Taha Alexandersson, Head of Emergency Preparedness at the National Board of Health and Welfare; Johan von Knorring, Regional Director of Region Uppsala and member of the steering group for NSPL – the county councils' national coordination, planning and management of health care in times of crises and war; and Claes Ivgren, Surgeon General of the Swedish Armed Forces.

A panel discussion, moderated by former State Secretary at the Ministry of Social Affairs, Maja Fjaestad, followed, in which the last three speakers participated together with the State Secretaries at the Ministry of Education and the Ministry of Social Affairs, Maria Nilsson and Miriam Söderberg, respectively, and the Head of Research at the Centre for Disaster Medicine at Linköping University, Carl-Oscar Jonsson.

The participants of the Forum were then divided into workshop groups, where the discussion was deepened, with a focus on five types of health crises and in particular what kind of support universities can provide, what kind of support other actors would appreciate and how this can be achieved through collaboration. Each workshop was led and had been co-created by one or two expert coordinators from the Centre for Health Crises and members of the Health Crises Network. The workshop themes were:

- Preparedness for Peacetime Health Crises and War in the Health Care Sector. Workshop leaders: Johan von Schreeb, Centre for Health Crises, KI; Per Loftås, Linköping University, and Anja Westman, Örebro University.
- Decision-making in Health Crises. Workshop leaders: Maja Fjaestad, Centre for Health Crises, KI and Pär Daléus, Swedish Defence University.
- A New Pandemic. Workshop leaders: Helena Hervius Askling, Hedvig Glans, both Centre for Health Crises, KI; and Mårten Jansson, Sophiahemmet University.
- Sweden's Role in International Health Crises. Workshop leaders: Caroline de Groot, Centre for Health Crises, KI; Martina Gustavsson, KI and Per Becker, Lund University.
- Extreme Heat and its Health Effects. Workshop leaders: Petter Ljungman, Centre for Health Crises, KI and Christofer Åström, Umeå University.



## Overall conclusions from the forum:

Based on the presentations, the panel discussion and the outcome of the workshops, the following overarching conclusion was drawn:

**There is a strong willingness, both from universities and stakeholders in society, to collaborate on health crises preparedness and management. Moreover, several areas where collaboration can be developed were identified.**

**However, to be able to act on this willingness, several issues must be resolved. These include:**

- Staff at universities must be given the means to dedicate time and resources to collaboration.
- Stakeholders in society must set aside time and resources for training and exercises.
- Stakeholders should increase their knowledge of how other organisations work, as well as to create a better understanding of the uncertainty and scientific debate that can arise in a health crisis.
- Relationships must be built and maintained during normal circumstances, to be functional and trustworthy in a crisis. Likewise, channels for communication, agreements and formats of collaboration in, for example, government assignments must be established in advance.
- Care must be taken to involve all relevant actors in health crisis preparedness; the importance of making sure primary care providers, the business sector and civil society organisations are included, was especially mentioned.
- Universities must prepare themselves for a different role, a role in which they will contribute to health crisis preparedness and management and support the surrounding society. At the same time, resources must also be provided for universities to do so.

**Similarly, the forum also identified a number of areas where universities can contribute before, during and after a health crisis and where their contribution can be beneficial and sought after by other stakeholders. These included:**

- Educate and train professionals to ensure they have the right relevant skills to carry out their work in health crises.
- Provide a base line competence for what future professionals should know to be able to work in a crisis.
- Conduct evaluations that enable learning for future crises.
- Provide expert advice and develop rapid evidence briefs to support decision-makers. However, to do so requires universities to adapt to new working methods and formats of delivering their knowledge.
- Conduct research and data collection during a crisis, including analysing real-time data to inform decisions.
- Ensure a continuation and development of health crisis expertise, by training the next generation of researchers and experts in the field.

The Centre will incorporate the conclusions from the Health Crises Forum in our ongoing work on defining universities' role in health crises. Having several actors concur on this topic is important to confirm that we are on a relevant track in our advocacy and policy work.

# Health Crises Network

The Health Crises Network brings together a wide range of expertise, in the form of university-based researchers and experts, in areas that are essential in the preparation, management, and evaluation of health crises. It was inaugurated in 2023, following an extensive mapping and analysis to identify actors and activities within the field of health crises at Swedish universities, focusing on actors that conducted activities not solely within research, but also in public outreach and/or other areas.

We received renewed funding from the Swedish Government, to cover activities in 2024 to “increase the knowledge about health crises and collaborate with, and support, other universities in their work in the field”. We did this through numerous activities throughout the year and specifically through continued collaboration in the Health Crises Network and organising the Health Crises Forum.

In its first year of operation, we have worked hard to establish the network, identify opportunities for collaboration and to make it a platform where our voices can be amplified when speaking about health crises matters.

The network’s strength is its range of expertise and although the purpose of the network is not to simply grow as large as possible, but rather to have access to the right expertise, the network has expanded, from 25 members from 15 universities at the inaugural meeting in December 2023, to 40 members from 17 universities at the end of 2024. New members have added expertise in decision-making in crisis, crises communication, international law and human rights, prevention in crises and disasters, production management in health care.

## Health Crises Forum

The network was an integral part of the Health Crises Forum, bringing the multidisciplinary expertise needed to make sure the forum had the cross-sectional relevance that we desired.

Members of the network helped plan the forum by sharing their subject-specific expertise, sharing examples from conferences and meetings they had hosted or attended, identifying relevant attendants and sharing contacts.

During the forum, network members co-lead all workshops with our experts. In doing so they provided valuable insights from their fields that complemented our own expertise well.





## Health Crises Network meeting

We organised a network meeting the day after the Health Crises Forum. The meeting focused on extracting the main take-away messages from the forum, how to best move forward with them and how to build on the conversations that were initiated.

The meeting concluded in that, in terms of continuing on from the Health Crises Forum the network will focus on two main themes:

- Developing the Health Crises Academy as a platform to analyse needs and provide education and training.
- Collaborating on creating a forum for science-to-policy, with the intention of being a space for debate and deliberation between universities and other actors, on health crises preparedness and management.

The network also agreed that in order to build on the Health Crises Forum there is a need to initiate a further debate on the role of university also within the sector itself. Therefore, we co-authored an opinion piece titled “We are ready – give universities a clear role in the Total Defence”, published in the magazine Curie in December 2024. It emphasised that as a sector, we should dedicate resources to both define our role – how we see ourselves supporting the surrounding society in times of crises, and how we see us as part of crises preparedness – and champion that role vis-à-vis other actors.

Additionally, the network agreed to continue collaborating on issue-specific topics as and when the opportunities arise, in much the same fashion as it has so far and that has proven beneficial and impactful. Several examples of such collaborations in 2024 are presented in the section “Selection of activities” of this annual report.



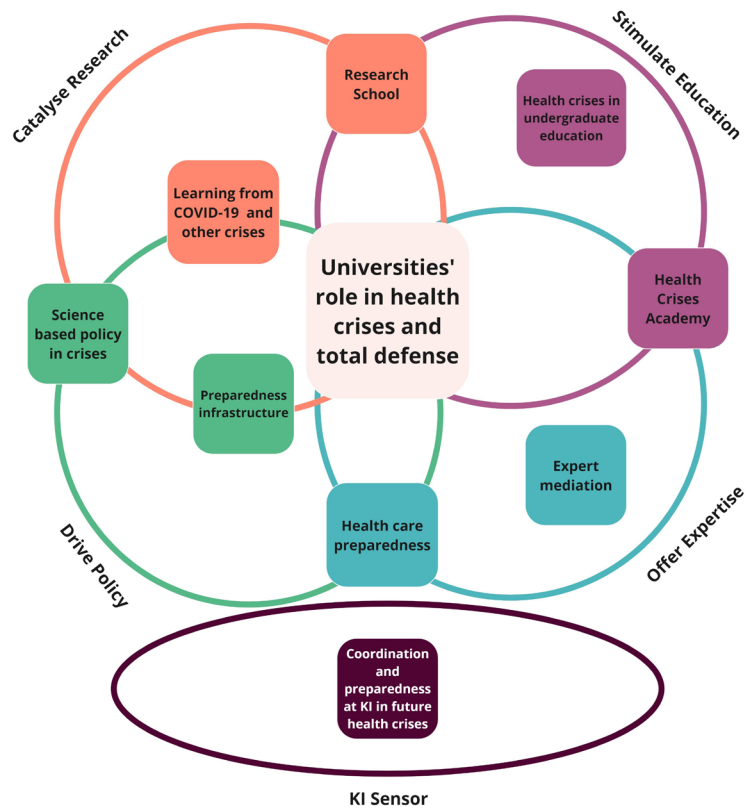
# Focus areas

Ahead of 2024, we developed a new work plan, covering the period 2024–2026. In it we identified 10 focus areas that structure our work.

These focus areas have been developed in collaboration with our expert coordinators and steering group. They traverse several areas of expertise and are intended to facilitate collaboration between the areas, in line with our ‘all-hazards’ perspective. Moreover, they are constructed to contribute to our strategic goals.

**The focus areas are:**

1. Learning from the COVID-19 and other crises
2. Health crises in undergraduate education
3. Research School
4. Health Crises Academy
5. Expert mediation
6. Science-based policy in crises
7. Health care preparedness
8. Preparedness infrastructure
9. Universities’ role in health crises and total defence
10. Coordination and preparedness at KI in future health crises



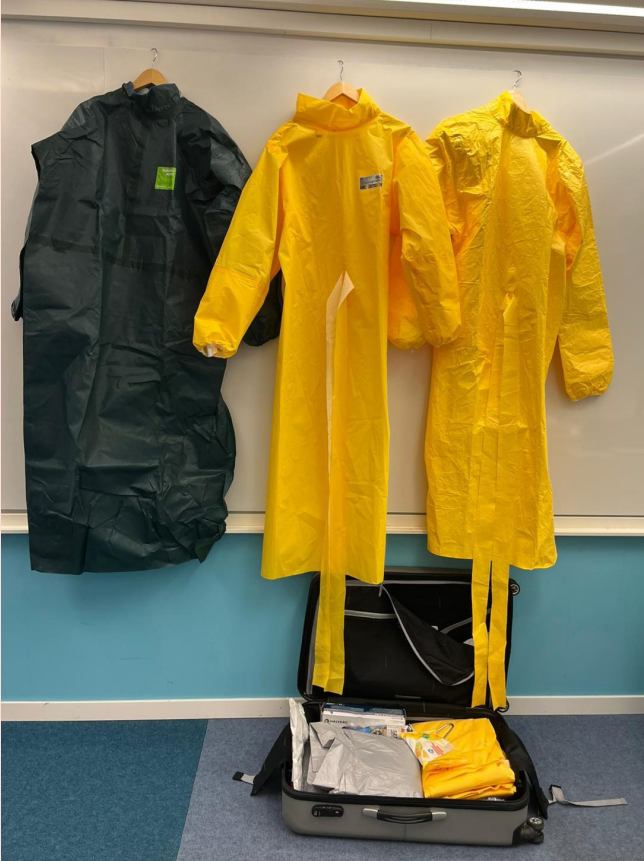
Whilst the focal areas provide a direction for our work, the Centre remains agile and adapts what we do, to respond to health crises that occur or threaten to occur. Similarly, our work is not necessarily equally divided across the focal areas, nor does each area necessarily receive the same amount of attention at all times.

During the year, we have focused on certain areas. In the following section of the annual report, we have chosen to highlight a selection of activities, which contribute to one or several focus areas.



# Selected activities 2024

# Education and training



During 2024, work has been ongoing at the Centre to structure the courses we develop and conduct under our programme area for education, which we call the **Health Crises Academy**. This is to achieve greater structure in our work, but also greater impact and clarity for an external audience.

In 2024, we conducted an extensive **mapping of Swedish education initiatives within the field of health crises**. The mapping included both university courses and courses provided by county councils, government agencies and civil society organisations. It shows that whilst there are education initiatives, their number and scope are relatively limited. Moreover, the number of education activities is uneven across subjects and there is a lack of a common platform to show what is available. The mapping has garnered attention from government agencies and regional authorities, and we hope it can provide a basis for further discussion on how to best develop education within the field of health crises in Sweden.

Our **collaboration with Médecins Sans Frontières (MSF)** has proceeded during the year, focusing on education and training. In the spring, we co-funded and provided expertise for the **course Health Assistance in Humanitarian Crises**, which prepares medical humanitarian aid workers for working in conflicts, disasters and low-resource settings.

In the autumn, we launched a new **course that prepares anaesthesiologists in adapting their skills to work in low-resource settings**. The first round of the course was a resounding success, with more than 30 participants from 19 countries. The course will be given again in 2025.

Following on from discussions and collaboration between several of our expert coordinators, the Centre submitted a **proposal for an elective course in health crises preparedness** as part of the medical doctor programme at KI. The course would have a comprehensive approach to health crises, including teaching on infectious disease outbreaks, management of CBRNE-incidents and disaster medicine.



During 2024 we received financial support from the National Board of Health and Welfare to develop, adapt and conduct two courses, Trauma Katastrof Sverige and Advanced Hazmat Life Support (AHLs).

**Trauma Katastrof Sverige** is inspired by an exercise concept that is used in Region Stockholm, Trauma Katastrof Stockholm, where teams from hospitals improve preparedness for mass-casualty events. Trauma Katastrof Sverige uses a 'train-the-trainers' format to give the participants tools to organise an exercise for hospital-based health care personal in traumatology, with a focus on blast injuries and care of a high number of injured people. The pilot run of Trauma Katastrof Sverige in November 2024 saw around 60 staff from 14 regions attend a one-day workshop, followed by participation as observers of Trauma Katastrof Stockholm. Participants can then set up equivalent training programmes in their own regions.

The course **Advanced Hazmat Life Support (AHLs)** was developed by University of Arizona and the American Academy of Clinical Toxicology to train healthcare professionals across disciplines to care for patients exposed to hazardous materials and dangerous goods. We have developed and adapted the course for a Swedish context in collaboration with the Centre for Disaster Medicine at Linköping University. Adapting the course to a Swedish context gives healthcare staff a chance to learn how to handle hazardous material and provide care under local conditions. It is set to be held for the first time in February 2025.

We conducted a **pilot survey** among all medical doctor programmes in Sweden, to **gauge how outbreak preparedness is taught**, and gauge awareness levels of a government inquiry on healthcare preparedness in times of crises. Results show low levels of awareness and no concrete plans to introduce outbreak preparedness in the infectious disease course, mainly due to lack of space for novel elements. Some respondents were interested in receiving scenarios that could be used as teaching aids, and new members from Umeå University joined the Health Crises Network.

Just like the previous year, we taught **outbreak epidemiology at the research school for clinicians in epidemiology**. The material was a mix of lectures and an interactive case involving epidemiological calculations. It was taught in collaboration with members of staff from MSF Sweden and Smittskydd Region Stockholm.

# Advocacy and policy input

Throughout the year, the Centre has **met with, and provided written input to, several official reports, investigations and government assignments.** This has been done both by individual or groups of expert coordinators, by the Centre as a whole, and in collaboration with members of the Health Crises Network.

We met with the team behind the government investigation on **'Improved preparedness for future pandemics'** for a face-to-face meeting. In the meeting our expert coordinators shared their professional expertise in clinical trials, data-for-action, vaccination preparedness in practice, outbreak preparedness and response, laboratory preparedness, and prioritisation. In each topic they highlighted what they consider important points for the investigation to take forward.

Along with members of the Health Crises Network who work with CBRN (chemical, biological, radiological and nuclear) threats and infectious diseases we provided expert comments on the official assignment by the government to the National Board of Health and Welfare to **'Urgently strengthen the healthcare's ability to handle incidents involving certain dangerous substances'**. The comments were put forward in a meeting with the civil servants in charge of the assignment. The contacts that were established during this meeting were also then key in supporting the work to develop a Swedish version of AHLS, described earlier.

Similarly, we provided input on a government inquiry into **patient transportation**, drawing on our expertise and utilising the multidisciplinary competences available in the Health Crises Network. We also provided expert input on the Public Health Agency of Sweden's report on health consequences of climate change in Sweden and have been invited to the National Board of Health and Welfare twice during the year to speak on the topic of health and extreme weather.

We have set up a study to **explore the lived experiences of health care staff who worked directly with care and treatment of COVID-19-patients during the pandemic.** The study was conducted through a survey and focus group discussions and will be published in 2025. Our intention in doing the study, is to inform our advocacy on this topic.

Furthermore, we have continued to highlight **the need for prioritisation** in the healthcare system in times of crises and disasters. Activities include a seminar during the Swedish Society of Anaesthesiology's annual conference, as well as a themed issue and guest editorship of *Läkartidningen* highlighting various aspects of prioritisation. The issue included articles written by several different authors, highlighting the issue from several scientific viewpoints. It was followed by a webinar based on the themed issue.

Additionally, a small-scale survey on **attitudes to prioritisation** was also conducted among medical students, one who was just starting their degree and in their penultimate year of studies. This was intended as a pilot, to be developed to a study on the general public's attitude to prioritisation to intensive care in times of crisis.



# Networks and collaborations



Along with partners at the University of Copenhagen, Roskilde University, University of Stavanger, Hanken School of Economics and the University of Iceland, we submitted an application for a grant from Nordforsk to develop a **Nordic health crises network**. The idea being that researchers at Nordic universities would work together to strengthen the role of universities in building crisis preparedness in the Nordic countries for future health crises. The network would strive to facilitate science-to-policy interaction, especially in the fields of pandemic preparedness and extreme weather events. The application was successful, and the network was awarded a 3-year grant of 3 million Norwegian kroner. Activities within the network will commence in 2025.

We have been part of **KI's ongoing work to establish an ongoing dialogue with relevant public authorities ahead of future health crises**. This has included participating in discussions to facilitate staff exchange between KI and the Swedish Public Health Agency. Moreover, ahead of the Health Crises Forum, we assisted in organising a lunch meeting that KI's president hosted. The lunch was attended by the directors of the National Board of Health and Welfare, the Swedish Agency for Health Technology Assessment and Assessment of Social Services and the Swedish Defence Research Agency, along with heads of departments from the Public Health Agency, the Civil Contingencies Agency and Swedish Defence Analysis Agency, and the Surgeon General and the Acting County Governor for Stockholm County. The aim of the lunch was to discuss civil defence, the role of KI and other universities and avenues for collaboration. There was clear interest from all eight agencies to continue these conversations, and an outcome of the lunch was a decision for a workshop in June 2025, to develop collaboration opportunities.

The Centre remains a part of **the Stockholm trio collaboration on climate and health**, along with the KTH Climate Action Centre, the Bolin Centre for Climate Research at Stockholm University and the Centre of Excellence for Sustainable Health at KI. During the year we participated in events organised by our collaboration partners, such as for example the student competition Climate and Health: A Vision for Stockholm 2029, which we recruited participants for and our expert coordinator in extreme weather, climate and health was on the jury for selecting the winning project.

Moreover, the funding for the Stockholm trio collaboration on climate and health also contributed to our research proposal submission to Formas for a **project on resilience to harmful health effects of heatwaves and extreme floods**, our **KI Contributes seminar** on extreme flooding events and to the creation of our **Climate Health Talks** webinar series, which will be described in more detail in the next section.

Lastly, we were invited to participate in a **roundtable discussion on antibiotic resistance** at the Government Office, and we have established a contact with the **Institute for Future Studies**, where members of our team now participate in a reference group on the experiences of the COVID-19 pandemic.

# Seminars and workshops

In May we organised a **seminar on attacks on health care** facilities and health care staff in conflicts around the world, in particular in Gaza, Sudan and Ukraine together with the Swedish Society of Medicine. The aim was to bring attention to the matter and highlight the risks with accepting a shift in attitude towards greater acceptance of such attacks. It drew a substantial audience and introduced us to suitable persons to invite to join to the Health Crises Network. The matter has since been taken further by other actors, including in a campaign by MSF Sweden. Among other things, they wrote an opinion piece that we co-signed and which was published in Dagens Nyheter in June. Subsequently, our director also participated in a meeting on the topic hosted by the Geneva Centre of Humanitarian Studies.



We have organised a series of popular webinars called **Climate Health Talks**, supported by funding from Stockholm Trio. The purpose of the series is to bring research and policy practitioners together to share experiences and look at how research can be applied in practice. The series began with a webinar in June on the impacts of flooding and heatwaves on vulnerable populations, based on experiences from Italy and how they could be applied in Sweden. This concept was developed into a webinar series that focuses on bringing research and policy practitioners together to share experiences and look at how research can be applied in practice. Three additional webinars were conducted during the autumn with the topics of wildfire, heatwaves, and water-borne diseases after flooding. The webinars have attracted a mixed audience of national and international researchers, and societal stakeholders from regional, local and national levels. Experts from the Health Crises Network have participated as moderators.

Our **policy labs** continued during 2024, with a focus on increasing interest and engagement on how to conduct science-based advocacy, in particular among KI's staff. During the year, when the theme called for it, the target group has been widened to also welcome external participants. The format has been solidified, and standard operating procedures have been agreed on in the working group. In total four policy labs were organised in 2024. The topics were: what the journey to a political decision looks like – based on examples from the Swedish Government Official Report on research funding; what differentiates global health policy, politics and political economy and how to influence it; how research can be used to support policy and impact for change – based on work to combat antibiotic resistance; and lastly, how to ensure scientific advice is tailored to the needs of decision-makers.

In collaboration with the Swedish Agency for Health Technology Assessment and Assessment of Social Services – SBU, we devised a **workshop on how to construct rapid response briefs**, with the aim of providing support for decision-making in health crises. A pilot of the workshop was organised in May and included, among others, participants from the Health Crises Network. Based on the pilot workshop we decided to continue to develop the format in collaboration with SBU. Following on from our collaboration and the pilot workshop, SBU received funding to develop a rapid review format in their appropriation directions for 2025 and the Centre for Health Crises was mentioned as a key collaboration partner in that process.

We held a symposium in late 2023 (see previous annual report) on how to **improve conditions for clinical trials during ongoing health crises**, and how society can prepare ahead of time, learning from experiences during the COVID-19 pandemic. Following on from this, we published an opinion piece in the medical science magazine Dagens Medicin in early 2024, arguing for the need for a network to facilitate clinical trials. The symposium also resulted in new contacts and ideas for collaboration, which will be followed up on in 2025.



# Expertise mediation

Our **secondments** of experts to ongoing health crises globally, through our collaboration with international relief organisations, has been ongoing during the year. We facilitated a response for a **request for assistance through the Global Outbreak Alert and Response Network (GOARN)**, to the WHO's Regional Centre for Health Emergencies in the Eastern Mediterranean and Middle East region. Moreover, we seconded staff to an **MSF relief mission to combat a cholera outbreak in Zambia** in the spring, to facilitate the initiation of an emergency response to the health crises and conduct trainings for local staff.

Following the increase in **hostilities in Lebanon**, we **seconded staff** to investigate the need for international support, through a secondment to the organisation UK-Med. In connection to this, we organised a webinar where they shared their experiences and the lessons they had observed.

Along with the Karolinska University Hospital, we facilitated an **experience and knowledge sharing session, for Ukrainian military health care personnel** during their visit to Stockholm. Additionally, in March we participated in SWECARE's workshop about how to support and **strengthen Ukraine's healthcare system**.

Our director gave the **keynote address at the 2024 Åre Risk Event**, which had as its theme "Crisis Preparedness in a Changing World". The event provided an opportunity to meet with members of the Health Crises Network and network with other actors in the field. Similarly, he was invited to speak at the **Forum for Swedish Chief Medical Officers**, which also garnered a useful network of contacts, and he was a panellist at the **2024 ICRC Conference on Weapon-Wounded Care**. Moreover, in 2024 he was elected to the European Commission Directorate-General for Health and Food Safety's **Advisory Committee on Public Health Emergencies (ACPHE)**.

Members of staff at the Centre, and in particular our expert coordinators have shared their expertise and engaged in **popular education** and **knowledge dissemination** by lecturing and speaking and participating in as experts in the media. The total number of **media engagements** by our members of staff stood at **over 50** for 2024.

An example of such knowledge dissemination was during the **mpox outbreak** in the autumn, when a case was also confirmed in Sweden. The Centre quickly put together information to be shared on our website and our experts participated frequently in the media. They also wrote an editorial on the need for focus to not be limited to a singular outbreak in Sweden, but to also include the raising of awareness of the situation at the heart of the outbreak, especially in the Democratic Republic of the Congo.



# Enablers

Several factors enable the Centre for Health Crises to operate. These include organisation, communication and financing.

The organisational set up of the Centre continues to serve its purpose well. No new roles were created during the year, but instead focus was placed on securing access to expertise through the Health Crises Network.

The Centre has been greatly supported by our steering group, who has not only reviewed our work continuously and made sure we remain within the parameters of our mandate, but also lent their expertise and networks to support us. At the end of the year, we thanked outgoing steering group members for their services, and welcomed new members, appointed by KI's president, for the period 2025–2027.

In addition to the communication work carried out for specific activities, such as the Health Crises Forum, the focus this year has been on supporting the efforts to become a National Centre, to help cement the establishment of the Health Crises Network and to increase awareness of the Centre at KI. Moreover, a communications strategy was developed, along with an annual communications plan. We have also supported our members of staff to increase their use of LinkedIn as a forum to disseminate updates about the Centre's work and network with others within the field.

## Funding

The Centre draws its financial backing from a number of sources: funding from the Marianne and Marcus Wallenberg foundation, internal KI funding, ear-marked funding from the Swedish Government through KI's appropriation letter to support our work in collaborating with other Swedish universities, and a grant from Stockholm trio to work with climate and health. Diversified funding is important for our work and the stable development of the Centre.



# Looking to the future

The work we are doing at the Centre for Health Crises remains more relevant than ever. In a world with ongoing and escalating polycrises and rapidly changing security context, we live in a time where all actors have to step up their preparedness. We argue that the universities have capacities to contribute to health crises preparedness, but they need to make sure investments are being made to maintain and develop these capacities.

The Swedish Defence Decision and several government inquiries have highlighted the need for education and simulation exercises as part of health crises preparedness. At the Centre, we assume our role and scale up educational activities through creating a program area for education, called the Health Crises Academy.

Similarly, we see a sustained interest in the forums for science-to-policy interaction that we are hosting on a regular basis. They allow researchers and policy makers to meet and share their needs and we aim to explore this further. At the end of the year, we established science-to-policy as a dedicated programme area at the Centre, along with the Health Crises Academy. In our view, the expertise that we gather and build at the Centre and within the Health Crises Network can provide an added value in the interconnection between research and policy-making. We are here to monitor developments in the field, provide an interface between these actors and be a place where science and policy can meet to collaborate.

The Centre will continue to provide expertise and function as an expert body to other authorities, the government, regions, organisations, etc. We will continue to regularly second experts to organisations working on the ground in health crises and act as an independent source of knowledge. To deliver on the changes that are needed to improve our preparedness and ensure that we are better equipped to handle future health crises, universities, government agencies, counties, municipalities and the health care sector will need to work together, and collaborate with other countries. That is why we look forward to initiating activities within the Nordic Health Crises Network during 2025.

To ensure stability and a clear mandate, we have carried on advocating to become a National Centre for Health Crises throughout the year, including through meetings with relevant ministries. 2025 will see the publication of several important commissions of inquiry and other reports related to health crises. We will actively engage and follow up on these, to see how we can provide support in implementing the conclusions. We see an opportunity to push for development of collaborations and further define the role of universities in health crises, especially when it comes to supporting knowledge enhancement and capacity building in the health care sector. We want to ensure that we are able long-term to contribute to a strong and effective societal preparedness for coming health crises.

