



Annual Report 2022

DEPARTMENT OF EPIDEMIOLOGY AND GLOBAL HEALTH



UMEÅ UNIVERSITY

Annual Report 2022

Department of Epidemiology and Global Health

Umeå International School of Public Health (UISPH)

Prologue

To all staff, students, collaborators and other colleagues,

Thanks to everyone for all your contributions over the year!

What stands out of 2022 was the joy of physical meetings after two years of restrictions due to the COVID-19 pandemic.

We started to travel, to receive students, colleagues and guests from close and far, new and old. We have been sharing experiences, asking questions and contributing to some answers and long-term impact. In the classrooms, meetings and workshops we are relating to each other, creating and stretching the boundaries of our education and research activities. While we continue to develop our skills in virtual communication we are grateful to be back on campus again.

We were able to celebrate academic achievements after two years without academic ceremonies. We are proud of our new Professors, Maria Nilsson and Isabel Goicolea!

Our international based PhD students returned during the year for shorter and longer stays, meeting with supervisors and colleagues. It was again possible to have a PhD day in Umeå, this time discussing ethical dilemmas and equal opportunities.

In the end of December, we got the news that the SIDA administered research funding were to be cut by half from 2023 by the government. Our long-term research training partnerships with Tanzania, Bolivia and Mozambique are affected by this.

Such a decision is short-sighted and counterproductive. In this context we especially appreciate the stipends for MPH and PhD students provided by the Erling-Persson Foundation. Higher education builds the foundation for understanding and acting on the complexities of health and its many determinants. We continue being committed to our MPH and PhD programmes, contributing to critical thinking and contextualised knowledge production and interventions in a rapidly changing world.

Please take a moment to learn more about our activities in this Annual Report!

We thank Karin Johansson, Susanne Walther and Miguel San Sebastián for their support and work with this year's Annual Report.

ANNA-KARIN HURTIG
Head of Department

KLAS-GÖRAN SAHLÉN
Deputy Head of Department

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Organisational setting

Organisation, Leadership and Staff

The Department of Epidemiology and Global Health (EpiGH) is shaped by a set of key values that are central to the way in which we conduct our work, research, education and engagement with society. These efforts are underpinned by our ambition which is to contribute to equitable and sustainable improvements in health and welfare across the globe. We work with a broader definition of global health including public health issues in Sweden, as well as in the rest of the world. Our mission, vision, and values are presented on page 26.

EpiGH is a multidisciplinary research, education and teaching environment. At EpiGH we host Umeå International School of Public Health with Masters Programmes in Public Health (MPH) and an extensive doctoral programme (PhD). Additionally, since 2020 we also have the responsibility for coordinating the one-year Master's programme in Working life and Health (ALPHA).

A guiding principle of our organization is to ensure that each member of the staff has the possibility to contribute, as far as possible, to our collective work, both in the short- and long-term. Our Research Strategic Group and the Educational Strategic Group have key responsibilities to facilitate and guide future developments in this regard. The Midpoint Researchers' Group includes post-docs and others at the beginning of their research careers. The Academic Dialogue Spaces having emerged from bottom-up initiatives encourage increased scientific dialogue and promote the development of cutting-edge expertise. Our research and education operates under three research profiles: 1) *Emerging Global Health Challenges*, 2) *Health Systems and Policy*, and 3) *Northern Sweden Health and Welfare*, which are consolidating and strengthening every year. (see page 35).

The Extended Leadership Group, which meets once a month, comprised the following members in 2022:

Anna-Karin Hurtig	Head of Department
Klas-Göran Sahlén	Deputy Head of Department
Marie Lindkvist	Study Director, MPH
Karin Johansson	Administrative Coordinator
Sara Forsberg	Finance Coordinator
Miguel San Sebastián	Study Director, Research education
Helene Johansson	Study Director, ALPHA
Anneli Ivarsson	Rep. Research Strategic Group
Isabel Goicolea	Rep. Research Strategic Group
Cartrine Anyango-Odhiambo,	Rep. Doctoral Students
Petter Stoor &	
Ida Linander	Rep. Midpoint Group
Fredrik Norström	Rep. Working Environment
Raman Preet	Rep. Equal Opportunities

EpiGH has about 70 employed staff and additionally approximately 60 affiliated researchers and doctoral students. We benefit from wide ranging prior education and experience in our membership. This includes physicians, nurses, psychologists, economists, social workers, dentists, statisticians, physiotherapists, and nutritionists. This broad mix of experience - across clinical medicine and the social sciences - greatly enriches our multidisciplinary research and teaching environment.

All staff are encouraged to participate in our monthly staff meetings (PUMP) and the Department Days that are held each semester. In 2022 meetings continued to be partly virtual as a consequence of the restrictions on physical encounters during the pandemic.

Klas-Göran Sahlén stepped down as Deputy head in the end of 2022. "Klasse" has an outstanding ability to always find solutions when faced with tricky issues.

We thank him for dedicated work in his leadership role with special emphasis on education and communication strategies. He will continue as managing editor of Somali Health Journal as well as senior lecturer at the department, although he will now spend more time in his beloved village Järnäs.

Staff



Camilla Andersson.

Doctoral student in public health, MA in media and communication, journalist. Research interests are in climate change, mitigation, adaptation, sustainable communication and health aspects. The thesis project focuses on the potential contribution of households to climate change mitigation and whether health aspects, as eg gains from mitigating activities, can be used as triggers when communicating needs for low carbon pathways



Jennie Brandén. Post-doctoral Fellow with a PhD in Political Science. Part of the research group *Lávuvu* at EpiGH focusing on Sámi health. Currently works with a research project funded by the Sámi parliament focusing on the issue of violence against Sámi

women in Sweden from a mixed methods approach. Research interests also involve critical studies of the politics of public safety and gender equality, and more broadly feminist and postcolonial perspectives on politics and the political.



Cartrine Nancy Anyango.

Doctoral student in Public Health Science at the Department of Epidemiology and Global health with an affiliation at Centre for Demographic and Ageing Research (CEDAR), master's in Public Health (MPH), and an undergraduate background in sociology. Her doctoral research thesis focuses on Intimate Partner Violence service provision to women with disabilities and how the current services address women with disabilities needs. Her research interests include gender-based violence, sexual and reproductive health, and rights and health systems



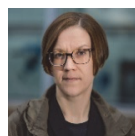
Mazen Baroudi. Hold a PhD in Public Health and currently working as Senior Research Assistance in the Department of Global and Public Health in Umeå University and affiliated as a Postdoctoral fellow in the

Department of Social Welfare in Bukkyo University in Japan. His main research interests are health system research, migrants' health and sexual and reproductive health and rights.



Hanna Blåhed.

Doctoral student focusing on the ongoing reform of the Swedish primary health care system, from the perspective of rural communities in Västerbotten/Norrbottnen.



Hanna Bäckström Olofsson.

Research fellow with a PhD in Gender Studies. My research mainly centers on social work in civil society and gendered violence. Currently conducting research on public and civic counter-segregation efforts, the young women's shelter movement in Sweden, and the social services' responses to gender-based violence.



Dean Carson. PhD MSc MA.

Guest Professor in Cultural Geography. Interested in who lives in, works in and visits sparsely populated areas. Key projects include examining the relationships between urban and rural areas in sparsely populated areas, prospects for local-led innovation in health and care systems, and new approaches to service delivery. Leads partnerships with universities in Australia, Canada and Austria.



Kerstin Edin, PhD, associate professor and docent in Public Health with a clinical background as a RN midwife. 2012-2019 she had a position as a programme coordinator and an associate professor at the midwifery master

programme at the department of Nursing. Her research (in Sweden and in low-income countries) has mainly focused on sexual & reproductive health, violence against women and gender. Involved in an qualitative health economic sub-study of CALY (Capability-Adjusted Life Years).



Maria Emmelin. Professor of Global Health at Department of Clinical Sciences, Social Medicine and Global Health, Lund University. She has a special interest in public health evaluation and the social determinants of health. Her

research has focussed on self-rated health and the social aspects of cardiovascular disease prevention in northern Sweden. She has worked with the HIV/AIDS epidemic in Tanzania, smoking cessation in South Africa, reproductive health in Ethiopia, and violence against women (and children) in Ethiopia, Tanzania and Indonesia. She is co-editor with Global Health Action.



Mikael Emsing. PhD-student at Epidemiology and Global Health and the Post-graduate school for Educational Sciences. In December he nailed his thesis "Conflict Management and Mental

Health among Swedish Police Officers and Recruits" which will be defended in January 2023. In the fall of 2022 Mikael was

employed as an adjunct at the Unit for Police Education at Umeå University, but was affiliated as a PhD-student throughout the year.



Nadja Fagrell Trygg. PhD student and project assistant in the project Complex inequalities in mental health.



Inna Feldman. Associate professor in health economics. Research and teaching on health economics, Theoretical and empirical health-economics evaluations.



Osvaldo Fonseca. Senior Research Assistant. Ph.D. in Veterinary Science. Also affiliated to the Department of Clinical Microbiology and the Centre for Demographic and Ageing Research (CEDAR) at Umeå University. Participates in several research projects such as “Health impacts of weather types in Sweden – the context of climatic and demographic change” and “Complications following COVID-19 – register studies”.



Sara Forsberg. Financial coordinator. Responsible for budgeting, economic planning and accounting.



Isabel Goicolea. MD, Professor. Her research interests are in gender relations, men's violence against women, young people's health and sexual and reproductive rights. Currently involved in research on youth health in Sweden, India and Zambia, and gender-based violence in Sweden and Spain.



Anne Gotfredsen. PhD, Research fellow at the Department for Epidemiology and Global Health. Also affiliated to the Umeå Centre for Gender Studies (UCGS). The overall aim of my doctoral thesis is to explore and understand how teenagers involved in various civic organizations and leisure activities develop a collective capacity to influence their mental health.

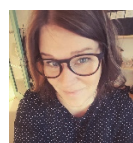


Per Gustafsson. PhD in Child and Adolescent Psychiatry, Associate Professor in Epidemiology, and Docent in Public Health. My research falls within social epidemiology and social inequities in health and health care, particularly intersectional perspectives. I teach theory and methods for e.g.

basic epidemiology, social epidemiology and philosophy of science at advanced and doctoral levels. Chair of the Program Council at the department and involved at the faculty through The Educational Strategic Board, The Council for Doctoral Education, and as Programme Director for the Doctoral education programme.



Isa Norvell Gustavsson. Postdoctoral Fellow with a PhD in Medical Science (Public Health). Currently working in a project focusing on initiatives for young people who are neither in employment, education or training (NEETs). Research interests involve how people relate to work and the welfare system in relation to work, unemployment and sickness absence. Of particular interest are social norms in relation to work and its influence on individuals' actions and mindset.



Ulrika Harju. PhD research administrator and administrator for Masterprogram in working life and health, ALOHA.



Henrik Holmberg. Associate professor with a PhD in statistics at Department of Epidemiology and Global Health. For the last ten years I have been working as a consultant statistician in many different projects with medical applications. Studies on Hernia surgery and the Swedish hernia registry has timewise been my largest area of work. The last years I have focused more on adherence to medication and been studying that as a member of VIPVIZAs medication group.



Anna-Karin Hurtig. MD, DrPH, DTM&H, MSc. Professor in public health. Head of the Department of Epidemiology and Global Health. Main areas of interest: international health policy and systems research, community based health systems and primary health care, and migrant health. Capacity building.



Elisabet Höög. MD in Public Health. Research fellow. MA in work- and organizational psychology. Research focus on facilitation of and support structures for change and development in welfare organizations. Research coordinator at FoU Socialtjänst, Region Västerbotten.



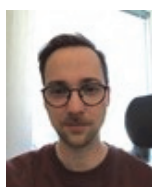
Ulf Högberg. MD, Professor emeritus in obstetrics and gynecology. Research in global reproductive health, clinical and perinatal epidemiology



Anneli Ivarsson. Professor in Epidemiology and Public Health Sciences. MD with specialist training in Paediatrics and a PhD in Paediatrics. Consultant at the Public Health Unit, Strategic Management Office of Region Västerbotten. Scientific leader of the Salut Child-Health Intervention Programme in Västerbotten and interlinked research Founder of the Umeå SIMSAM Lab focusing on multidisciplinary register-based research for connecting childhood with life-long health and welfare.



Urban Janlert. MD, Professor emeritus in Public Health, specialist in Social Medicine. Research in social epidemiology (unemployment, social deprivation).



Albert Brunet Johansson. Project assistant with a background in sociology. Involved in research concerning access to sexual and reproductive health and rights for young migrants, as well as food resilience and community services in rural regions.



Angelica Johansson. Programme Administrator of the Public Health Programmes. Secretary for the Programme council for master programmes in public health (PRPH) and responsible for the administration in Selma. Also working with student support and course administration



Helene Johansson. PhD in Public Health. Research fellow. Director of studies for the Master's programme in Working life and Health. Research areas: risk communication, community health promotion, prevention, implementation, collaboration/integration. Teaching subjects: health, health promotion, prevention, working life and health, qualitative methodology. Supervision of students at the master's and PhD level.



Karin Johansson. Administrative coordinator. Responsible for departmental and staff administration.



Klara Johansson. PhD, research fellow in epidemiology and public health. Research on social inequalities of health, primarily child and adolescent health; currently working on how unemployment of parents is

related to mental health of adolescents. In 2021 started a partnership with Region Västerbotten about evaluation of social differences in health in the region.



Frida Jonsson. Research fellow with a PhD in Public Health. Conducts research with a focus on theory driven evaluations of complex interventions that centres largely on how access to and experiences of health and social care can be improved for marginalised groups, especially youth and elderly.



Håkan Jonsson. Statistician, associate professor and docent in cancer epidemiology. Research areas are early cancer detection/screening and register based epidemiology. Principal investigator for projects related to mammography screening with focus on effectiveness, overdiagnosis, tumour characteristics and treatment.



Ulrika Järholm. Department administrator. Working with web and communication, research courses, PhD administration and project administration



Evelina Liliequist. Senior research assistant with a PhD in Ethnology. She is also an affiliated researcher at Humlab, Umeå University and affiliated researcher in the research cluster TechnAct, Gothenburg University. Currently works with a qualitative interview study, which is carried out on behalf of the Public Health Agency of Sweden. The aim of the report is to gain a deeper understanding of the health and living conditions of LGBTQ people over 65 years old. Other research interests revolves around digital ethnography, space and place, and qualitative methods and ethics



Anette Edin-Liljegren. Adjunct senior lecturer with a PhD in medicine. Her research is in nursing, public and rural health, more specifically about new models for access to health care with support from technology, from the perspectives of patients, next of kin and professionals'. She is also doing research about health and physical and psychosocial risk factors in the Reindeer herding Sami's working environment. Research strategist/coordinator, Centre for Rural Medicine, and R & E manager in Southern Lapland, Region Västerbotten.



Ida Linander. PhD in public health and research fellow, MD. Does qualitative research about LGBTQ people's experiences of health and healthcare and also about broader issues of gender, sexual health and healthcare systems.



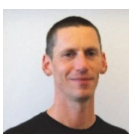
Lars Lindholm. Professor in Health economics. Studies on equity in health economic evaluation and the use of epidemiological data in the distribution of health care resources.



Marie Lindkvist. Director of Studies at the Department. Associate professor in Epidemiology and Biostatistics, PhD in Statistics and B.Sc in Mathematics. Appointed as Distinguished teacher in Umeå University's pedagogical qualification model. Lecturer in biostatistics and statistical consultant. Responsible for statistical considerations and analyses in the Salut child health intervention programme in Västerbotten



Kristina Lindvall. Researcher, Dietitian, master in Food and Nutrition, PhD in Public Health. Associate Professor in Public health. Conducting research on Complex interventions and their implementation (in Västerbotten, Sweden and Upstate New York), Weight maintenance (in Västerbotten, Sweden and Upstate New York, US), Risk communication within CVD. Also engaged in an interdisciplinary research program investigating the links between health, livestock-based livelihoods, human well-being, and land management and governance in Uganda and Kenya.



Wolfgang Lohr. Medical data manager, involved in different research projects.



Curt Löfgren. Associate Professor (senior consultant). Lecturing and research in health economics. Presently involved in developing tools for the economic evaluation of interventions aiming at improving lives for socially disadvantaged children and adolescents.



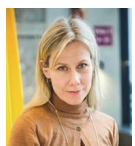
Göran Lönnberg. Statistician, data scientist, research assistant, involved in different research projects.



Kaspar Meili. PhD student in health economics, working on CALYs - Capability-Adjusted Life Years. CALYs are based on Sen's capability approach and can be used in similarly to QALY, for example in economic evaluations. CALYs aim to measure quality of life in terms of accessible capabilities, giving individuals freedom how to realize their lives.



Paola Mosquera Mendez. Psychologist, MSc, PhD. Researcher. Her research focuses on the evaluation of public health policies, the measurement and explanation of health inequalities and the application of an equity lens to public health interventions. She is currently leading a research project exploring how to apply a life course approach to analyze socio economic inequalities in cardiovascular health and another one evaluating the effects of the primary care choice reform on population health and socioeconomic inequalities in health in Sweden.



Anna Månsdotter. Associate professor in public health. Working at the Public Health Agency of Sweden (governmental assignments and scientific support). Research and teaching on public health, economics/ethics, and gender equality.



Fredinah Namatovu. Senior Lecturer; PhD in Epidemiology and Public Health. Also affiliated with CEDAR (Centre for Demographic and Ageing Research) at Umeå University. Her main research focuses on gender-based violence, reproductive health, disability, and population ageing in Sweden and in Sub-Saharan Africa. She is the research leader for two ongoing research projects at Umeå university: i) the DIS-IPV project, studying how to strengthen service provision for people with disabilities that experience intimate-partner violence in Sweden, 2019-2024, funded by Forte; and ii) the RESPOND project – a project aimed at rethinking access and utilization of reproductive healthcare, and domestic violence services among women with disabilities in Uganda, funded by the Swedish research council, 2023-2026.



Nawi Ng. Visiting Professor of Epidemiology and Global Health. His research interests are ageing and disability, chronic non-communicable disease, behavioural change intervention and implementation research. Lead two research projects at UmU: (i) a multidisciplinary research programme on digital coaching for behaviour change in Västerbotten County (Forte Programme, 2018-2024); and (ii)

implementation research for integrating tuberculosis, diabetes mellitus and smoking prevention programme in India and Indonesia (VR Research Link, 2019-2023).



Lena Maria Nilsson. Project coordinator with a PhD in Public Health. Part of the research group *Lávvuo* at EpiGH focusing on Sámi health. Currently works together with Petter Stoor and Miguel San Sebastian on the reporting of the Sámi Health on Equal Terms (SámiHET) survey, and with the Covid in the Arctic project. Expect funding during 2023 for a project on traditional food in elderly care in Sápmi and India in a collaboration project with India and in collaboration with SLU Uppsala.



Maria Nilsson. Professor in public health; social scientist with a PhD in epidemiology and public health sciences. Her main focus is climate change and health, with specific interest in adaptation, policy, communication and vulnerable populations. She also has an interest in research on tobacco control and prevention. Affiliated to the Public health unit, Region Västerbotten.



Faustine Nkulu Kalengayi. MD, MPH, PhD. Research fellow. Research on Migrant health and access to health care services. Collaborative research with the Public Health Agency of Sweden on HIV/STIs and migrants' sexual and reproductive health and rights.



Margareta Norberg. Docent, MD, PhD in Family Medicine and Epidemiology. Long term experience of population wide clinical prevention of cardiovascular diseases (CVD) within the Västerbotten Intervention Programme (VIP). Research focused on prevention of CVD, currently Co-PI for VIPVIZA, a pragmatic randomised controlled trial nested in the VIP, ClinicalTrials.gov, NCT 01849575. Affiliated also to the Dep of Public Health and Clinical Medicine.



Fredrik Norström. Docent in Epidemiology and Biostatistics and Associate Professor in Health Economics. Principal investigator for the research projects Is better public health worth the price? - A health economic evaluation of increased staffing in home care and Covid-19 and home care: a high price for new lessons learned. Research interests are: i) health economic modelling, ii) unemployment and health, iii) work environment and health, iv) development of statistical methodology within epidemiology and public health, and v) celiac disease.



Lennarth Nyström. Associate Professor in epidemiology, Senior consultant. Research focus on evaluation of the effectiveness of mammography screening in Sweden, effectiveness of treatment of hypertension in Västerbotten and efficacy of health coaching to promote healthier lifestyle among older people at moderate risk of cardiovascular disease, diabetes and depression in Sweden. Other research includes medical adherence to endocrine treatment for breast cancer in Sweden, epidemiological studies of hip fractures and hip arthroplasty in Umeå



Monica Nyström. Associate professor in Medical management, organisation, and innovation. Leads the FORTE project LST-STRATEGY – Strategies for large system transformations in a decentralized healthcare system and the Vinnova financed projects “Develop the developers of the future!”, “Innovative development in the North - New forms for supporting innovative development in large healthcare organizations”, and the SALAR funded “FK-Hälsa Works part time at Umeå University with her main employment at Medical Management Centre, Department LIME, at Karolinska Institutet where she is a research group leader for the SOLIID-group.



Anne Ouma. PhD in medical geography, MSc. environmental science. Main areas of interest; Sustainable development goals in global health and wellbeing with specific interest in Community, vulnerable groups, primary health care & health policy action research and capacity building. Affiliated to the Centre of Sami Research CESUM and Centre for Rural Medicine - Region Västerbotten-GMC. Ended her employment February 28, 2022.



Solveig Petersen. PhD in Pediatrics, Associate Professor in Epidemiology and Public Health. Ongoing research target: epidemiology, measurement methodology and prevention in the fields of mental health, health related quality of life, recurrent pain and overweight in children and adolescents. Principal investigator of the Study of Health in school-children from Umeå (the SISU project). Also holds an analyst position at the Public Health Agency of Sweden, unit of Mental Health and Suicide prevention. Honorary Associate Professor at Deakin University, Australia.



Raman Preet. A Dental and Public Health Professional, Research Coordinator and Manager, and Equal Opportunity Officer. Working as Project coordinator of EU H2020 funded

Project ZikaPLAN (25 beneficiaries with 11.5 M Euro grant) hosted at the Department. Vast experience in providing strategic guidance on pre- and post-award preparations of EU funded health research projects and their implementation. In conjunction, teaches global health and lectures on various topics especially sustainable development goals, global oral health inequalities, and communication and collaboration in public health research projects.



Anni-Maria Brännström.

Associate professor in health economics, docent in global health. Research on multisectoral health promotion and prevention interventions from health economic and health equity perspectives. Project leader for KAMSO: decision support for interventions against social exclusion. Teaching health economic theory e.g., provider payment.



Karl-Erik Renhorn. Research coordinator. Provides information, advice and support in relation to external funding to the researchers at Epidemiology and Global Health. Also assists researchers in the development of grant proposals and the management of research projects. Teaches on and co-ordinates the postgraduate course “How to write grant applications”, and co-ordinates the thesis courses of our Master’s programmes. Also affiliated with Umeå University’s research Support Office.



Linda Richter Sundberg. Research fellow, PhD public health MSc Psychology. Health systems researcher with focus on policymaking and implementation processes in health systems. Ongoing research on e-health

innovations for behavior change and accessibility of mental health services in the health system. Teaches evidence-based policymaking, evaluation in public health and qualitative research methods. Coordinator of the Network of implementation research and practice in health and social services.



Arian Rostami. I am a doctoral student at the Department of Epidemiology and Global Health. Also affiliated with the Police Education Unit and the Umeå Centre for Gender Studies (UCGS). My doctoral project is on work-related stress, gender-based and sexual harassment, and job satisfaction among police officers working in vulnerable areas in Stockholm. Both qualitative and quantitative approaches are applied to conduct this project. The focus of the quantitative phase is on work-related stress, gender-based and sexual harassment, and job satisfaction in police officers. In addition, in the

qualitative phase, gender-based and sexual harassment is explored in police officers to depict a broader picture of the problem and deepen our obtained quantitative findings.



Klas-Göran Sahlén. R.N, PhD. Associate Professor and deputy head of the department. Studies in the area of aging, prevention and health economics. Lecturer in health economics, ethics and qualitative methods. Responsible for the software Open Code. Research in Vietnam and Tanzania linked to PhD projects. Part of the Somali-Swedish network and course director for the training in Somalia. Coordinator for Nordplus project Nordic Network for Global Health.



Miguel San Sebastián. Professor in public health; Medical Doctor with a MSc degree in control of infectious diseases and a PhD degree in environmental epidemiology. He practiced public health during 12

years among indigenous communities of the Amazon basin of Ecuador. Currently working as Professor teaching different courses at Master and PhD level. His current research is focused on strengthening health systems in low income countries and social inequalities in health in the Swedish context. He is also the health research leader at Várdduo-Center for Sámi Research.



Eva Selin. Study administrator and Study counselor of the Public health programme. Working with student support and course administration.



Julia Schröders. Postdoctoral fellow also affiliated to the Dept. of Sociology and CEDAR. Training in medical anthropology (MA) and epidemiology & public health (MSc & PhD). Interested in social network theory/analysis and the construction of social and health vulnerabilities across the adult life course in both Sweden/Europe and low- and middle-income countries with ongoing work in Indonesia, Nepal, and Somalia. Teaching basic and advanced methods in epidemiology and social theories for global health. Editor for Global Health Action; facilitator for the research space ‘Emerging Global Health Challenges’.



Oscar Sedholm. Project assistant for the research group Lávvuo - Research and education on Sámi Health. Focused on researching the COVID-19 pandemic’s effects on Sámi society in Sweden, as part of the international ARCTIC-COV research project financed by the Arctic Council and the Sustainable Development Working Group (SDWG). Ended his employment May 31, 2022.



André Sjöberg. Doctoral Student at the Department of Epidemiology and Global Health focusing on health economics and outcomes research. His doctoral thesis is based on a randomized controlled trial evaluating the effect, cost-effectiveness, and implementation of Everyday Life Rehabilitation (ELR), which is a recovery- and activity-oriented rehabilitation program for persons with extensive psychiatric disabilities living in supported housing facilities.



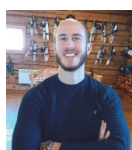
Jon Petter Stoor. Psychologist, PhD in Health Sciences, postdoc. Main tasks include coordinating the Sámi health research group *Lávuvuo* at EpiGH, carrying out the Forte-funded postdoc on Sámi youth health, and during autumn 2022 running the first course on Sámi health issues at Swedish Universities (Sámi and Indigenous Health, 7.5 ECTS). Commissioner in the Lancet Commission on Arctic Health, the Lancet Commission on Suicide and Self-harm, and member of the Global Collective for Indigenous Adolescent Health and Evidence-Based Action. Part time position (20%) at the Centre for Sámi Health Research at UiT in Tromsø, Norway.



Sun Sun. Research Fellow, PhD in Health Economics. Member at EuroQol Group and ISPORE. Works in the field of health outcomes research and health economics, specialized in patient-reported outcomes and real-world evidence. Teaching and supervision for Master students and PhD students.



Moses Tetui. Associate professor at the department of Epidemiology and Global Health and a Postdoctoral researcher at the University of Waterloo, Canada. Moses is a Health Systems Scholar, his current research works include building confidence in Covid-19 vaccines in Canada by engaging with diverse stakeholders such as Public Health authorities, community members and a multidisciplinary research team. And examining the impact of COVID-19 on livelihoods of women living in urban informal settlements in Uganda. His other research works include, advancing community health systems, contraceptive use in urban informal settlements, access to maternal and neonatal health services, health managers capacity development and knowledge translation. He is motivated by a desire to make health systems Inclusive, Socially Accountable and Resilient.



Thomas Vogt. Project Assistant working on the determinants of social-emotional problems in children of 3 years of age in Västerbotten. Ended his employment October 28, 2022.



Stig Wall. Professor Emeritus of epidemiology and health care research. Epidemiologist with a social science background. Research on epidemiology and international health, environmental and social epidemiology, prevention and medical technology assessment.



Susanne Walther. Financial administrator. Working with budget and departmental administration. Also involved in the project on celiac disease.



Masoud Vaezghasemi. PhD in Epidemiology and Public Health. Current research focuses on social-emotional health among preschool children in Northern Sweden. His research interest lies within social and contextual determinants of health and health inequalities. Also interested in the double burden of malnutrition in Low- and Middle-Income Countries.



Lars Weinehall. Senior Professor in Epidemiology and Family Medicine. Was 1985-2007 the coordinator of development and countrywide implementation of one of the world's largest ongoing population-based intervention program for the prevention of cardiovascular diseases (CVD) and diabetes, the Västerbotten Intervention Program (VIP). Research on analysis of the role of primary care in population-oriented prevention and supervised a number of PhD students both from Sweden, the US, Indonesia and Vietnam.



Anna Westerlund. Post doc. PhD. MSc in work- and organizational psychology. Currently her research is focused on knowledge governance and implementation processes in healthcare and social services.



Malin Öhring Doctoral student, MSc in Public health and Nursing. Working in research project concerning work environment in home care, with special focus on possible effects of the covid-19 pandemic. Main research interests are occupational health and work environment.

Finances

The total revenues for this year amounted to 60,7 MSEK, out of which approximately 61% originated from sources external to the University (Figure 2). Our main activities, i.e., education and research, are reflected in the budget. Both are key activities in our daily work, although research activities are the

largest component (Table 1). This year revenues were higher than the costs in research, but in education we had a small deficit. We had planned for an overall deficit but due to less activities and more revenues, we ended up with a result with a net profit of 563T SEK (Table 1).

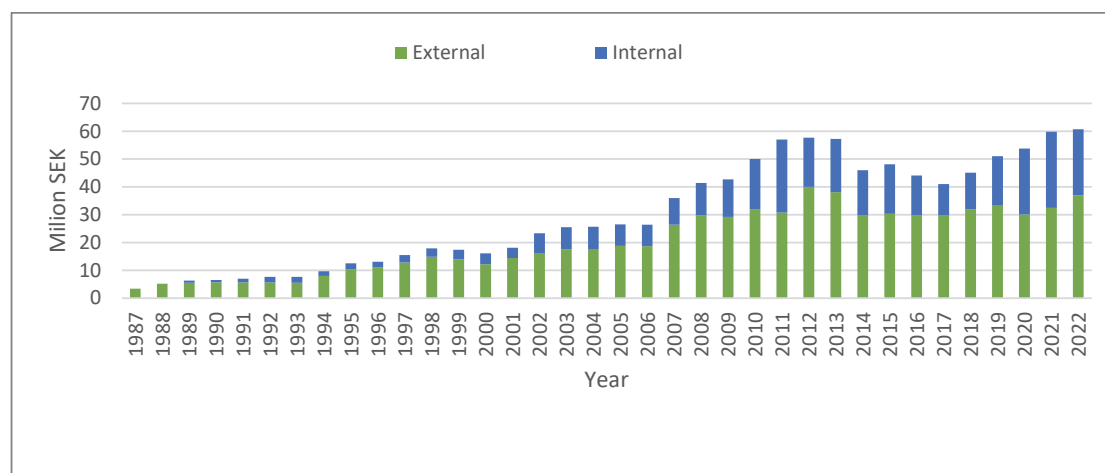


Figure 2. Annual income, EpiGH 1987-2022, showing internal and external funding.

Table 1. Revenues and costs.

Profit and Loss			
Faculty of Medicine			
3850 Epidemiologi och global hälsa			
	Department	Education	Research
	Outcome (tkr)	Outcome (tkr)	Outcome (tkr)
	2022-01	2022-01	2022-01
	- 2022-12	- 2022-12	- 2022-12
Revenues			
Government Grants	21 295	7 076	14 220
Co-financing	326	0	326
External Grants	20 943	-509	21 452
Commissioned Grants/Student fees	15 496	5 497	9 999
Accrued external grants	562	507	55
Sales Revenues	2 078	7	2 071
Other Revenue	15	0	15
Total	60 715	12 578	48 137
Costs			
Personnel Costs (Wages and salaries)	-40 346	-8 078	-32 268
Other personnel costs	-617	-118	-499
Premises costs	-763	-208	-555
Operating costs	-9 223	-2 038	-7 185
Overhead UGEM	-7 516	-1 977	-5 539
Overhead FGEM	-1 573	-521	-1 052
Overhead IGEM	0	0	0
Financial costs	-32	-7	-25
Depreciation	-84	0	-84
Funds for transfers	6 058	2 854	3 203
Funds for transfers	-6 058	-2 854	-3 203
Total	-60 152	-12 946	-47 206
Annual result			
Result	563	-368	931
Total	563	-368	931

Our education income amounted to 12,5M SEK, out of which 7.0 MSEK was support via governmental grants to our MPH programmes and now also for our ALOHA programme. The other dominating source was tuition fees (Table 1). A few students paid these out-of-pocket, but the majority

were awarded scholarships from different sources: *Erling-Persson foundation*, the *Swedish Institute*, and *Umeå University Scholarship*. Figure 3 shows that EpiGH is continue having the highest number of student fees within the Medical Faculty.

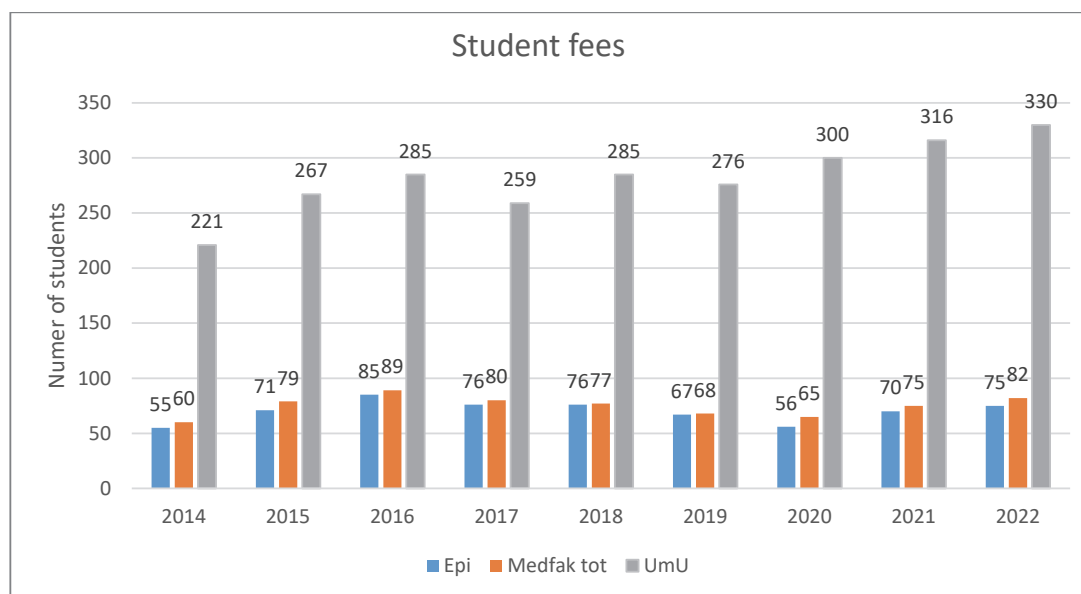


Figure 3. Fee paying students, EpiGH, Medical Faculty, University, 2014-2022.

However, as in previous years a major part of research funding 61% in 2022 was from external sources comprising both grants and contracts.

Our external revenues for commissioned research have been increasing year after year, (Table 1). One significant reason for this is the many contracts we have with the Swedish Public Health Agency and the Sami Parliament of Sweden. The Largest contributor (56%) for external grants continues being FORTE-Swedish Research Council for Health, Working Life and Welfare. Other benefactors are the VR-Swedish Research Council and SIDA-Swedish International Development Agency (See Figure 4).

Our education outcome had a small deficit of -368 TSEK this year, an excellent result because we are showing that we are using the funds that we get (Table 1). The result for research was 931 T SEK, next year our focus will be to have a deficit and not a profit. It is uncertain times, and it is key to have focus on our finance during 2023.

In the year 2022, our annual income has never been higher since 1987 the beginning of EpiGH (Figure 2). We saw this already last year and are hopeful that this trend will continue in 2023 (see Figure 5).

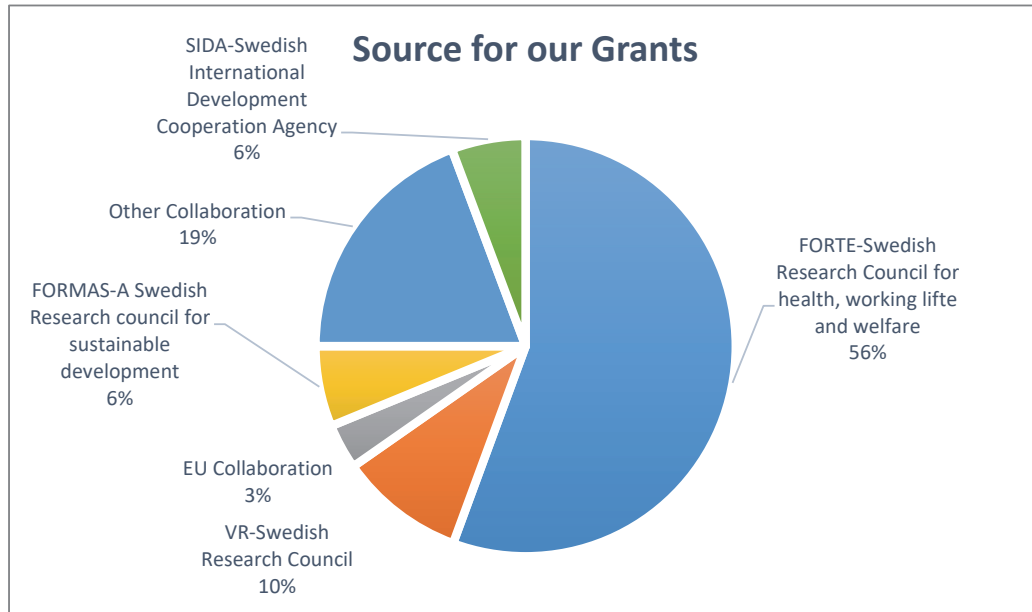


Figure 4. Main grant sources, EpiGH, 2022.

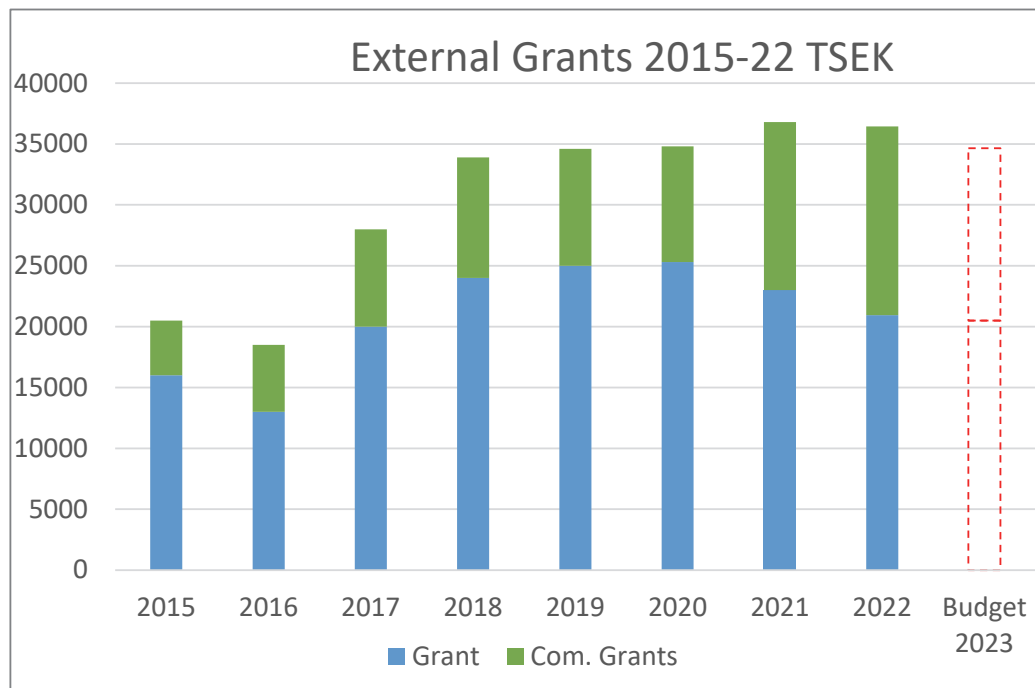


Figure 5. Incoming grants, EpiGH, 2015-2022.

Outputs

There are no measures that can fully evaluate our activities. However, one outcome criterion is the number of publications (Figure 6). The ups and downs of the curve result reflect the processes leading up to a publication, i.e. from a research idea over project planning, data collection, and analysis, and ultimately to the measurable outcome - the published paper.

In 2022 five PhD students successfully finalised their studies (Figure 7). At the end

of 2022, 37 PhD students were associated with our Department, including five new students registered during the year.

The Medical Faculty budget model uses three parameters for the assessment of productivity: publications, PhD exams, and external grants. Each department is given a budget, based partly on this assessment system. EpiGH has been increasingly competitive in this regard.

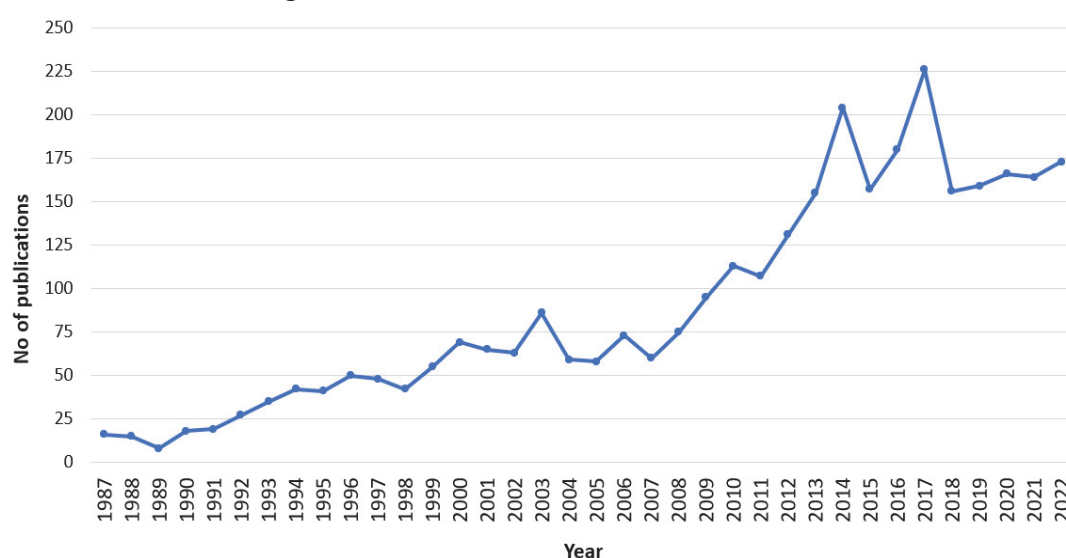


Figure 6. International peer reviewed publications by EpiGH members, 1986-2022 (registered in the publication database DiVA).

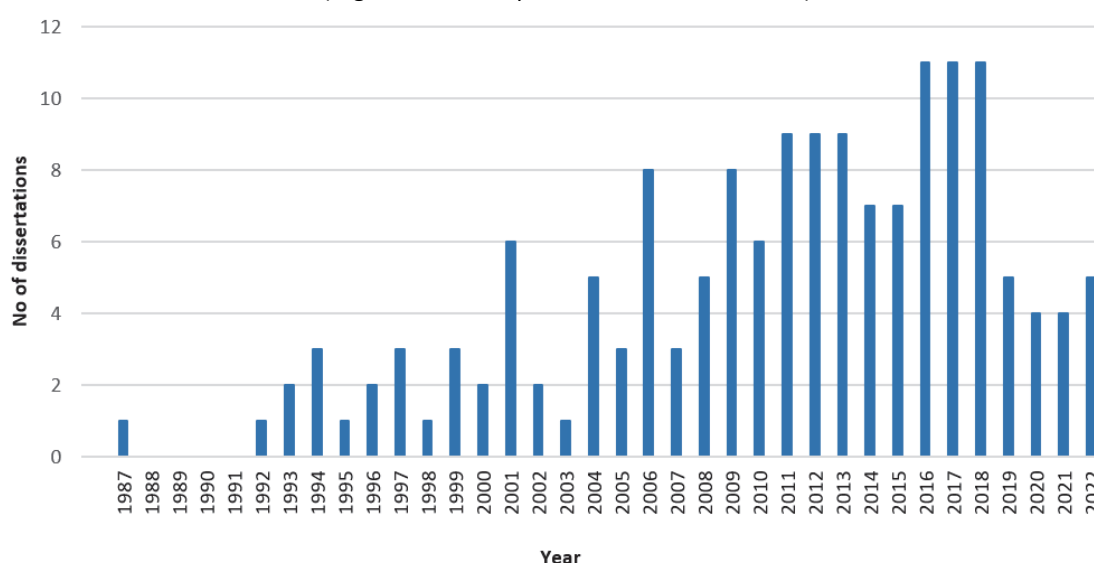


Figure 7. EpiGH, doctoral dissertations, 1987-2022.

Highlights of the year

Travels and meetings during the year

We present in this section some of the activities and visits carried out during the year. There were many more, equally important, but these will give you a flavour of our diversity in research interests and collaborations.

Travel to Colombia to attend HSR 2022 meeting

During October and November 2022, I had the opportunity to attend the emerging voices for global health (EV4GH) which was held in conjunction with the seventh global symposium on health system research (HSR2022). I spent around two weeks in Medellin in the national school of public health (Hector Abad Gomez) and then moved to Bogota to attend the HSR2022.

The EV4GH was initiated 2010 by the Institute of Tropical Medicine, Antwerp and was held just before the Health System Global Symposium every two years. The EV4GH gather around 40 young researchers, mainly from low- and middle-income countries, every two years with the main objective of 1) enabling young researcher to take active part of the Global Health System Symposium by providing them capacity building and- blended training program and to 2) building a network and a community of alumni to keep

engaging in the global health system debates. Since 2015, EV4GH is a thematic working group in the Health System Global and had an independent governance body of elected alumni that is supported by various public health institutions around the world.

Although, in my opinion, this year's program in its both parts, the online and the face to face, failed to provide a meaningful and engaging capacity building or training sessions, the program was an opportunity to create new networks and get critical friends. It was an opportunity to get to know not only their research interests but also their cultures and their traditional dances! Not to forget, having lots of fun together. It was also insightful to engage, throughout the program, with the local communities and learn about the history and the health system of Colombia.

I trust that the feedback that the feedback the governance board of the EV4GH will further improve the program in its next versions and will be able to achieve its both objectives.

All in all, the experience was worth trying and highly recommended.

Mazen Baroudi



Arctic medicine, music and meetings in Nuuk, Greenland

In early October Lena Maria Nilsson attended the eleventh Nunamed conference in Nuuk, Greenland, where she presented the Sámi Health on Equal Terms (SámiHET study) from a methodology and implementation perspective. From having originally been locally focused on Greenlandic medicine, the Nunamed conference has grown into a meeting place for health researchers from the entire Arctic region. This included many of the participants of the UArctic thematic network on health and wellbeing in the Arctic, who

gathered in a side-meeting. Another side-meeting was related to the research group on Covid in the Arctic.

- Compared to other conferences I have attended, this was the one with most music included both performances and sing-along (in Swedish “allsång”), says Lena Maria.

Keynote speakers and musical events from the NUNAMED conference are available at <https://www.youtube.com/watch?v=IjUhuCAQr3A>.

Lena Maria Nilsson

Lávvo presented results from the SámiHET to the Sámi Parliament

Monday October 24 the Lávvo research group presented preliminary results from the SámiHET study to the delegates of the Sámi parliament, who were in Skellefteå to attend an assembly meeting during the forthcoming days. The SámiHET study has been carried out in dialogue with the Sámi

parliament since the very start of it. However, during the project time, the political majority of the Sámi Parliament has shifted, why a continuous dialogue is important. The new majority had many interesting reflections on the preliminary results and showed their support to the work carried out by Lávvo. In February 2023 the final results and report will be published and available to the public.



From the left, Jon Petter Stoor, Lena Maria Nilsson, Daniel Holst (president of the Sámi Parliament in Sweden), Sofia Kling (coordinator of the Network for Sámi health within the northernmost regions of Sweden), Jennie Brandén, Monica Burman, Elina Hansegård (specialist psychologist, Region Norrbotten).

Community Health Systems-Connect, network meeting in Arusha, Tanzania 2-7 May, 2022

More than 30 researchers from Schools of Public Health at University of Zambia, University of Western Cape, Makerere University in Uganda, Muhimbili University of Health and Allied Sciences, Tanzania (MUHAS) and Umeå University met in Arusha 2-7 May.

The purpose of this network is to enhance research capacity and competence for designing and conducting “embedded”

health policy and systems research in order to build inclusive, socially accountable and resilient community health systems (CHS).

During the workshop we learnt about the Tanzanian health systems, and shared lessons from our different contexts. Rich discussions on priorities, future and ongoing research filled the days. After two years of on-line meetings the opportunities to catch up and enjoy the beauty of the northern Tanzania was much appreciated. We thank our hosts for a wonderful week.



Working meeting in Lisbon 5-6th of April 2022 for the Rural NEET youth network

By facing challenges in their school-to-work transition, young people who are not in employment, education, or training (NEET) constitute a marginalised and vulnerable group, especially if living in rural. [COST Action CA18213: Rural NEET youth network](#) is a European-led multidisciplinary network that aims to develop a model of comprehension for rural NEETs' social exclusion risk and protective factors. It has the specific goals of i) upholding future research capability on the topic, ii) creating a rural NEETs' online observatory, and iii) fostering knowledge exchange by policy makers and practitioners. The network is organised into five working groups dedicated to: social networks and social inclusion; formal and non-formal education; employment services and employment in rural areas; rural NEETs and sustainability; and a meta WG of risk and protective factors. It includes over 100 academic and non-academic members with different degrees of seniority from 29 European countries.

Frida Jonsson, research fellow at the department, is the only representative from Sweden in the group. She is engaged in the working group about social networks and inclusion in rural areas among NEET young people.

The working groups meet virtually once a month and so far, the network has produced a policy brief on Youth and Mobility in EU Rural Areas, a manual for the classification of intervention best-practices with rural NEETs, national reports about Rural NEETs across Europe, and three special issues: "European Rural NEETs: A Snapshot" in *Youth & Society*, "Strategies, policies, programs and projects for youth rural NEETs" in the *Quality of Life journal* and "Lessons on Building More Sustainable Rural Societies: Youth and Mobility" in *Sustainability*.

In April 2022, the network met during two days for a one-day conference and a day of plenary meeting in the working groups to plan upcoming deliverables and discuss the outline of the observatory, which comprise the main output of the COST action.

Frida Jonsson



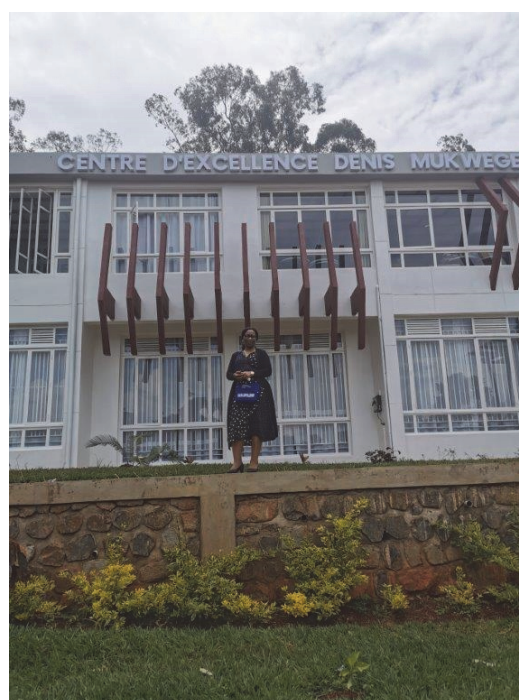
My trip to a fragile context: opportunities in a challenging setting

Due to security issues, the Swedish Ministry of Foreign Affairs advises against non-essential travels to the Democratic Republic of Congo (DRC) and all travel to the provinces of North and South Kivu, except the provincial capitals Goma and Bukavu. It is under these circumstances that I travelled to the conflicted region of Kivu in the DRC during the first week of November 2022 to represent Umeå University at the 2nd Congress of the International Mukwege Chair. This Chair is a network of universities that awarded the 2018 Nobel Peace Prize to doctor Denis Mukwege, an honorary doctorate (*honoris causa*). Umeå is one of the partner universities represented in this network by our Department. The main goal of this network is to build an international and interdisciplinary research network on sexual violence against women and girls in conflict settings for a better understanding of this issue and related response in DRC and the African Great Lakes region. This network is working in collaboration, among others, with the Evangelical University Africa (EUA), the Panzi hospital and local non-governmental organizations. Umeå University was represented by Professor Isabel Goicolea in the International Mukwege Chair until December 14, 2021 when I was appointed as the new representative. But my involvement started in 2019, when I represented Isabel Goicolea at the 1st Congress in Liège in Belgium. The 2nd Congress took place in November 2022 at EUA in Bukavu, the capital of the South Kivu Province. The theme of the Congress was “reparation for victims of sexual and gender-based violence”.

Despite being a native of the DRC, I had mixed feelings about travelling there because of the ongoing armed conflict between the Congolese army and the 23 March Movement (M23) rebels in the neighboring North Kivu Province. Contrary to media reports, the city seemed to be quiet and peaceful on arrival. It was such a big surprise to see delegates from around the world at the opening event. But, on the second day, there was a peaceful demonstration due to fear and anger that the M23 rebels were getting closer

to the South Kivu region as they seized two strategic towns in North Kivu Province. We were requested to leave the hotels earlier than usual to be at the Congress site before the demonstration starts to avoid chaos and disorder that could be created during the demonstration. When the conference ended, I was anxious to spend one more night in Bukavu due to increasing tensions. When I left, the United Nations and other organizations started a partial evacuation of their staff from Bukavu. After crossing the Ruzizi river between Rwanda and DRC, I could breathe. Nevertheless, I also experienced positive things. This trip gave me opportunity to get an overview of research within the field of gender-based violence in conflict settings, discuss future collaboration with local authorities at the EUA and witness the launch of the Mukwege Centre of Excellence at EUA. So, it was worthwhile going there because the good things outweigh the bad.

Faustine Nkulu Kalengayi



Community health workers: workshop in Bolivia

During the 1980s, CHWs were considered a cornerstone for primary health care, as envisioned by the Alma Ata Declaration, but its importance declined in the late 1990s with a changing focus on alternative vertical programs and service delivery models as well as with the implementation of health reforms focused on privatization and efficiency.

Despite these renewed interest in CHW programs in those regions, health systems reforms implemented in Latin America since the late 1990s marginalized or totally abandoned (probably with the exception of Brazil) CHWs as key actors within the primary health care system of the region.

In 2021 I received a Swedish Research link project to explore this paradoxical trend,

where Latin America became an example to the world during the 1980s and 1990s in prioritizing CHW programs to leave them fall apart, in the countries of Bolivia and Ecuador.

In October 2022 we did a first workshop of the project in Cochabamba, Bolivia, having as host Daniel Eid, ex PhD student from our Department and with the support of another ex PhD, Lorena Ruano. Different experiences of CHWs' models from both countries were presented and their challenges for capacity building, organization and sustainability discussed. Plans for writing two health systems related articles and for better systematize some of the CHWs models were decided. Next workshop is planned to be in Ecuador in 2023.

Miguel San Sebastian



A walk with South Africans along the Vindeln River, northern Sweden

In September 2022, Masoud Vaezghasemi, research fellow at EpiGH, and Maquines Odhiambo Sewe, researcher at the Department of Public Health and Clinical Medicine hosted a group of four researchers from two South African Universities. Dr. Fezile Wagner and Associate Professor Wayne Twine from the University of the Witwatersrand, together with Professor Rina Swart and Dr. Nazeeia Sayed from the University of Western Cape. This collaborative research project (title: The Effect of Climate Change and Ultra-Processed Foods on The Double Burden of Malnutrition) was funded by the South Africa Sweden University Forum (SASUF) with Masoud Vaezghasemi as the Swedish principal investigator.

The meeting enabled researchers to plan for future collaborations, including identification of potential sub-studies and funding opportunities. The visit also enabled interaction between South African researchers and other researcher from the

EpiGH, postdoc Julia Schröders as well as researchers from the Swedish University of Agricultural Sciences (SLU), who had not previously met. Opportunities for further collaboration including SLU were discussed together with Dr. Aida Bargues Tobeella from the Department of Forest Ecology and Management.

The project has laid a solid foundation for further collaboration between Swedish and South African partners in interdisciplinary research on the nexus of nutrition and climate change. In addition to strengthening Sweden-South Africa partnerships, the project also strengthened collaboration between the South African institutional partners. A tangible outcome from this collaboration was the submission of a SASUF Virtual Exchange Grant proposal titled “Nourishing South Africans Sustainably” by members of our consortium in November 2022.

The four-day productive research visit ended up with a full-day meeting at Wallhalla Bed & Breakfast in Vännfors, Västerbotten and a walk along the Vindeln River.

Masoud Vaezghasemi



Visitors from Nepal and Indonesia: SNI-LINKS brings old and new collaborators to EpiGH

During 2022, the first SNI-LINKS network meetings took place, which brought new and old collaborators back to EpiGH. Between 16-18 May partners from HERD International, Kathmandu, Nepal, visited EpiGH: Dr. Lal Mani Adhikari and Sundip Gurung (2010' UISPH alumnus). The Indonesian partners A/Prof. Fatwa Sari Tetra Dewi (2013' EpiGH PhD graduate) and Dr. Tony Arjuna from Gadjah Mada University, Yogyakarta visited EpiGH one month later, 13-15 June. Both meetings focused on identifying and planning for future funding opportunities to expand SNI-LINKS in both scope and country coverage. Partners also prepared for workshops and formative research studies in both countries

during 2022/23. SNI-LINKS has also revived the exchange of students from Umeå University to Gadjah Mada University and so far, enabled two medical students from Umeå University to conduct their T10 research projects in Yogyakarta.

The VR-funded research links project, SNI-LINKS, brings together Swedish, Nepalese, and Indonesian partners to work on the design of social network interventions. The project takes a dual perspective on malnutrition and tuberculosis and re-reads issues of food- and healthcare insecurities through a social network lens <https://www.umu.se/en/research/projects/developing-social-network-interventions-in-nepal-and-indonesia-the-sni-links-network/> EpiGH's Julia Schröders (PI), Anna-Karin Hurtig, and Masoud Vaezghasemi represent the Swedish SNI-LINKS partners.

Julia Schröders



Masoud Vaezghasemi, Julia Schröders, Sundip Gurung, Anna-Karin Hurtig, Miguel San Sebastian, Lal Mani Adhikari. Project dinner at Gotthards Krog.



Masoud Vaezghasemi, Tony Arjuna, Arvid Burefors (T10 medical student), Julia Schröders and Fatwa Sari Tetra Dewi. Project lunch at Hotel Björken.

Drylands Transform

The Department of Epidemiology and Global Health is engaged in an interdisciplinary project called Drylands Transform ([Drylands Transform | Externwebben \(slu.se\)](#)), that is led by Swedish University of Agricultural Sciences (SLU) Uppsala and running between the years 2020-2024. The project aim is to investigate the links between land health, livestock-based livelihoods, human well-being, and land management and governance in Kenya and Uganda. It also aims at contributing with new knowledge for transformative change and sustainable development of rangelands in the border region between the two countries. The project is carried out in close collaboration between six universities in Uganda, Kenya and Sweden, international and inter-governmental organisations, rural communities, local authorities and other stakeholders at local and regional level.

As a part of this project, one baseline survey was conducted in June 2022 in 944 households at the four sites (two in Kenya and two in Uganda [Dry, drier, driest: linking up with local actors in Karamoja region during site selection for Drylands Transform | Externwebben \(slu.se\)](#)). The survey was aimed at understanding the distribution of-, and association between: livelihood strategies/livelihood systems, food security, dietary diversity, undernutrition (child and maternal), infant/child mortality, health and wellbeing, migration patterns, shocks and crises at the four study sites. A follow up survey will be conducted in the spring of 2023.

Another part of the project is the initiation of kitchen gardens and livestock cafés which has been implemented mainly during 2022.

Kristina Lindvall



Training of enumerators working with the household survey in the four sites in Moroto, Uganda, May 2022.



Training of enumerators in taking anthropometric measurements, Moroto, Uganda, May 2022.



Pilot of the household survey, Moroto, Uganda, May 2022.

Country coordinator and project member Stephen Mureithi University of Nairobi, Ylva Nyberg SLU, Uppsala, and Kristina Lindvall visiting one of the livestock cafés and kitchen gardens in Kenya in November 2022.



Enumerator having a short break before anthropometric measurements of the index child and mother in the household survey, Moroto, June 2022.



Plants growing in kitchen garden using innovative ways of gardening in the drylands, Kenya, November 2022.

Department Day

The Department Day was organized by Karin Johansson, Hanna Blåhed, Laila Daerga, Ida Linander, Maria Lindkvist and Isabel Goicolea. We discussed decolonization, especially in relation to public health and our work at the Department.

We started the day with an introduction on the concept with Kristina Sehlin Macneil, from Várdduo - Centre for Sami Research & Faculty of Arts Doctoral College, Umeå University. Kristina reflected on what decolonization is, the roots of the concept, and why it is needed. Building upon Kristina's presentations we discussed in groups around how decolonization affects us, in research, teaching and work/study environment, and how we can think about it in relation to global health.

In the afternoon we listened to two presentations from Helen Schneider, from the School of Public Health, University of the Western Cape, South Africa, and Petter Stoor, Lávvuo-Research and education for Sámi health, Department of Epidemiology and Global Health, Umeå University. They discussed upon experiences of working with decolonization in the field of public health in two different contexts: South Africa and Sweden. We continued with group discussions afterwards, reflecting on how we could include decolonization within the work we do in the Department, what we would need to do it, and the obstacles and opportunities we perceived. We ended up proposing strategies that we could implement:

- Teaching: revise course literature, have a session on decolonization in PhD program, ensure that MPH students' experiences are valued and integrated, promote diversity among teachers, and problematize concepts, methods, and examples we may be using.
- Cooperation with other universities: explore the possibilities for joint degrees, promote collaboration programmes and revise and discuss expectations from different partners.
- Research: publish in languages others than English and in alternative journals, build networks with other universities and with other researchers in Umeå interested/working in this area.
- Acknowledgements: add acknowledgements to land, use symbolic affirmation
- Seminars: follow up to ensure that this is not a one-time thing, organize a follow up seminar with invited guest lecturer, implement a seminar series on power relations in health education and research, engage more presenters from everywhere in the world- prioritize marginalized and previously colonized areas





Congratulations to our two new professors, Maria and Isabel!



And to Kris Ebi for her honorary doctorate recognizing many years of collaboration in the area of climate change and health!



UMEÅ UNIVERSITY

EPIDEMIOLOGY AND GLOBAL HEALTH



Our **VISION** is to be an international, collaborative and diverse academic environment committed to social change for equitable health and welfare. Northern Sweden is our home, and the world is our landscape.

Our **MISSION** is to undertake meaningful work through multidisciplinary research and transformative education, and by engaging collaboratively with the surrounding society, both within Sweden and internationally.

The **VALUES** of solidarity, curiosity and integrity guide our daily work. Our environment strives for

- Open minds in an open climate
- Creative and critical thinking
- Inclusive and safe spaces
- Strength in diversity

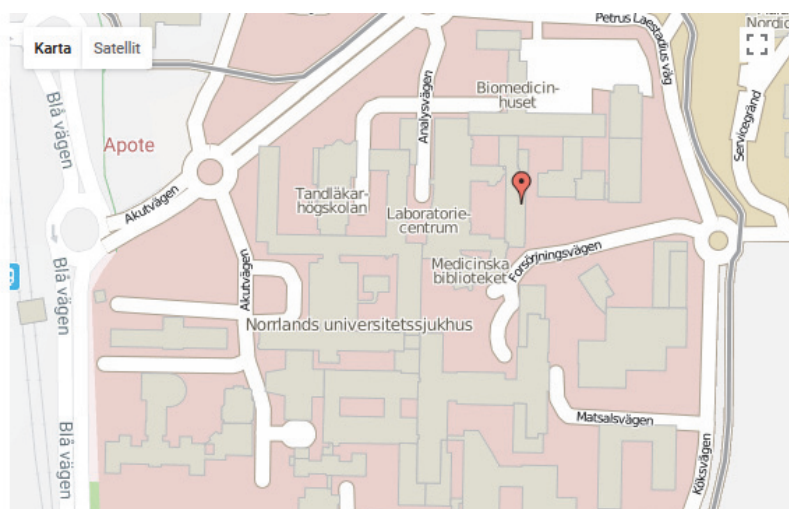


Figure 1. Map showing the location of our offices within the hospital area.

Information Committee

An Information Committee manages the entire internal and external communication and dissemination for the department. Like other years, even in 2022 extensive use of social media platforms (Facebook and Twitter) was done to inform researchers, alumni, prospective students, and the general public about our activities. The two large conference rooms at EpiGH, Alicante and Butajira, were fully equipped with technical solutions to perform mixed meetings (physical & digital).

Members of the Information Committee are Klas-Göran Sahlén (chair), Klara Johansson, Kaspar Meili, Ulrika Järholm, Göran Lönnberg and Karl-Erik Renhorn



Epidemiology and Global Health on Facebook



Epidemiology and Global Health on Twitter

Education



Introduction day August 2022

Umeå International School of Public Health

Public health education and training has been integral to the success of our international research collaborations. Many ad hoc training courses, workshops and short courses in epidemiological methods have provided a springboard for international projects. These activities have helped to build what is now a highly regarded international school within Umeå University. Maintaining a strong research focus in our teaching has been critical for mutual success in education, training and international partnerships.

The first courses in public health in Umeå were given in 1986. Five years later, in 1991, a one-year Master of Public Health (MPH) programme was introduced. The structure of the programme remained fairly similar until 2007, when an additional two-year programme was introduced, covering

epidemiology more broadly to include health systems and the social determinants of health.

As a result of a decision taken by the Swedish Parliament, since autumn 2011, students from outside the European Economic Area (EEA) and Switzerland have been required to pay tuition fees for higher education in Sweden. This led to a drop in enrolments from non-European students in 2011/12. Despite this challenge we remained committed to promoting the one- and two-year MPH programmes and further developing and diversifying their educational content.

In the autumn of 2015, in collaboration with the Umeå School of Business and Economics, we introduced an MPH with a specialization in health economics. This

recognises the breadth of health economics across a range of topics that include making evidence-based decisions about the best use of resources for maximising health gains, ways of analysing systems, organizational change, and health financing.

To ensure flexibility and offer common ground for students, the first year of the MPH is identical for all students regardless of whether they are undertaking a one- or two-year program, with or without the health economics specialty. This first year includes courses in: global health conditions; health systems analysis; social determinants of and inequalities in health, and quantitative and qualitative methods useful for developing, implementing, and evaluating public health policies. The two profiles for the second year expand on the knowledge and skills developed so far, both when it comes to depth and breadth. They comprise a mix of set courses to ensure a foundation in core topics, but also a selection of elective courses on a range of relevant topics. This arrangement offers students possibilities to shape their own unique profiles according to their interests and needs. Taken together, the programmes provide public health practitioners and researchers with the skills needed to comprehensively understand, analyse and ultimately improve population health.

During the 2022/2023 academic year we had an intake of 32 new students comprising 7 one-year students, 15 two-year students enrolled in the regular programme and 10 students enrolled in the health economics specialisation. In addition, there were 26 second-year students, 9 of whom are in the regular two-year program and 17 of whom are in the health economics programme. In 2022 our incoming students originated from Sweden, Europe, Asia, South America, Africa and Oceania. The multi-cultural composition of the students promotes a diverse academic and social climate, which students frequently highlight as a major strength of our programmes.

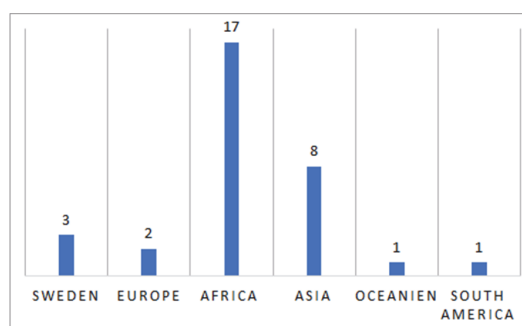


Figure 8. Master's students 2022/2023

Since the introduction of tuition fees, scholarships from the Swedish Institute have been instrumental in the recruitment of students outside the EU. In 2022, 20 of our international students were fortunate enough to receive scholarships from the Swedish Institute and 1 got Umeå University scholarship. 14 students were supported by the Erling-Persson Family Foundation and we are most grateful to the Foundation for the many years of support in providing scholarships to students from outside the European Economic Area.



EpiGH is a member of tropEd, an international network for higher education in international/global health from Europe, Africa, Asia, Australia, and Latin America. The Network provides postgraduate opportunities for education and training which contribute to sustainable development. The focus is on improving the management of health services for disadvantaged populations.

TropEd offers a Master's programme in international health. In 2020 EpiGH held tropEd accredited courses on various public and global health related topics. During the years 2020-2025, EpiGH has an active role in tropEd through our director of studies, who participates in the executive committee and was acting President in 2021 and will again be acting president 2024.

EpiGH is also part of the Nordic Network on Global Health. This network, which was established in 2017 with support from Nordplus, currently comprises six universities from five Nordic countries. EpiGH has joined with other Nordic universities to further expand the course portfolio, and benefit from the learnings in different Nordic higher education environments. This

underscores a strong commitment to the principles of equity and global health partnerships. The Nordic countries and their universities aim to build an extensive knowledge network of student and teacher exchange thereby strengthening their strong profiles within global health education.

Master programme courses

First year

Global Public Health, 10 credits
 Biostatistics 5 credits
 Epidemiology, 10 credits
 Qualitative Methods 5 credits
 Health Systems: Organization and Financing, 5 credits
 Health Economic Evaluation Methods, 5 credits
 Theory and Management in Health promotion, 5 credits
 Master Thesis, 15 credits

Second year

Evidence Based Public Health, 4 credits
 Equity and Health, 3.5 credits
 Qualitative Data Analysis, 7.5 credits
 Advanced Biostatistics and Epidemiology, 7.5 credits
 Advanced Topics in Health Economics Evaluation Methods, 7.5 credits **or**
 Social Epidemiology – Theory and Methods, 7.5 credits
 Health, Environment and Sustainability, 3.5 credits
 Leading change and development in welfare organizations, 4 credits
 Evaluation in Public Health, 7.5 credits
 Master Thesis, 15 credits

Second year with specialization in Health Economics

Tools and Methods for Economists, 7.5 credits **or**
 Evidence Based Public Health, 4 credits **and** Equity and health, 3.5 credits
 Health Economic Theory, 7.5 credits
 Social and Environmental Entrepreneurship, 7.5 credits **or**
 Project Management, 7.5 credits **or**
 Environmental Resource Economics, 7.5 credits **or**
 Advanced Biostatistics and Epidemiology, 7.5 credits
 Advanced Topics in Health Economic Evaluation Methods, 7.5 credits
 Health, Environment and Sustainability, 3.5 credits
 Leading change and development in welfare organizations, 4 credits
 Evaluation in Public Health, 7.5 credits
 Master Thesis, 15 credits

New scholarship for Master programme students

The Erling-Persson Family Foundation is providing 12 million SEK towards scholarships for students from non-EU/EEA countries studying the Master's programmes in Public Health in our Department. This funding is covering tuition waivers, and partially covers living costs, for up to eight students each year. The scholarship provisions started with the autumn intake in 2020-2021. The Foundation also provides generous support to our PhD students.

Other teaching activities

All courses within the MPH can be taken as single subjects. Priority is given to those enrolled in the MPH, but several non-programme students are also accepted. This is especially true for the more methodologically oriented courses such as *Biostatistics*, *Epidemiology* and *Qualitative Methods*, and courses concerning health systems, policy, organization and financing, e.g., *Health Systems: Organizing and Financing* and *Health Economic Evaluation Methods*. In our view it is essential that these subjects are accessible to research students in related disciplines.

Since 2018 we have a single subject course outside the programme that have also attracted masters' students, namely "From a thesis to a paper". Other single subject courses offered by the department are "R-a tool for statistical analyses", "Gender-based violence, health and healthcare" and "Sámi and indigenous health".

The Department has since many years teaching within the Medical Programme, where we collaborate closely with the unit of Sustainable Health within the Department of Public Health and Clinical Medicine and the Department of Law. From 2021, this teaching is spread out over 4 semesters within the Medical programme, semester 1, semester 5, semester 8 and semester 11. The course embraces a large range of subjects such as Global Health, Occupational and Environmental Medicine, Medical Law, Epidemiology and Social Medicine.

Staff of our Department also teach in several other programmes. Teaching is carried out at

all academic levels - from basic to doctoral. During the first semester of the 'Biomedical Programme' (180 credits), our Department is responsible for teaching a 7.5-credit course in Epidemiology and Biostatistics. Members of the Department are further teaching (from basic to master's level) in various courses (including topics like Agenda 2030 and global health, Global oral health, etc.) at the Medical Faculty and the Faculty of Social Sciences.

Educational Strategic Group

The Educational Strategic Group was established in early 2017. The Group is headed by the Director of Studies for the Master of Public Health (MPH) Programmes. The other members are the Chair of the Programme Council and six teacher representatives representing different orientation of our courses. The purpose of the group is to provide a strategic perspective on the educational development of MPH programmes and act as an advisory body for the Director of Studies. Ongoing work includes the review and improvement of the content and structure of different courses

from an integrative programme perspective, the discussion of strategies for recruitment and collaborations, and devising solutions for programme issues as they arise. During 2022 the group's priorities were to discuss admission procedure, closer connection to the network tropEd, collaboration with ISGlobal, Barcelona and development of a series of lectures regarding "Embedding academic literacy" in our master programmes in public health.

Promoting Educational Exchange

During 2021-2022 we continued our collaboration with Nordic countries as part of a Nordic-Plus application. Further, we have worked actively to be more engaged in the tropEd network for Master's education in Global Health. Moreover, in 2022 we had European tropEd students in three of our master courses.

CONTACT: Marie Lindkvist



Figure 9. Home country of Master of Public Health students 1987-2022

One-year Master Programme in Occupational Health

Since 2020, EpiGH is responsible for the one-year master programme in Occupational Health”. The field of Occupational Health is interdisciplinary, and the programme offers three specializations: Behavioural Science, Ergonomics, and Occupational health nursing. The program runs at half speed and is carried out as a distance education. In addition to EpiGH, four other departments/sections at Umeå university are involved in the teaching; Law, Psychology, Physiotherapy, and Sustainable Health.

The programme includes three common courses and three specialization-specific courses. The common courses give a base where age, gender, class, and cultural aspects are addressed as well as a global perspective on working life and health. The specialization-specific courses provide an opportunity to delve into the field based on profession/ specialization.

One-year Master's programme in Occupational Health

General courses
Working life and health, 15 credits
Communication and the consultative approach, 7.5 credits
Theory, methods and ethics of science in Occupational Health, 7.5 credits
Specialization-specific courses
Behavioural science
Behavioural change and rehabilitation, 7.5 credits
Conflict, stress and bullying from an individual and organizational perspective, 7.5 credits
Master thesis in Occupational Health with specialisation in Behavioral Sciences, 15 credits
Ergonomics
Physical ergonomics: Work place analysis and evaluation, 7.5 credits
Work ability and rehabilitation in working life, 7.5 credits
Master thesis in Occupational Health with specialisation in Ergonomics, 15 credits
Occupational-Health Nursing
Physical aspects in Occupational Medicine, 7.5 credits
Chemical aspects in Occupational Medicine, 7.5 credits
Master thesis in Occupational Health with specialisation in Occupational Health Nursing, 15 credits

Research

Epidemiology and Global Health is host to a dynamic, multidisciplinary and international research environment. Our research falls into three broad and overlapping

profiles: Health Systems and Policy; Northern Sweden Health and Welfare and Emerging Global Health Challenges.

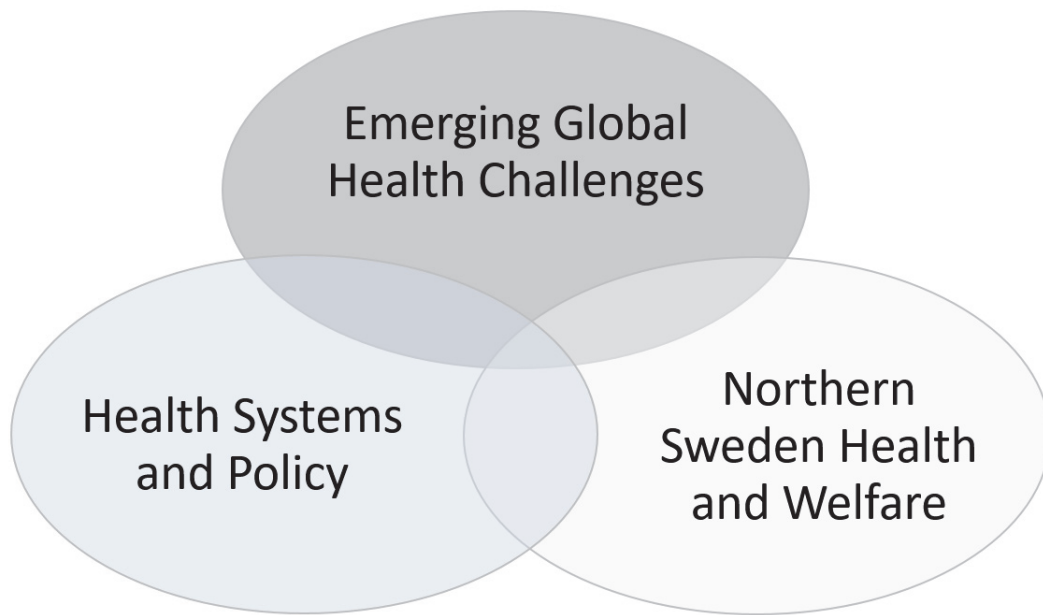


Figure 10. Research profiles at the Department of Epidemiology and Global health.

Ongoing research projects – the three profiles

Emerging Global Health Challenges

The world is becoming increasingly globalized, and we are faced with challenges to health which transcend national borders. While migration, climate change and ageing populations are emerging health threats, the negative impacts of poverty and social inequalities persist.

Over the course of the past decades, our Department has been collaborating with multidisciplinary stakeholders around the

world to address these major global health challenges. Together we strive to fill knowledge gaps by improving our understanding of the dynamic interaction of demographic changes with social, economic, and environmental factors influencing population health.

Our endeavour contributes to the implementation of policies and actions needed to create sustainable, resilient, and healthy societies globally.

EMERGING GLOBAL HEALTH CHALLENGES		
PROJECT TITLE	CONTACT PERSON	FUNDING AGENCY
How does Integration of sexuality education in schools shape sexuality decisions among adolescents? A community based participatory research driven realist evaluation in Zambia	Anna-Karin Hurtig	Swedish Research Council (VR)
Zika Preparedness Latin American Network	Annelies Wilder Smith	European Commission
Lancet countdown 2030 on climate change and health	Maria Nilsson	Wellcome Trust
Population dynamics and socioeconomic well-being in Mozambique.	Miguel San Sebastian	Sida
Mitigating poverty and disablement in older age: Understanding the complex interactions of factors influencing equitable healthy ageing in Myanmar	Nawi Ng	Swedish Research Council (VR)
Sexual and reproductive health and rights among migrant youth	Anna-Karin Hurtig	Public Health Agency of Sweden
Sexual and reproductive health among HIV positive women in Sweden	Anna-Karin Hurtig	Public Health Agency of Sweden
The SomSwe network - using social network theory and analysis to develop research capacity among young Somali academics to support evidence-based public health in the fragile state of Somalia.	Anneli Ivarsson	Swedish Research Council (VR)
Mitigating Climate change through communicating health benefits and risks – tailored and timely messages to lower household consumption	Maria Nilsson	Umeå Medical faculty
Linking Swedish, Nepalese, and Indonesian capacities to inform the design of effective, efficient, and equitable Social Network Interventions for health	Julia Schröders	Swedish Research Council (VR)
PRECISION PUBLIC HEALTH: Shifting the focus from group averages to individual variations to better understand the distribution of Body Mass Index over time and across social and geographical contexts	Masoud Vaezghasemi	Swedish Research Council for Health, Working Life and Welfare (FORTE)
CATALYSE - Climate Action To Advance Healthy Societies in Europe	Maria Nilsson	European Union's Horizon Europe research and innovation programme
Health and living conditions of LGBTQ people over 65: an interview study	Ida Linander	Public Health Agency of Sweden

The Global Child Rights Dialogue during COVID-19: multi-country action research	Hajime Takeuchi Mazen Baroudi	Japan Society for the Promotion of Science Pfizer Health Research Foundation
Paving the way for children's right to good and equal social and emotional health - an epidemiological and health economic study	Anneli Ivarsson	Strategic grant, Medical Faculty at Umeå University Swedish Research Council
Alcohol and Social Media use among university students in Uganda: Perceptions, patterns and experiences, and the feasibility of social media-based interventions for alcohol prevention	Edwinah Atusingwize	Familjen Erling-Perssons Stiftelse
The role of health communication and household's habits in climate change mitigation	Camilla Andersson	Umeå Medical faculty
Rethinking access and utilization of reproductive healthcare, and domestic violence services among women with disabilities in Uganda	Fredinah Namatovu	Swedish Research Council (VR)
The Burden of Rheumatic Heart Disease in Namibia and Seeking Cost-effective Interventions to Lower its Magnitude	Panduleni Penipawa Shimanda	Familjen Erling-Perssons Stiftelse
Impact of national Covid-19-related policies on loneliness among elderly receiving elderly care	Per Gustafsson	Swedish Research Council for Health, Working Life and Welfare (FORTE)

Health Systems and Policy

It is essential to understand how societies organize themselves in achieving public health goals, and how different actors interact in policy and implementation processes to contribute to improved health outcomes. Health systems worldwide are struggling to respond to the needs of populations and provide universal health coverage. We conduct interdisciplinary research in

relation to decision makers, service providers, communities and citizens with the aim of contributing to the strengthening of systems. During the past decade, the Department has been involved in projects aiming to strengthen the equity, quality and safety of health systems globally, and also in methodological development for more valid and reliable strategies to evaluate health policies.

HEALTH SYSTEMS AND POLICY		
PROJECT TITLE	CONTACT PERSON	FUNDING AGENCY
Towards a democratic and equitable health system: Building citizens health literacy and intrinsic motivation to becoming co-creators in health promotion	Maria Nilsson	Swedish International Centre for Local Democracy (ICLD)
Barn som kompetenta deltagare i beslut som påverkar deras liv: hur kan barnrättsperspektivet förverkligas av Hälsa-Lärande-Trygghets team inom välfärdssektorn?	Anna Westerlund	Swedish Research Council for Health, Working Life and Welfare (FORTE)
Perceptions of conflict management, association with mental health and quality of life among Swedish police officers	Mikael Emsing	Police Education Unit, School of Education
Validation of the health-related life quality instrument EQ5d 5L for Sweden	Klas-Göran Sahlén	EuroQol Foundation, Region Stockholm
Health Outcomes and Resource Utilization for Bariatric Surgery: Real World Evidence from Sweden	Sun Sun	Swedish Research Council for Health, Working Life and Welfare (FORTE)
From outsider to insider. Improved municipal decision support: A new calculation model for interventions aimed at social exclusion.	Anni-Maria Pulkki-Brännström	Skandia – Idéer för livet
The National Celiac Disease Register in Children	Anneli Ivarsson	The national pediatric working group for celiac disease
Network for inclusive, socially accountable and resilient Community Health Systems: CHS-Connect	Anna-Karin Hurtig	Swedish Research Council (VR)
Strengthening social accountability for improving health system in Tanzania: how can health facility governing committees fulfil their role?	Miguel San Sebastian	Swedish Research Council (VR)
Community Health Workers to achieve universal health coverage: Building on the Latin American legacy	Miguel San Sebastian	Swedish Research Council (VR)
Leaving no one behind: an intersectional population approach for health system equity in Sweden	Per Gustafsson	Umeå Medical Faculty
How and under what circumstances are Swedish youth clinics reaching migrant youth? A health policy and systems study to bridge the gap in access	Anna-Karin Hurtig	Umeå Medical faculty
Impact of the free patient choice reform on population health and health inequalities in Sweden	Paola Mosquera	Swedish Research Council for Health, Working Life and Welfare (FORTE)
Impact of national Covid-19-related policies on loneliness among elderly receiving elderly care	Per Gustafsson	Swedish Research Council for Health, Working Life and Welfare (FORTE)
Evaluating Implementation and Governance of Zambia's Policy Response to Selected non-	Adam Silumbwe	Familjen Erling-Perssons Stiftelse

Communicable Diseases Risk Factors: A Policy and Systems Analysis Approach		
Support, empower and change: A qualitative study of the Young Women's Empowerment Centers' support and advocacy work	Hanna Bäckström	Umeå Medical faculty

Northern Sweden Health and Welfare

Northern Sweden is a large geographical area encompassing both the sparsely populated inland and the more populated coast. This region is rich in natural resources and home to the indigenous Sámi people, but also faces challenges concerning population health and health services. We conduct regionally based research on, for example,

cardiovascular disease prevention and health promotion across the life course, service provision in rural areas and equity in health and health care. We collaborate closely with Region Västerbotten and other public health institutions, and also make great use of high-quality Swedish registers. With point of departure in this unique context, and together with our collaborating partners, we contribute to improved regional public health and global health research across the world.

NORTHERN SWEDEN HEALTH AND WELFARE		
PROJECT TITLE	CONTACT PERSON	FUNDING AGENCY
Implementation of evidence-based practice in rural Sweden - Exploring innovative strategies for realization of national guidelines for treatment and support for people with schizophrenia	Linda Richter Sundberg	Swedish Research Council for Health, Working Life and Welfare (FORTE)
STAR-C: Sustainable behaviour change for health supported by person-Tailored, Adaptive, Risk-aware digital Coaching in a social context	Nawi Ng	Swedish Research Council for Health, Working Life and Welfare (FORTE)
VisualiZation of asymptomatic Atherosclerotic disease for optimum cardiovascular prevention – a pragmatic randomized controlled trial nested in the Västerbotten Intervention Program	Margareta Norberg	VLL, Swedish Research Council, Svenska Läkaresällskapet, Visare Norr, Stroke Riksförbundet, Norrländska hjärtfonden
The Salut Child-Health Intervention Programme	Anneli Ivarsson	Region Västerbotten
The Västerbotten Intervention Program	Lars Weinehall	Region Västerbotten
The mental health and access to mental health care among the Sámi in Sweden; which are the main social determinants?	Miguel San Sebastián	Swedish Research Council for Health, Working Life and Welfare (FORTE)
The mental health and well-being of the Sámi in Sweden: does ethnic discrimination play any role?	Miguel San Sebastián	Umeå Medical Faculty
Paving the way for children's right to good and equal social and emotional health - an epidemiological and health economic study	Anneli Ivarsson	Strategic grant, Medical Faculty at Umeå University Swedish Research Council for Health, Working Life and Welfare (FORTE)
Socioemotional problems among 3 years old children: evaluating the validity of the "Age and stages questionnaire: social emotional (ASQ:SE)" and socioeconomic differences	Anneli Ivarsson	Public Health Agency of Sweden
What are the implication of the COVID-19 pandemic for young people who are neither in employment, education nor training, and the societal initiatives that are in place to support them?	Frida Jonsson	Swedish Research Council for Health, Working Life and Welfare (FORTE)
How can we support 'NEET' youth through neat interventions? A realist evaluation and implementation study of (re)engagement initiatives for young people not in employment, education or training	Frida Jonsson	Swedish Research Council for Health, Working Life and Welfare (FORTE)
Daring to ask about violence? Analysing and improving social services' question-centred responses to gender-based violence	Isabel Goicolea	Swedish Research Council for Health, Working Life and Welfare (FORTE)

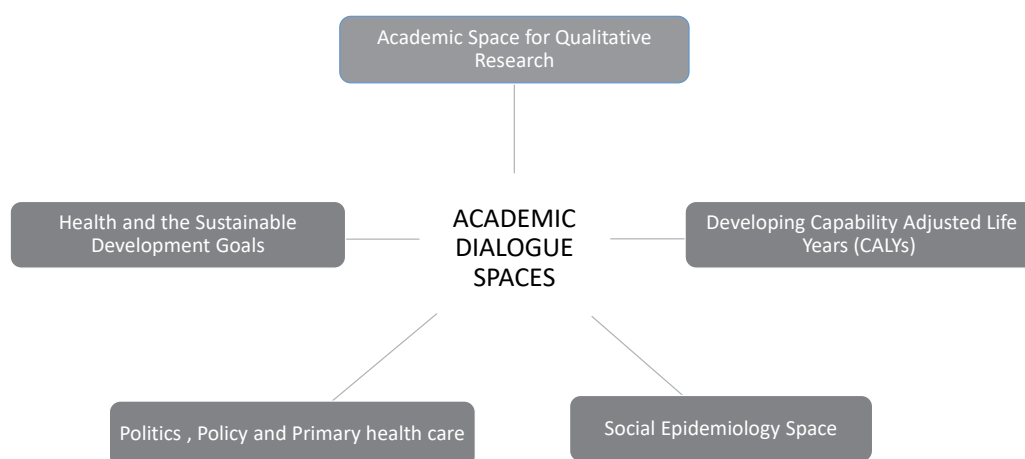
Leaving no one behind: intersectional health system equity in Sweden	Per Gustafsson	The public health agency of Sweden
How can young trans people's mental health be improved? A participatory study	Ida Linander	Swedish Research Council for Health, Working Life and Welfare (FORTE)
Negotiating the risk of segregation - public and civic responses to growing social inequalities in a "not yet" divided city	Hanna Bäckström	The Swedish Research Council for Environment, Agricultural Sciences and Spatial Planning (FORMAS)
Health and living conditions of LGBTQ people over 65: an interview study	Ida Linander	The public health agency of Sweden
Social-emotional health among children	Anneli Ivarsson	Swedish Research Council for Health, Working Life and Welfare (FORTE)
Appropriate automation: Toward and understanding of robots and AI in the social services from an organizational and user perspective	Linda Richter Sundberg	Swedish Research Council for Health, Working Life and Welfare (FORTE)
Social prescribing	Frida Jonsson	Swedish Research Council for Health, Working Life and Welfare (FORTE)
Topas - an evaluation of the tobacco prevention program Tobaksfri Duo	Maria Nilsson	The public health agency of Sweden
The health and well-being of Sámi youth in Sweden: outcomes, perspectives and priorities	Jon Petter Stoor	Swedish Research Council for Health, Working Life and Welfare (FORTE)
Sámi Health on Equal terms.	Jon Petter Stoor	Sámediggi (the Sámi parliament in Sweden)
A collected description of health outcomes among the Sámi in Sweden	Miguel San Sebastián	Public Health Agency of Sweden
Arctic community perspectives on Covid-19 and public health: A Multi-Site Case Study. Swedish/Sámi case	Jon Petter Stoor	Canadian government, Crown-Indigenous Relations and Northern Affairs Canada
Violence against Sámi Women	Jennie Brandén	Sámediggi (the Sámi parliament in Sweden)
Covid-19 and home care: a high price for new lessons learned	Fredrik Norström	AFA Försäkring
PRECISION PUBLIC HEALTH: Shifting the focus from group averages to individual variations to better understand the distribution of Body Mass Index over time and across social and geographical contexts	Masoud Vaezghasemi	Swedish Research Council for Health, Working Life and Welfare (FORTE)

Research Strategic Group

The Research Strategic Group, consisting of senior researchers at the Department, meets on a monthly basis to discuss short and long-term strategic issues. The Group also meets together with the Education Strategic Group at least once each semester. Discussions aim to identify specific priority areas and recommend strategic development and ways of implementing decisions. Important areas are “Grant application support” which focuses on streamlining and strengthening support structures; “PhD and MPH funding” which covers searching for funds for stipends and “Academic Dialogue Spaces” which encourage researchers to establish meeting places for academic discussions. The “spaces” are presented below.

Academic Dialogue Spaces

There are currently five Academic Dialogue Spaces in our Department. These are formed around the following themes: 1) Qualitative Research, 2) Developing Capability Adjusted Life Years (CALYs), 3) Social Epidemiology 4) Politics, Policy and Primary Health Care, and 5) Health and the Sustainable Development Goals (SDGs). Academic Spaces bring together researchers, often with diverse expertise and experience, around a research topic of mutual interest. They are forums for generating discussions, identifying synergies and promoting research development both for individual researchers and for the Department as a whole. Members of each Space meet periodically. At times the Spaces meet together to discuss research topics from different perspectives. A brief description of each Academic Dialogue Space follows.



Qualitative Research

The Qualitative Research Space cultivates dialogue among those with interest in the methodological strengths and challenges of qualitative research, e.g. recruiting, interviewing, coding and analysis, and also theoretical discussions. The group meets on average once a month to discuss texts (our

own and others), shared challenges and to plan open seminars.

Coordinators: *Ida Linander, Anne Gotfredsen and Isabel Goicolea.*

Developing Capability Adjusted Life Years (CALYs)

This Space builds upon two research projects in which researchers from the Department have participated. One is about social exclusion, and the costs of preventing exclusion. The second is about capabilities and their potential use in the evaluation of public interventions. These two projects have now joined forces to develop a common research agenda, which stretches from normative philosophy to statistical method. Dialogue on these issues is ongoing.

Coordinator: *Lars Lindholm.*

Health and the Sustainable Development Goals

This Space takes a holistic and broad perspective on the SDGs and their role and relevance for public health and health research. We dig deeper into specific goals and targets (e.g. SDG 16 Corruption), discuss and reflect on concepts (e.g. social innovation) and on SDGs in decision-making. We also facilitated an SDG-focus for the Department Day with awareness-raising and discussion of the use of SDGs in teaching.

Coordinator: *Anni-Maria Pulkki-Brännström*

Social Epidemiology

The Social Epidemiology Space gathers five-six times per year to discuss articles on issues of relevance for social epidemiology and equity in health, and discuss drafts of articles or research proposals from the group.

Coordinators: *Miguel San Sebastian and Per Gustafsson.*

Politics, Policy and Primary Health Care

Here the focus is on health policy and systems research particularly local and community based systems. Methodologies inspired by systems thinking are explored as well as current topics on the politics of health. The group meets once a month to share ideas/ongoing activities and discuss published work.

Coordinators: *Lars Lindholm Mazen Baroudi and Anna-Karin Hurtig*



Academic Seminars 2022

January	<p>The Medical students – Seminar Elias Marklund - Social inequalities in smoking and drinking in Ecuador: Has the 2007 health care reform reduced the gap? Anna Johansson - Climate change - mental health and wellbeing in young people Fara Arias - Socioeconomic risk factors for obstetric violence in Ecuador: A cross-sectional study Jens Gabrielsson - Improving the health status and life situation of young people at the margins of education and employment in a time of crisis? Lessons from welfare actors in aftermath of COVID-19</p>
February	<p>Nadja Fagrell Trygg – Pre defense U-CHEC – Seminar Discourse Analysis in theory and practice – approach and method(s)</p>
Mars	<p>Mazen Baroudi – Pre defense Petter Stoor, Lena Maria Nilsson – Seminar Health and racism among Indigenous Sámi and minorities in Sweden Anika Juneja – PhD admission seminar EpiGH – Workshop Content and Language Integrated Learning in Medical Education (CLILMED) Tools to Teach Effectively in English in a Multicultural and Multilingual Learning Space Dean Carson – Seminar Ideas are easy, action is hard: implementing health and care innovations in (small) rural areas Prasad Liyanage – Dissertation Information group – Seminar Research communication and internal communication</p>
April	<p>Paul Amani – Pre defense A tribute to Professor Peter Byass – Webinar Dr Tedros Adhanom Ghebreyesus, General Director at the World Health Organization, and Professor Emeritus Stig Wall, department of Epidemiology and global health. Pat Puthy – 50% seminar Edy Rolando Quizhpe Ordóñez – 50% seminar</p>
May	<p>Nadja Fagrell Trygg – Dissertation Lávvuo-Research group – Seminar Effects of the COVID-19 pandemic on the European Arctic and Indigenous Health Arian Rostami – 50% seminar U-CHEC – Seminar Diskursanalys – exempel från forskning Presentationer av doktorand Therese Nordin från institutionen för samhällsmedicin och rehabilitering, professor Anna Sofia Lundgren från institutionen för kultur- och medievetskap och universitetslektor Ann Jacobsson från institutionen för omvårdnad. The Medical students – Seminar Frida Brattlöf - Prevalence and change in socioeconomic inequalities in physical activity during the Covid-19 pandemic in Sweden. Nuzhat Islam - Socioeconomic risk factors for psychological distress among Sámi people living in Sweden.</p>
June	<p>Moses Tetui – Seminar Increasing confidence in covid-19 vaccines in the Waterloo Region, Canada. A participatory action research approach Mazen Baroudi – Dissertation Paul Amani – Dissertation The research profiles Northern Sweden Health and Welfare, Health Systems and Policy, and Emerging Global Health Challenges – Seminar Interdisciplinary research and education: barriers and opportunities Lina Årlebrandt – PhD admission seminar Camilla Andersson – PhD admission seminar</p>

August	U-CHEC – Seminar Lecture on gerontology and ageing research Susanne Iwarsson, professor at the Faculty of Medicine, Lund University.
September	Septi Kurnia Lestari – Pre defense
	André Sjöberg – PhD admission seminar
	Göran Lönnberg, Karl-Erik Renhorn – Seminar Data management and security in research projects
	Equity in health – Seminar The role of social capital in promoting socially sustainable and health promoting living environments – challenges and opportunities Speaker: Malin Eriksson, professor, Department of Social Work.
	Joseph Kyanjo – PhD admission seminar
October	Isabel Goicolea – Seminar Daring to ask about violence? Analysing healthcare responses to gender-based violence
	Maria Nilsson – Seminar Klimatförändringarna – ett hot mot vår hälsa
	Evelina Lilieqvist – Seminar PROUD PICTURES? Negotiating normative notions of family through same-sex couples’ publicly shared family photographs on Instagram.
	Mikael Emsing – Pre defense
	Karl-Erik Renhorn – Seminar and workshop How to express “relevance” in research grant applications
November	U-CHEC – Seminar Phenomenological-hermeneutic method Gunilla Strandberg from the Department of Nursing
	Jennie Brandén – Seminar Gender-based violence and intersectionality
	Miguel San Sebastián – Seminar Establishing a Sámi Health Network
	Equity in health – Seminar Perineal lacerations at childbirth - is that linked with equity and health? Speaker: Margareta Persson, associate professor, Department of Nursing
	Rodrigo Arce – PhD admission seminar
	Hussein Kapuya – PhD admission seminar
	Melissa Scribani – Pre defence
December	Johan Hambraeus – Pre defence
	Adam Silumbwe – 50% seminar
	Alieu Sowe – 50% seminar
	Carla Challgua Huanca – PhD admission seminar
	Petite Nobel Day – Seminars
	Septi Kurnia Lestari – Dissertation
	Edwinah Atusingwize – 50% seminar
	U-CHEC – Seminar Qualitative content analysis method. A presentation will be given by senior lecturer Ulla Hällgren Graneheim from the Department of Nursing.
	The research profiles Northern Sweden Health and Welfare, Health Systems and Policy, and Emerging Global Health Challenges – Seminar
	Henrik Holmberg – Pictorial risk information and adherence to prescribed drugs

Medical Faculty - Theme Equity in Health

Epidemiology and Global Health coordinates Theme Equity in Health, a thematic space for senior researchers and doctoral students active in the field of equity and health, and others interested in the topic. The theme falls under the umbrella of U-CHEC – Umeå Centre of Health Science.

A seminar series has been running since 2014 with alternating speakers from the U-CHEC departments (Epidemiology and Global Health, Nursing, Community Medicine and Rehabilitation). The seminars aim to stimulate debate and creative thinking by offering ample time for

discussion. For details about upcoming and past seminars, go to: <https://www.umu.se/en/research/groups/theme-equity-in-health/>

The course “Equity and Health” (3.5 ECTS) offers PhD and MSc students the opportunity to explore general theories about justice and fairness in society, and their connections with research and practice in public health, health economics, and midwifery science. Students have consistently rated the course very highly since its inception in 2017. www.umu.se/en/education/courses/equity-and-health2/

CONTACT: Anni-Maria Pulkki-Brännström

Global Health Action – approaching 15 years



Global Health Action, hosted in our department, is a leading peer reviewed open-access journal in global health launched in 2008. The Journal's name and motivation resonates with Robert Beaglehole's

definition: 'global health is a collaborative trans-national research and action for promoting health for all'. In the journal's inaugural editorial the founding chief editor professor Stig Wall wrote about reducing "the gap in health information between rich and poor countries" and the "widening gaps between winners and losers of globalisation". Global health requires a multi-disciplinary workforce with a broad vision of public health, and an ability to work collaboratively across disciplines, cultures and sectors including sectors outside the health community. Training, upskilling, capacity building and knowledge sharing activities are essential for effective research and policy development. Globalization challenges are to be viewed through a 'global lens' embracing diversity and inclusion. *Global Health Action* was conceived and founded in response to these challenges. This is still valid and a challenge the journal will continue to act on. Public health in a global context consists of major and increasing challenges for humanity and the goal is that *Global Health Action* will contribute research results for evidence-based policy and practice to meet those challenges and solutions for improved global health.

The journal is co-owned and published in partnership with Taylor & Francis. It was one of the very first to adopt to open access publishing in medicine and health, with the will for global outreach beyond institutional research portfolios. The journal publish research in the field of global health and address transnational health and policy issues. It has grown steadily since its conception. In 2022 we received 503 papers and accepted 109 for publication (22%). We

have established editorial practices that are both rigorous and reasonably fast, and articles have become highly cited. The journal's h5-index was 44 (meaning that 44 papers had 44 or more citations in the last five complete years) and the impact factor for 2022 had risen to 2.996. The average time from submission to first decision was 16 days, from submission to first post-review decision 44 days and from acceptance to online publication 47 days.

Two years ago, the founding editor Stig Wall and the Editorial team with co-authors published the editorial "Global Health Action at 15 – revisiting its rationale", you find it at:

<https://www.tandfonline.com/doi/full/10.1080/16549716.2021.1965863>. In the editorial you can read about the journals first 15 years and the results of a study performed to ascertain the accuracy of *Global Health Action* editor's decisions at the initial screening step.

The reasons for rejection vary from papers lacking a clear aim or research question, to poor study design, small sample size, and inappropriate analytical methods to name a few. Sometimes there are also more formal reasons why we can't accept a paper. On the journal's webpage we state as a rejection criterion that "The study uses primary data that were collected by local researcher(s) in low- or middle-income countries and are not publicly available but does not include any local researcher(s) as co-authors". It still happens we get submissions from authors who have parachuted in somewhere, organised research and written up a paper without apparently collaborating with local institutions and researchers. We wish that other journals take a similar position so that this kind of neo-colonialist approach to research could be eliminated once and for all. In a paper published in 2022 in *BMJ Global Health*, *Global Health Action* ranked four among the journals with the highest proportion of sub-Saharan African (SSA) women researchers as 1st authors. It also ranked among the top ten journals with the highest proportion of SSA women as last authors.

The journal will continue to publish high quality papers in core global health topics such as health determinants and health information, public health interventions, health- and gender inequalities, environmental and climate change impacts on public health, with a specific focus on the most vulnerable regions and populations. Three points are particularly important while doing this, we i) want to contribute to capacity building with the goal of decreasing health information gaps between rich and

poor countries, ii) expect strong implementation and policy components in our published research, as understood by the name of the journal, and we iii) want to increase the number of manuscripts published based on inter- and transdisciplinary research, increasingly needed to meet some of the major current global health challenges.

CONTACT: Maria Nilsson

Somali Swedish Research cooperation for health

The bilateral research collaboration between Somalia and Sweden was first launched in early 1981/82. This research partnership focused primarily on capacity building, but was abridged by the 1991 extended civil war and conflict in Somalia. An initiative to revive this cooperation was started in late 2013, followed by a joint conference and a workshop organized in Umeå in 2014 and 2015 respectively. These 11 academic institutions in Somalia and Sweden, and Somali Swedish Research Association (SSRA) participated actively.

During 2022 we hosted the journal, Somali Health Action Journal (SHAJ). The library at Umeå University continue to contribute significantly with technical support to make the operation of SHAJ possible. From our department works Klas-Göran Sahlen as the managing editor. Stig Wall and Maria Emmelin also works with the journal together with several others from SSRA.

A VR supported projected initiated by Julia Schröders built upon a social network theoretical approach aims to develop a network with Somali / Swedish junior and senior researchers. The work started 2021 and have continued during 2022. Four junior researchers from Benadir and East Africa University have worked with data collection.



Participants in the SomSwe project in a meeting in Nairobi

CONTACT: Klas-Göran Sahlen

SHAJ
SOMALI HEALTH ACTION JOURNAL

Research Training

Our PhD program

During 2022, a total of 37 research students (18 men and 19 women) were registered and actively engaged with their research activities at the Department.

The Covid-19 pandemic that started in 2020 was controlled during this year, which allowed to our international studies to visit Umeå again.

Three signs of returning to normality can be highlighted. First, five new students (André and Lina from Sweden, Chavula from Zambia, Ester from Tanzania and Anika from India) were able to be registered during the year, after presenting their plan onsite. Second, six PhD students defended their thesis on-campus. And third, we could organize two interesting PhD days, one in April and one in November.

In the first one, the topic of “Equal opportunities” was presented and different meanings along the PhD context and process discussed. The second PhD day focused on diverse ethical challenges that can appear when working with vulnerable groups such as youth or prisoners.

We hope that the normality that we experienced during this year, it remains with us and PhD students and supervisors continue enjoying the richness of the human encounters.

CONTACT: *Miguel San Sebastián*



PhD students and projects

 Edwinah Atusingwize	 Paul Amani	 Mazen Baroudi	 Nadja Trygg	 Charvo Daga	 Atakelti Derbew
 Mikael Emsing	 Hanna Blåhed	 Vu Nu Ahn	 Johan Hambræus	 Chama Mulubwa	 Prasad Liyanage
 Septi Kurnia Lestari	 Mai Vu Thi Quynh	 Yercin Mamani Ortiz	 Kaspar Meili	 Panduleni Penipawa	 Puthy Pat
 Cartrine Odhiambo	 Melissa Scribani	 Edy Rolando Quizhpe	 Adam Silumbwe	 Camilla Andersson	 Alieu Sow
 Elia Swai	 Angela Kisakye	 Huzeifa Jabir Aweesha	 Malin Öhring	 Arian Rostami	 André Sjöberg
 Chavula Paul Malizgani	 Susanne Bellander	 Anika Juneja	 Lina Årlebrant	 Ester Steven Mzilangwe	

Table 2. PhD students registered at the department 2022.

Name	Background	Country	Thesis subject	Main supervisor
Camilla Andersson	MA Master of Philosophy	Sweden	The role of health communication and household's habits in Climate change mitigation.	Maria Nilsson
Paul Amani	MA Public policy	Tanzania	Health care utilization by the elderly in Tanzania: Does insurance status matter? A case study of Igunga and Nzege districts.	Miguel San Sebastián
Vu Nu Anh	MA Public health	Vietnam	Establishing a national threshold value for cost effectiveness analysis in Vietnam	Sun Sun
Edwinah Atusingwize	BA Environ health science	Uganda	Alcohol and social media use among university students: Perceptions, patterns and experiences, and the feasibility of social media-based interventions for alcohol prevention	Maria Nilsson
Huzeifa Jabir Aweesha	MA in sciences of Public health	Sudan	Effective Development Cooperation: improving health system governance - Efforts, challenges, and opportunities in Sudan	Miguel San Sebastián
Mazen Baroudi	MD	Sweden	Youth migrants' sexual and reproductive health and access to healthcare services in Sweden	Anna-Karin Hurtig
Susanna Bellander	MA Criminology	Sweden	The Swedish Police Authority's work against terrorism; An explorative study of the implementation of Governments strategy against terrorism.	Mehdi Ghazinour
Hanna Blåhed	MSc Public Health	Sweden	Good quality, Local (e) Healthcare in Rural Northern Sweden: A Policy Practice and Community Approach	Anna-Karin Hurtig
Chanvo Salvador Lucas Daza	MA International Health	Mozambique	Understanding the drivers for child and reproductive health in Mozambique: The role of socioeconomic inequality and the gaps between policy and implementation	Barbara Schumann
Atakelti Derbew	MSc Public Health	Ethiopia	Under 5-year morbidity and mortality in Tigray Region, Ethiopia: an equity perspective.	Anna Myléus
Mikael Emsing	MA Pedagogics	Sweden	Perceptions of conflict management, association with mental health and quality of life among Swedish police officers	Mehdi Ghazinour
Johan Hambraeus	MD	Sweden	Evaluation of intervention al pain management mainly focused on zygapophysial joint pain	Lars Lindholm
Anika Juneja	MSc Public Health	India	Neighbourhood disadvantage and access to health care - the case of sickle cell disease in two Adivasi communities in central and southern India	Anna-Karin Hurtig

Name	Background	Country	Thesis subject	Main supervisor
Angela Kisakye	MA Public health	Uganda	A Gender analysis of the health workforce in Uganda: Implications for policy, planning and Human Resource development	Helene Johansson
Prasad Liyanage	BSc Medicine and Bachelor of Surgery	Sri Lanka	Implementation of Early warning decisions for control and prevention of dengue in Kalutara (Sri Lanka)	Joachim Rocklöv
Septi Kurnia Lestari	BA Nutrition	Indonesia	The role of social relationship on health ageing among European population	Nawi Ng
Vu Thi Quynh Mai	MSc Health Economics	Vietnam	Feasibility and applicability of health related quality of life in Vietnam healthcare planning system	Klas-Göran Sahlén
Chavula Paul Malizgani	MSc Public Health Promotion & Education	Zambia	The role if collaborative governance in delivery of comprehensive sexuality education in Zambia	Anna-Karin Hurtig
Ester Steven Mzilangwe	Master in Medical Science	Tanzania	Sexual violence among University students in Tanzania: Experience, prevalence and perceptions regarding support systems	Faustine Nkulu Kalengayi
Yercin Mamani Ortiz	Medical Doctor	Bolivia	Cardiovascular diseases in Cochabamba, Bolivia: Identifying preventable risk factors and assessing social inequalities.	Paola Mosquera Mendez
Kaspar Meili	MPH Health economics	Switzerland	Estimating and applying weights for Capability-Adjusted Life Years	Anna Månsdotter
Chama Mulubwa	BSc Biological sciences, MPH	Zambia	Community-based reproductive and health system for adolescents in Zambia: A realist evaluation approach	Isabel Goicolea
Cartrine Nancy Anyango-Odhiambo	MSc Public Health	Sweden	Intime violence: Towards improving service provision to women with disabilities in Sweden	Fredinah Namatovu
Edy Rolando Quizhpe Ordóñez	Master in Family Health, MD	Ecuador	The health system reform in Ecuador: advancing towards universal health coverage?	Anni-Maria Pulkki Brännström
Puthy Pat	MA Counselling	Cambodia	Promoting mental health of young prisoners and strengthening the mental health care system in the prisons of Cambodia	Miguel San Sebastián
Arian Rostami	MA Health education	Iran	Mental health and job satisfaction in relation to work-related stress, personality and resilience in police officers working in vulnerable areas	Monica Burman
Melissa Scribani	BS in Biology, MPH	USA	Consequences of obesity and determinants of weight maintenance: a study of adult populations in rural New York State and Västerbotten County, moving towards an intervention to stem the tide of the obesity epidemic	Margareta Norberg
Panduleni Penipawa Shimanda	MSc Public Health, specialization Health Economics	Namibia	The burden of rheumatic heart disease in Namibia and seeking cost-effective interventions to lower its magnitude	Fredrik Norström

Name	Background	Country	Thesis subject	Main supervisor
Adam Silumbwe	BA healthcare management	Zambia	Evaluating Zambia's response to non-communicable diseases: a policy and systems analysis approach	Klara Johansson
André Sjöberg	MSc Public Health with Health Economics	Sweden	Evaluation of the effect, cost-effectiveness, and implementation of Everyday Life Rehabilitation (ELR) for people with severe psychiatric disability living in supported accommodation	Maria Lindström
Aliou Sowe	MSc Public Health	Gambia	Investigating inequitable vaccination: predictors of, social inequalities in, and intervention against sub-optimal vaccination in The Gambia	Per Gustafsson
Elia Swai	MA Physiotherapy	Tanzania	Children and adolescents with physical disabilities in Tanzania: Exploring characteristics, needs and challenges in the Kilimanjaro region	Klas-Göran Sahlén
Nadja Trygg	Health sciences, MPH	Sweden	Complex inequalities in mental health	Anna Månsdotter
Lina Årlebrant	BA, MSc Nursing	Sweden	To gain knowledge about experience and expectations of meetings in health care, provided thought digital solutions such as video conference equipment in everyday care and how care meetings can be effective both in terms of resources and quality care.	Anette Edin-Liljegren
Malin Öhring	MSc Public Health	Sweden	Working in home care during the pandemic - What can we learn, moving forward?	Fredrik Norström

Dissertation events and thesis abstracts



Septi Kurdia Lestari



Mazen Baroudi



Prasad Liyanage



Nadja Trygg



Paul Amani

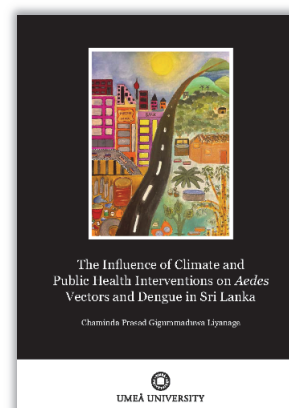
PRASAD LIYANAGE

The Influence of Climate and Public Health Interventions on *Aedes* Vectors and Dengue in Sri Lanka

Thesis defended: March 25, 2022

Supervisors: Prof Joacim Rocklöv, Ass prof Yesim Tozan,
Senior consultant epidemiologist Hasitha Tissera

Opponent: Prof Flemming Konradsen, University of Copenhagen,
Denmark



Introduction: Dengue, a viral infection transmitted by *Aedes* mosquitos, flourishes in urban tropical environments by a complex process. Interactions among susceptible humans, dengue viruses, and *Aedes* mosquitoes determine dengue transmission patterns, and these interactions are modified by driving factors related to weather, the environment, and human behaviour, including mobility. Understanding the drivers of dengue and evaluating the effectiveness and costeffectiveness of existing vector control policies are vital to developing evidence-based and timely interventions.

Methods: The exposure-lag-response associations between weather variables, *Aedes* vector indices and dengue at each sub-district Medical Officer of Health (MOH) divisions in Kalutara district, Sri Lanka, were estimated using distributed lag non-linear models. These estimates were meta-analyzed to obtain the average estimates for the district, while exploring the heterogeneities among MOH divisions. Non-linear extension to the interrupted time series analysis was used to evaluate the impact of nation wide mobility restrictions implemented during COVID-19 pandemic on dengue risk at each district, at different age groups in the western province and at the climate zones in Sri Lanka. The effects of the vector control interventions implemented through the civil military cooperation (CIMIC) on dengue were estimated at Panadura MOH division of Kalutara district using interrupted time series analysis while adjusting for potential confounders. The costeffectiveness of the CIMIC intervention was evaluated using a decision analytical modelling framework.

Results: We found that El Niño, rainfall, temperature and *Aedes* larval indices were associated with each other, and dengue, at lag intervals expanding from one to six months. The nation wide mobility restriction was associated with a statistically significant reduction in dengue risk in all climate zones in Sri Lanka. The highest impact was observed among the children age less than 19 years. We found that the CIMIC intervention reduced dengue risk by 50% and was cost-effective in a defined area.

Conclusion: The manifestation of dengue is preceded by the biologically plausible latencies of increasing *Aedes* larvae and the onset of weather events in Kalutara district. When augmented with location-specific information of vector activities, one to six months lead time from the onset of weather events enables public health authorities to set up short, intermediate, and long-term goals for vector control interventions. The observed significant reduction in dengue risk following the national lockdown in Sri Lanka further highlighted the importance of vector control at public places and schools. The findings of these studies suggest that communities affected by dengue can benefit from investments in vector control if interventions are implemented rigorously and coordinated well across sectors. The methodological framework we developed in this doctoral thesis will contribute to the understanding of the local determinants of dengue and the development of early warning systems blended with effective and cost-effective vector control interventions in Sri Lanka and beyond.

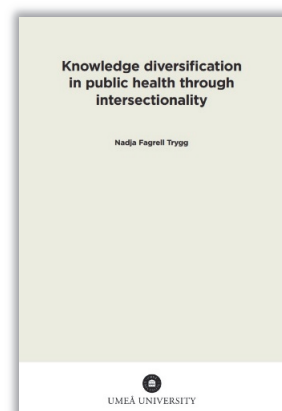
NADJA FAGRELL TRYGG

Knowledge diversification in public health through intersectionality

Thesis defended: May 6, 2022

Supervisors: Researcher Anna Månsdotter, Ass Prof Per E Gustafsson, Prof Anna-Karin Hurtig

Opponent: Ass Prof Shai Mulinari, Department of Sociology, Lunds University, Sweden.



Background: Knowledges about health inequalities and their causes are a central concern in public health. Generally, these relate to the social patterning of health and the forces that affect health conditions in daily life. However, public health decision making has been criticized for excluding knowledges of particular importance for health equity. This poses a challenge since knowledges and understandings shape what policies and interventions are viewed as relevant, reasonable or even possible to think of. If certain knowledges are left out, there is a risk that both knowledge making and decision making with respect to health inequalities will exclude important measures.

Since intersectionality encompasses a wide range of knowledge-making practices centered around social justice, it may contribute diverse knowledges of importance to health equity. Intersectionality has recently gained traction within public health and represents an important shift in conceptualizing how different dimensions of inequalities, such as sexism, classism and racism, interlock to generate social exclusion and marginalization instead of working separately, one by one.

Aim: The overall aim of this thesis is to explore the possibility of using intersectionality as a tool for knowledge diversification within public health. The specific research question is:

What knowledges and understandings of health inequalities do the inter-categorical (studies I and II) and post-categorical (studies III and IV) approaches to intersectionality contribute and how are such contributions made?

Material and methods: The method of the cover story can be understood as a way of studying science or as a retrospective self-reflection based on the four individual studies, making up the material of the thesis. Specifically, the material was reassembled and retold in order to show how certain intersectional approaches generate different types of knowledges and understandings of health inequalities by involving different ways of operationalizing inequalities and managing categories.

In study I, a scoping review of the quantitative international literature was undertaken with the aim of mapping and describing inter-categorical inequalities in mental health. Study II was a quantitative analysis of a population-based survey with the aim of mapping inter-categorical inequalities in mental health in the Swedish adult population. Study III was a policy analysis of a government bill that proposes a national strategy on alcohol, drugs, tobacco and gambling with the study aim to examine the equity-perspective of the bill through an intersectional lens. Study IV was a post-qualitative inquiry based on participatory observations and interviews with the study aim to explore the becoming of social divisions among seniors as they participate in health-promoting activities.

Results: The inter-categorical approach to intersectionality (applied in studies I and II) generated knowledges about health inequalities as quantitative mean differences between population groups, and highlighted unexpected patterns and unpredictable inequalities in

mental health. This implies the importance of building responsive systems that regularly monitor inequalities across different intersectional positions and contexts so that services can be directed and adapted to those most in need.

The post-categorical approach to intersectionality (applied in studies III and IV) generated knowledges about health inequalities as processes of marginalization, resistance, exclusion, or inclusion, and highlighted difficult trade-offs with respect to public health policy and practice. This enables a transformative way of thinking by providing the possibility of doing things differently in everyday practices in which marginalization and resistance becomes.

Conclusion: Different approaches to intersectionality contribute diverse knowledges and understandings about health inequalities. This is important since it expands the possibilities for fair decision making and health equity through different outlooks on social justice. Knowledge diversification through intersectionality could be particularly useful to release tension due to the restrictive forces of public health decision making and to increase accountability for the multiple social interests of the population. Thus, it has the potential to make public health decision making more flexible, transparent, reflexive, and democratic.

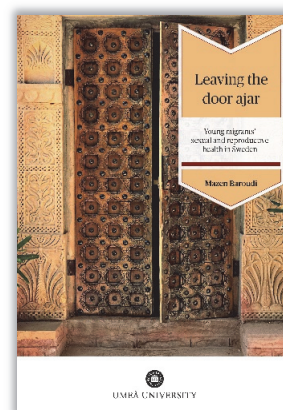
MAZEN BAROUDI

Leaving the door ajar: young migrants' sexual and reproductive health in Sweden

Thesis defended: June 2, 2022

Supervisors: Prof Anna-Karin Hurtig, Prof Isabel Goicolea

Opponent: Prof Kayvan Bozorgmehr, School of Public Health, University of Bielfield, Germany



Young people and migrants are both prioritized groups regarding sexual and reproductive health and rights (SRHR), but studies about the sexual and reproductive health (SRH) of young migrants in Sweden are scarce. The aim of this thesis was to study the SRH of young migrants in Sweden, and specifically to: 1) explore how do young migrants understand SRH, and how do they experience their sexual rights; and 2) examine how do young migrants perceive and experience the process of accessing SRH services, including their approachability, acceptability, adequacy and quality.

This thesis is built upon three studies, which collected quantitative data (a national survey – Papers 1 and 2, and a youth clinics survey – Paper 3) and qualitative data (a qualitative study – Paper 4). The national survey is a population-based cross sectional study, which recruited 1773 newly arrived young migrants aged 16 to 29 years through visits to schools and other venues, letters sent home, and via a web survey. The data was analysed through descriptive statistics (Paper 1) and multivariate multiple linear regression (Paper 2). The youth clinic survey is a clinic-based cross-sectional study which recruited 1089 youths (118 had at least one parent born outside Sweden/Scandinavia) aged 16 to 25 years after their visit to a youth clinic in the four most northern regions in Sweden. I used multi-level analysis to analyse the data. The qualitative study builds upon 13 semi-structured interviews with newly arrived Arabic-speaking migrant men, which were analysed through qualitative thematic analysis.

Young migrants understood SRH as both “essential” and a “right”. The sexual rights of young migrants in Sweden were less fulfilled, compared to those of other young people in Sweden, and there were differences between the various groups of young migrants. The rights of men; people identifying as non-binary; people identifying as lesbian, gay, bisexual or asexual (LGBA); those born in South Asia; those without a residence permit; and people of low economic status were fulfilled to a lesser extent compared to their counterparts.

Studying the process of accessing SRH services – including sexual education and information, and services related to sexual function, sexually transmitted diseases and gender-based violence, as well as infertility, pregnancy, delivery, contraceptives and abortion – showed barriers and facilitators. SRH services were to a large extent **non-approachable**; almost half of those who needed these services in the national survey did not use them. SRH services were perceived, with some exceptions, as **acceptable** due to the “open environment” of Sweden; however, some young migrants faced a lack of cultural sensitivity in iv SRH services, low parental support, and fear of exposure, which decreased their acceptability of the services. Regarding **adequacy**, young migrants complained about long waiting times for receiving care particularly specialised care, and that SRH services did not take their problems seriously. Those who visited youth clinics, however, perceived them as providing convenient and timely services. The **quality** of SRH services was perceived as good in general; the majority of young migrants were satisfied with SRH services in the national survey and perceived youth clinics as very friendly. However, negative experiences were reported in the national survey, where

almost half of those who visited SRH services had at least one negative experience in the five domains of respect, equity, quality of consultation, privacy and non-prejudice. Migrant youths also reported worse experiences in the youth clinic survey than Swedish/Scandinavian youths in the domains of respect, equity and quality of consultation.

Their legal entitlement to access most SRH services, the availability of good quality services and the “open environment” facilitate young migrants’ access to SRH services, however, their limited access to sexual education and to information about the health system, and cultural insensitivity and cultural racism when providing information and services, are serious barriers to young migrants’ access to SRH services.

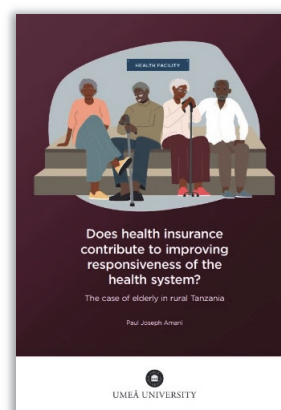
PAUL JOSEPH AMANI

Does health insurance contribute to improving responsiveness of the health system?: the case of elderly in rural Tanzania

Thesis defended: June 10, 2022

Supervisors: Prof Miguel San Sebastian, Prof Anna-Karin Hurtig, Prof Isabel Goicolea, Prof Angwara Denis Kiwara

Opponent: Ass Prof Paula Moraga, King Abdullah University of Science and Technology, Thuwal, Saudi Arabia



Background: Financing healthcare in Tanzania has for years depended on out-of-pocket payments. This mechanism has been criticized as being inefficient, contributing to inequity and high cost as well as denying access to healthcare to those most in need, including the elderly in rural areas. Health insurance (HI) was recently introduced as an instrument to enable equitable access to healthcare and thus to improve the responsiveness of the health system. Even though health insurance is expected to bring benefits to those who are insured, there is a lack of specific studies in the country looking at the role of HI in facilitating the health system responsiveness among vulnerable populations of remote areas.

Aim: The aim of this thesis is to understand if and how health insurance contributes to improving the responsiveness of the healthcare system among the elderly in rural Tanzania.

Methods: Four interrelated sub-studies (2 quantitative and 2 qualitative) were conducted in Igunga and Nzega districts of Tabora region between July 2017 and December 2018. The first two sub-studies are based on a household survey using an adapted version of the World Health Organization's Study on Global Ageing and Adult Health questionnaire. Elderly people aged 60 years and above who had used both outpatient and inpatient healthcare three and twelve months prior to the study, respectively, were interviewed. Whereas in sub-study 1 the focus was to investigate the role of health insurance status on facilitating access to healthcare, sub-study 2 assessed the relationship between health insurance and the health system responsiveness domains. In sub-study 3, interviews with healthcare providers were carried out to capture their perspective regarding the functioning of the health insurance. In the final sub-study 4, focus group discussions with elderly were conducted in order to explore their experience of healthcare, depending on their health insurance status. Crude and adjusted logistic and quantile regression models were applied to analyse the association between health insurance and access to healthcare (sub-study 1) and responsiveness (sub-study 2), respectively. For both sub-studies 3 and 4, qualitative content analysis was used to analyse the data.

Results: Sub-studies 1 and 2 involved a total of 1899 insured and uninsured elderly, while sub-studies 3 and 4 included 8 health providers and 78 elderly respectively. Sub-study 1 showed that about 45% of the elderly were insured and HI ownership improved access and utilization of healthcare, both outpatient and inpatient services. In sub-study two, however, health insurance was associated with a lower responsiveness of the healthcare system. In general, all six domains: cleanliness, access, confidentiality, autonomy, communication, and prompt attention were rated high, but three were of concern: waiting time; cleanliness; and communication. Sub-study 3 uncovered several challenges coexisting alongside the provision of insurance benefits and thus contributing to a lower responsiveness. These included shortage of human resources and medical supplies, as well as operational issues

related to delays in funding reimbursement. In sub-study 4, the elderly revealed that HI did not meet their expectations, it failed to promote equitable access, provided limited-service benefits and restricted use of services within residential areas.

Conclusion: While HI seems to increase the access to and use of healthcare services by the elderly in rural Tanzania, a lower responsiveness by the healthcare system among the insured elderly was reported. Long waiting times, limited-service benefits, restricted use of services within schemes, lack of health workforce in both numbers and skills as well as shortage of medical supplies were important explanations for the lower responsiveness. The results of this thesis, while supporting the national aim of expanding HI in rural areas, also exposed several weaknesses that require immediate attention. There is a need to, first, review the insurance policy to improve its implementation, expand the scope of services coverage, and where possible, to introduce cross-subsidization between the publicly owned schemes; additionally, improvements in the healthcare infrastructure, increasing the number of qualified health workforce and the availability of essential medicines and laboratory services, especially at the primary healthcare facilities, should be prioritized and further investments allocated.

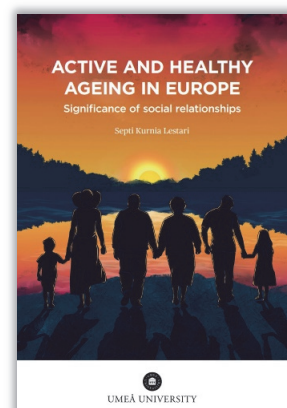
SEPTI KURNIA LESTARI

Active and healthy ageing in Europe: significance of social relationships

Thesis defended: December 9, 2022

Supervisors: Prof Nawi Ng, Prof Xavier de Luna, Prof Malin Eriksson

Opponent: Prof Mikael Rostila, Dept of Public Health Sciences, Stockholm University, Sweden



Background: Social relationships have important roles in achieving active and healthy ageing. Social relationships are dynamic across the life course. A myriad of contextual and individual (e.g., sociodemographic and health-related) factors shape the levels of social relationship constructs (e.g., social contact, participation, and support) and how they change over time. This thesis aims to contribute to a better understanding of social relationships among the older European population, the impact of health on social relationships, the influence of social relationships on quality of life, and the impact of the COVID-19 pandemic on the levels of social relationships.

Methods: The study subjects were community-dwelling Europeans aged 50 and over who participated in the Survey of Health, Ageing and Retirement in Europe (SHARE) between 2004 and 2020. In Sub-study 1, multilevel growth modelling was used to analyse the trajectories of seven social relationship constructs, i.e., provision and receipt of instrumental support, social contact, and participation in volunteer work, sport/social club, educational activity, and political/community organisation. Sub-study 2 used latent class analysis (LCA) to identify social relationship typologies based on the seven social relationship constructs and perceived emotional support. Next, the associations between frailty and social relationship typologies were analysed using LCA-with-covariates. Sub-study 3 evaluated the possible causal effect of social support provision, support receipt, and participation on quality of life using doubly robust estimation and sensitivity analysis for unobserved confounding. Sub-study 4 used multilevel logistic regression analysis to determine whether individuals' exposure to COVID-19 and the country's COVID-19 policies stringency index (S-Index) were associated with the initiation of provision and receipt of instrumental support and volunteering during the first phase of the COVID-19 pandemic.

Results: In contrast to instrumental support receipt, the probability of instrumental support provision, social contact, and participation declined slightly over time (Sub-study 1). Four social relationship types were identified: 1) poor, 2) frequent and emotionally close, 3) frequent, emotionally close, and supportive, and 4) frequent, emotionally close, and active (Sub-study 2). Poor self-rated health limited instrumental support provision and increased instrumental support receipt from outside the household (Sub-study 1). Being pre-frail or frail was associated with less active social relationship types, i.e., Types 1, 2, and 3 (Sub-study 2). Social participation and instrumental support provision for people outside the household were correlated with a higher quality of life while receiving instrumental support was associated with a lower quality of life. None of these associations could be considered causal (Sub-study 3). During the COVID-19 pandemic, the level of volunteering and instrumental support provision was lower, but the level of instrumental support receipt was higher than before the pandemic. Being exposed to COVID-19 was positively associated with support receipt initiation. The close ones' exposure to COVID-19 was positively associated with volunteering, support provision, and support receipt. S-Index was positively associated with instrumental

support provision initiation but negatively associated with support receipt initiation (Sub-study 4).

Conclusions: A significant share of older Europeans was socially active. Their engagement in social contact, support, and participation changed over time. The four social relationship types revealed the importance of having frequent contact in initiating instrumental support exchange and social participation. Health is a vital determinant of older adults' social relationships. On the other hand, observed associations indicate that social relationships may influence older adults' quality of life. The pandemic might lower social support provision and volunteering and increase support receipt levels in the population. However, the pandemic might also encourage older adults to provide help, likely to people within their neighbourhood. Overall, maintaining close social ties, especially with family and close friends, is important to stimulate active engagement in social support exchange and participation, which promotes healthy ageing.

From the news.....



Figure 11. During 2022 we have presented our research through many different media.

Consultancy and advisory functions

We regularly contribute our time and expertise within Umeå University and externally, the latter at local, regional, national and international levels through a variety of consultancy and advisory functions. Examples of such roles are given below (Table 3). In addition, our researchers are of course referees and on editorial boards for a large number of scientific journals.

We are key advisers behind the Region Västerbotten Public Health Policy programme. On a regular basis we train local

and regional political assemblies, as well as patient organisations and public associations. We participate in many public health education activities, both for basic public health training and the dissemination of public health research. We regularly inform decision-makers, such as politicians and officials from the municipalities and the county councils, of public health issues in the northern region of Sweden.

Table 3. Consultancy and advisory tasks among the staff.

Name	Institution	Task
Dean Carson	Storumans kommun	Advisor to Storuman Cares 2050 strategy for elder care
Kerstin Edin	Save the Children Sweden – Rädda Barnen	Deputy Chair of the Local Board in Umeå
Per Gustafsson	Swedish Ethical Review Authority Umeå University	Member (deputy) of Regional Board in Umeå
		Member of Strategic Board of Education, Faculty of Medicine
		Member (co-opted) of Council for Doctoral Education, Faculty of Medicine
		Chair of Program Council for Master Programs in Public Health, Faculty of Medicine
		Program Director, Doctoral Program at Faculty of Medicine
Anna-Karin Hurtig	The Swedish Association of Social Medicine	Member of Board and Secretary
	Swedish Medical Association	Member, Committee for Global Health
	Consortium for Advanced Research Training in Africa (CARTA)	Focal person UmU
	Swedish Research Council	Member of the Committee for Development Research
	The Research Council of Norway	Member of review panel (research projects for scientific renewal)
Anni-Maria Pulkki-Brännström	Swedish Ethical Review Authority	Scientific member
	Umeå university, Medical faculty	Member, Research Strategic Board
Anneli Ivarsson	Medical Faculty, Umeå University	International Director
		Chair, Strategic Committee for Internationalisation
		Chair, Council for internationalization of the education
		Member, Reference group for the new 6-year Medical Programme
	International office, Umeå University	Member, Evaluation group for Minor Field Research Studies
	SBU: Swedish Agency for Health Technology Assessment and assessment of social service	Expert for a systematic review on promotion of mental health for children and young
	Swedish Institute for Global Health Transformation (SIGHT)	Member, representing Umeå university in a network of Swedish universities
	SASUF – a South African-Sweden University Forum funded by STINT strategic innovation program	Member, Academic Advisory Committee on behalf of Umeå University for the theme “Burden of disease & health systems”
	Family law and parental support authority	Member, Reference group concerning parental support
	Save the Children Sweden – Rädda Barnen	Chair of the Västerbotten district
	Swedish Research council for Health, Working Life and Welfare (Forte)	Chairperson of review panel (health promotion and behaviour)
Urban Janlert	Socialmedicinsk tidskrift	Chairperson of the board

Håkan Jonsson	Swedish Association of Local Authorities and Regions (SKR)	Member of national working group for mammography
	The National Board of Health and Welfare	Member of groups for revision of national recommendations and evaluation of mammography screening
Marie Lindkvist	Umeå university	Member of the council for internationalisation of education (RIU)
	TropEd, Network for education in international health	Acting President
Kristina Lindvall	European Centre for Disease Prevention and Control	Advisory board member on the project "Updating Core Competencies in Applied Infectious Disease Epidemiology"
Nawi Ng	Hanoi University of Public Health, Vietnam	Member of the International Publishing Adviser
	Gadjah Mada University, Indonesia	Member of Scientific Advisory Committee for Sleman HDSS
Maria Nilsson	The Royal Swedish Academy of Science	Member of the Health Committee
	Lancet Countdown on Climate Change and Health - global	Co-Chair WG 2
	Lancet Countdown - Europe	Board member
	Umeå University	Chair
	UTRI - Umeå Transformation Research Initiative, Umeå University	Member, Faculty board, Faculty of Medicine
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Faustine Kyungu Nkulu Kalengayi	Swedish Platform for global SRHR issues	Member
	Posithiva gruppen	Member of the reference group
Lennarth Nyström	Joint Research Centre, Ispra, Italy	Member of the expert group for "3P: Positive Pregnancy Peers project"
Raman Preet	Swedish Society of Medicine	Expert, European Guidelines for breast cancer screening and diagnosis
Linda Richter Sundberg	Ministry of Health, Sweden	Member, Committee for Global Health
	Socialmedicinsk tidskrift	Scientific advisor concerning Knowledge governance and implementation in the Swedish Health System
	Swedish Association of Psychologists	Board member
	Umeå University	Member of the Ethical board Coordinator
		Network for implementation science and practice In the Northern Sweden
Klas-Göran Sahlén	Umeå University	Member of the Education Strategic Committee, Medical faculty
		Board member, CERUM
Miguel San Sebastián	International Journal for Equity in Health	Hiring and Docent Board, Faculty of Medicine
Jon Petter Stoor	Sámi parliament, Norway	Associate editor
	Lancet	Member of Ethical review board on Sámi health research, Norway
		Member, Lancet commission on Arctic Health
	Sámi parliament, Sweden	Member, Lancet commission on Suicide and suicidal behavior
	Umeå University	Advisory consultant, the new Swedish national plan for mental health and suicide prevention
Sun Sun	EuroQol Group	Board member, UTRI-YRN (Umeå Transformation Research Initiative young researchers network)
	ISPORE	Member, and Member of Membership Review Committee
Moses Tetui	Frontiers in Women's Health	Member
	Kitchener-Waterloo4 Ontario Health Teams, Canada (KW4OHT)	Guest editor
	Makerere University, School of Health Sciences, Uganda	Member, Community Council Design Committee (CCDC)
	University Research Council Company URC	Member, Research and Ethics Committee
Lars Weinehall	Umeå University	Implementation Science Consultant
	Swedish Association of Local Authorities and Regions	Member, Faculty of Medicine committee on ethical issues
		National program initiative on healthy lifestyle in health service (Chair)

Publications

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- Allebeck P, Janlert U. *Fifty years of Nordic social medicine and public health: snapshots of a journal*. Scandinavian Journal of Public Health. 2022;50(7):827-830.
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Master of Public Health Theses

2022:01 **Andrea Manzano García**. Cost-effectiveness analysis of screening three-year olds for social-emotional problems with the ASQ:SE in Sweden. *Master thesis in public health*. Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:02 **Victor Eseoghene Adams**. Rural and urban disparities in smoking behaviors among men in Nigeria. A decomposition analysis. *Master thesis in public health*. Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:03 **Sebat Abdulkadir Ali**. Prevalence and predictors of smoking in Northern Sweden. A population-based cross-sectional study. *Master thesis in public health*. Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:04 **Ebrima Barrow**. Determinants to socioeconomic inequalities and rural urban disparity in stunting among children under five years in the Gambia –a decomposition analysis.

Master thesis in public health. Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:05 **Mahtab Farrokhi.** The lifestyle characteristics of 3-years-old children are associated with the socioeconomic status of their parents Västerbotten, northern Sweden. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:06 **Tun Lin Kyaw.** Cost-effectiveness of using digital tools for behaviour change interventions among people with chronic diseases. A systematic review. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:07 **Nazanin Zakeri.** Facilitators and barriers of engaging in healthy lifestyle in Iranian adolescents during the covid-19 pandemic. A qualitative study protocol. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:08 **William Agyapong Opere.** Socio-economic and systemic risk factors associated with self-reported visual impairment among older adults in Northern Sweden. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:09 **Emerson Njokah Wepngong.** Prevalence, characteristics and patterns of burn injuries in four hospitals in Cameroon. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:10 **Winifred Ali.** The role of psychoeducation in reducing the burden of care for relatives of patients with schizophrenia - A scoping review. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:11 **Hien Bui Thu.** Cervical cancer screening by co-testing method for Vietnamese women 25 to 55 years old A Cost – Effectiveness Analysis. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:12 **Fethi Mohammed Yusuf.** Gender differences in overweight and obesity among adult in Northern Sweden: Blinder-Oaxaca decomposition analysis. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:13 **Mary Omolabake Olaleye.** Healthcare Financing for Universal Health Coverage in Nigeria; What is the way forward? a scoping review. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:14 **Winnie Apolot.** Modelling the cost effectiveness of facilitated physical activity in the reduction of Asthma exacerbations caused by comorbidities in Sweden, Västerbotten. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:15 **Suha Alseddig.** Health and Lifestyle of preschool children with migrant background in Sweden: An outcome-wide epidemiology study. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:16 **Willard Mangulenje.** Cost-effectiveness evaluation of multidrug-resistant tuberculosis (MDR-TB) treatment in Malawi. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:17 **Emmanuel Ndayishimiye.** Modern contraceptive use and associated factors among women of reproductive age in Rwanda. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:18 **Habab Rahma.** Socioeconomic and cultural factors associated with refraining from buying prescribed medications among the Sámi population in Sweden. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:19 **Menayit Tamrat Dresse.** The unseen collateral damage of the pandemic: prevalence and determinants of healthcare avoidance during the COVID-19 pandemic among the Sámi population, Sweden. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:20 **Robert Ssooka.** A quantitative study exploring the associations between social capital, social demographic factors and mental wellbeing among people (16-84 years) in Northern Sweden. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:21 **Amin Ahmed.** Prevalence and socioeconomic factors associated with stress in northern Sweden. *Master thesis in public health.*

Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:22 **Isa Maria Dos Santos Resende.** A human rights-based approach to assess and improve maternal healthcare to incarcerated women in Brazil. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:23 **Fatou Sanneh.** Risk factors associated with hypertension among pregnant women in The Gambia: A cross-sectional study. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:24 **Nishat Sultana.** Importance, Challenges and Future Considerations of Pharmacovigilance in Oncology: A Scoping Review for Resource-Limited Countries. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:25 **Dianah Aluoch Olonde.** Cost-Effectiveness Evaluation of Schistosomiasis Control and Elimination Interventions in Sub-Saharan Africa. A Markov Modelling Study for Schistosomiasis Haematobium. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:26 **Ingyin Moe.** Disparities in Dental Health. A cross-sectional study to identify socio-economic inequalities in self-rated dental health among the adult population in Sweden based on Health on Equal Terms Survey. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:27 **Sahar Soomro.** The salutogenesis approach in investigating factors contributing to mental well-being among the indigenous Sámi people of Sweden. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:28 **Eliphaz Tuyisenge.** Determinants of wealth inequality in intimate partner violence against women in Rwanda: A Wagstaff-type decomposition analysis based on the Rwanda Demographic Health Survey 2019-2020. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:29 **Afsana Hossain Sharna.** Too early to become a mother. A cross-sectional study on socio-economic & demographic determinants of adolescent pregnancy among ever-married young women in Bangladesh. *Master thesis in public health.* Umeå International School of Public

Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:30 **Harsha Kumari.** Rural-Urban differences in Cervical Cancer Screening among Indian Women An Oaxaca Decomposition Analysis. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:31 **Nora Rönngren.** Prevalence and determinants of help-seeking among women who had been experienced intimate partner violence in Haiti. A cross-sectional study. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:32 **Johanna Pettersson.** Avoiding healthcare during the COVID-19 pandemic. A multilevel analysis based on the Swedish national public health survey 2021. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:33 **Henok Mulatu Teferi.** Urban-Rural Inequalities in Unmet Need for Family Planning among Reproductive-aged Women in Ethiopia A Blinder-Oaxaca Decomposition Analysis. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:34 **Ludvig Norgren Guldthag.** "Även om hon var med, så blir hon lite på kanten ändå på något sätt". En kvalitativ hälsosystemutvärdering av projektet Västerbotten utan Gränser baserad på NASSS-ramverket. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

2022:35 **Meenu Meenu.** Research protocol. Exploring young women's experiences of being sexually harassed in public spaces in Punjab: a qualitative study. *Master thesis in public health.* Umeå International School of Public Health, Department of Epidemiology and Global Health, Umeå University 2022. (DiVA)

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