Norwegian Forum for Global Health Research

GLOBAL HEALTH NORWAY

Global Health, Stronger Together

20 years of the Norwegian Forum for Global Health Research |
10 years of Global Health Norway



Contents

4 Preface

6 The Story of Global Health Norway & Norwegian Forum for Global Health Research

8 Two Research Schools in Global Health

10 Global Health Research at the Research Council of Norway

12 NORHED - Capacity Development in Higher Education and Research for Development

14 Perspectives from Young Scholars in Global Health

17 Haukeland University Hospital

18 Nord University

20 The Norwegian Institute of Public Health (NIPH)

22 SINTEF Digital

24 Norwegian University of Life Sciences (NMBU)

26 Norwegian University of Science and Technology (NTNU)

28 Norwegian Veterinary Institute

29 Safer Births research consortium

30 Oslo Metropolitan University (OsloMet)

32 University of South-Eastern Norway (USN)

34 The University of Tromsø - The Arctic University of Norway (UiT)

36 University of Bergen (UiB)

38 University of Oslo (UiO)

40 University of Stavanger (UiS)

42 Oslo University Hospital (OUS)

43 Acknowledgements and credits

Preface

It is a great pleasure to introduce this anniversary publication, marking 20 years of the Norwegian Forum for Global Health Research and 10 years of Global Health Norway.

An anniversary is an opportunity not only to look back, but also to consider what we have learned and where we go next. Much has changed over the past decade. The COVID-19 pandemic, climate change, war and geopolitical instability, a growing global shortage of health workers, and increasing pressure on international cooperation have underscored how closely health is connected across borders, and how essential knowledge, strong institutions and resilient health systems are.

Norway's global health community has evolved as well. For two decades, the Forum has been an important arena for strengthening global health research and international research collaboration. The establishment of Global Health Norway broadened this community, bringing together universities, university colleges, research institutes, regional health authorities, hospitals and other actors. Research remains fundamental, supported over the years by major national programmes for global health research and capacity development. The Norwegian Research School in Global Health for Sustainable Futures now provides an important platform for developing and connecting a new generation of researchers across institutions and disciplines.

A particularly important development has been the closer integration of research, education and clinical practice. Norwegian regional health authorities and hospitals are increasingly engaged in long-term institutional partnerships with hospitals, universities and training institutions in other countries. These collaborations encompass specialist and nursing education, research, patient safety, quality improvement and the development of clinical services. They demonstrate the value of connecting academic knowledge with clinical practice and of building institutional capacity over time.

Our understanding of effective global health collaboration has also changed. Equitable partnerships, local ownership and locally led priorities must be at the centre of our work. The goal is not to create dependency, but to strengthen expertise, institutions and systems that endure. Training health professionals, researchers and leaders within their own institutions is essential to sustainable health systems and can help address the loss of skilled health workers from countries already facing severe workforce shortages. At the same time, learning is reciprocal: international partnerships bring knowledge and perspectives that strengthen our own institutions and services.

Looking ahead, these questions are becoming even more important. The Norwegian Government's *Vendepunkt* initiative, which will inform a new White Paper on development policy, opens an important discussion about future priorities. What role should research, higher education, health services and long-term institutional partnerships play in Norway's global engagement? How can we make the best use of Norway's expertise while ensuring that priorities are locally defined and that investments contribute to lasting capacity and stronger health systems?

Global Health Norway should be an active, evidence-informed voice in this discussion. In the years ahead, we want to strengthen dialogue between Norway's global health community and public authorities, so that knowledge and experience from research, education and the health services can inform policy development. As a national network, we have a particular opportunity to connect institutions and sectors, strengthen collaboration, and build bridges between research, education, clinical practice and policymaking.

This publication reflects the breadth of Norwegian global health and the people and institutions that have shaped the field. The past twenty years have shown that lasting progress is built through knowledge, trust, long-term commitment and equitable partnerships. As we celebrate what has been achieved, our task is to carry those lessons forward and use them to shape the next chapter of Norwegian global health.

My sincere thanks to everyone who has contributed to the Norwegian Forum for Global Health Research and Global Health Norway over the years, and especially to our international partners.



Kristin Schjølberg
Chair, Global Health Norway



Thorkild Tylleskär
Chair, Norwegian Forum for Global Health Research

The Story of Global Health Norway & Norwegian Forum for Global Health Research

In the spring of 2013, the Ministry of Health and Care Services (HOD) in Norway launched a national research and innovation strategy known as HelseOmsorg21. Its vision was: 'Knowledge and innovation for better public health'. One of the strategy's focus areas was 'Global Health Challenges', and a key recommendation was the establishment of a Norwegian Global Health Institute. This proposal was based on the recognition that Norwegian public health and healthcare services are increasingly influenced by international and global developments that require solutions through international and intergovernmental cooperation. Furthermore, as a prosperous nation, Norway has a particular responsibility to help address knowledge gaps related to health challenges that do not primarily affect its own population but instead, disproportionately affect countries and populations facing greater health burdens, more limited economic resources, and less developed research and innovation systems.

At the same time, Norway already had significant activity in this field. The Norwegian Forum for Global Health Research was established in 2006 with the aim of strengthening knowledge exchange and research collaboration among Norwegian institutions engaged in global health. The initiative originated when two professors, Gunnar Bjune of the University of Oslo and Gunnar Kvåle of the University of Bergen, met and developed the idea. Together, they founded the Forum and established a close co-operation with the Research Council of Norway. This partnership proved highly successful and enabled the organization of several major global health research conferences in Norway.

The existence of a well-functioning Norwegian Forum for Global Health Research presented a challenge to the proposal of a new institute. Rather than creating a parallel structure, the objective became to amplify and strengthen the impact of the work already being carried out. However, because no government funding was allocated for the establishment of a new institute, the proposal evolved into the creation of a national network rather than an institute. This network, Global Health Norway (GHN), was formally established in May 2016 by the *Nasjonal samarbeidsgruppe for helseforskning i spesialisthelsetjenesten (NSG)*, which translates to National Collaboration Group for Health Research in the Specialist Health Care Services. A working group was appointed consisting of two deans, two regional health directors, and the chair of the Forum, who served as secretary. The GHN Board was established in January 2017.

Initially, the network comprised nine member institutions, each of which paid an annual membership fee. These institutions were the University of Oslo, the University of Bergen, The University of Tromsø – The Arctic University of Norway, the Norwegian University of Science and Technology (NTNU), the four Regional Health Authorities, and the Norwegian Institute of Public Health. Parallel to this process, the Forum's statutes were revised in 2017. The Norwegian Forum for Global Health Research was transformed into a mem-

bership-based association for individual members without a membership fee. The revised statutes also clarified the relationship between the Forum and GHN, emphasizing the scientific and academic support that the Forum could provide to the network. The co-operation between GHN and Forum has remained strong over the years. GHN has provided financial support for the organization of conferences, while the Forum has contributed its scientific expertise and has been responsible for developing the academic content and programmes of these events.

The global health community in Norway is relatively small, making it essential to avoid duplication of effort through overlapping networks and structures. Rather than creating parallel activities, the goal has been to maximize synergies and strengthen collaboration, thereby increasing the overall impact of the work being carried out in the field of global health.

Two Research Schools in Global Health

One important fruit of the increased collaboration between global health actors in Norway is the creation of the Norwegian Research School of Global Health in 2016 and its continuation in 2025: Norwegian Research School in Global Health for Sustainable Futures. The Research Schools have enabled higher quality PhD-training and more networking among PhD-candidates and postdocs in the field.

It started as an idea within the Norwegian Forum for Global Health Research. The board saw the potential of bringing together PhD candidates from the Global North and Global South in a research school focused on discussing relevant global health issues. In 2015, a consortium of Norwegian universities came together and applied to establish a research school, in response to a call from the Research Council of Norway.

By 2016, The Norwegian Research School of Global Health (NRSGH) was established through the collaborative efforts of the Norwegian University of Science and Technology (NTNU), University of Oslo (UiO), University of Bergen (UiB), The University of Tromsø – The Arctic University of Norway (UiT), and the Norwegian Institute of Public Health (NIPH), with the financial support from the Research Council of Norway (RCN). It had the explicit purpose of *"strengthening the quality of the PhD education in global health"* and of building a sustainable network of early career researchers.

The funding enabled the Research School to offer courses, seminars, workshops, mobility and international travel grants, and to organise annual PhD conferences. Student evaluations show high levels of satisfaction, improved research writing skills, expanded professional networks and a clear career planning impact. During the funding period there have been more than 250 PhD candidates benefitting from the school.

One participant reflected:
"I really enjoyed getting to know people from other universities and other disciplines. We often are surrounded by likeminded people, and risk losing the interdisciplinary scope of global health. So, I think that was most useful for my own research project."

Participants also highlighted the benefit of thematic groups in this interdisciplinary context and having the opportunity to establish contact with people working on related research projects.

The most popular activities have been the PhD/post doc conference and writing course activities, as well as networking with senior researchers. Organised supervision courses were also arranged both for the students – "How to gain much out of your supervision", and for supervisors with the very important topic "Expectation clarification".

With the huge success of the research school, there was a strong energy to secure new funding, and this was achieved. With renewed funding from the Research Council of Norway, the new *Research School in Global Health for Sustainable Futures* was established in 2025 to run until 2033, with UiB as the coordinator alongside twelve partner institutions.



Annual Conference 2021 on Hurtigruten, from Tromsø to Trondheim. Topics covered during the conference: "Popular science communication", "Phases of the PhD process" and "How to survive as a PhD-student - Mental Health" Photo: Thorkild Tylleskär, UiB.



Annual PhD/Postdoc Conference 2025 in Bergen. Photo: Eivind Senneset.

To join the new research school, you need to be a PhD or an early career researcher (including PostDocs) with a global health related research topic. You will get access to: An annual PhD/ Postdoc conference, a variety of grading courses, relevant webinars, national and international travel grants and a comprehensive network in your field of research.

Norwegian Research School in Global Health for Sustainable Futures
Click the QR code to learn more.

Global Health Research at the Research Council of Norway

Global health has been a targeted priority for the Research Council of Norway since 2006. Through support for research, innovation, researcher training, and networking, Norwegian global health research environments have been strengthened, contributing to internationally leading expertise and long-term equitable partnerships with researchers in low- and middle-income countries. These collaborations have generated new knowledge, innovative solutions, and improved health outcomes.

A key instrument was the GLOBVAC programme (2006-2020), which funded research, innovation, and researcher recruitment while supporting the Norwegian Forum for Global Health Research, the Norwegian Research School of Global Health, and the annual GLOBVAC conference.

Since 2020, global health has remained a dedicated priority within the Portfolio for Democracy and Global Development, with continued support for research, collaboration projects, pre-projects,







and the Norwegian Research School in Global Health for Sustainable Futures.

In total, since 2012, the Research Council has funded 81 research and collaboration projects, 9 Young Research Talent projects, 6 personal PhD fellowships, 5 innovation projects for the industrial sector, 23 events, and 33 pre-projects in addition to the Research Schools and the Norwegian Forum for Global Health Research.

The investments have supported a broad range of topics, including infectious diseases, maternal and child health, health systems strengthening, social determinants of health, and health technologies. The Norwegian Research School of Global Health and Young Research Talent grants have helped build a new generation of researchers, several of whom are today leading experts within their fields addressing key global health challenges.

Funded projects have contributed to innovations such as Laerdal Global Health's Safer Births initiative and the RemovAid™ device, to the development of an effective Ebola vaccine and innovative outbreak response strategies, and to new diagnostics for tuberculosis and cryptosporidiosis. The portfolio has also generated important evidence informing WHO guidelines on malaria prevention and digital health interventions, and contributed to broader health systems research on the financing, organization and delivery of health services in low- and lower-middle-income countries.

Norway has participated in the European–African partnership EDCTP since its inception in 2004. Participation in EDCTP has been an important part of the Research Council's investment in global health. In the current EDCTP3 programme (2021–2031), Norwegian research institutions have so far participated in 13 collaborative projects, including 6 coordinated by Norwegian institutions, contributing to research on poverty-related infectious diseases and strengthening research capacity in sub-Saharan Africa.

As we mark two decades of dedicated investment in global health research, we thank the Norwegian Forum for Global Health Research and the many researchers, institutions, and partners who have contributed to building a strong and lasting global health community. We look forward to continuing this partnership and advancing global health together in the years ahead.

Democracy and Global Development
Click the QR code to learn more.

NORHED - Capacity Development in Higher Education and Research for Development

The Norwegian Programme for Higher Education and Research for Development (NORHED) administered by Norad is Norway's flagship initiative for strengthening higher education and research in developing countries. Over the past decade, Norwegian global health research communities have played a central role in this effort. Through long-standing collaboration, they have built strong research networks, enduring institutional partnerships, and valuable opportunities for academic exchange. Norwegian researchers have made a particularly important contribution as supervisors and mentors for students and early-career researchers from the Global South.

Across both NORHED I (2013–2020) and NORHED II (2021–2027), the programme has contributed to strengthen education systems, the training of a skilled and relevant workforce, increased research output, and tangible changes in health policy and practice in partner countries.

From its launch in 2013 through 2025, NORHED supported the development or improvement of 775 study programmes, primarily at the master's and PhD levels. It contributed to more than 2,870 peer-reviewed articles, strengthening research-based teaching and expanding the participation of researchers from the Global South in international knowledge production. More than 6,700 students have received scholarships, 46% of whom were women. Of the 4,549 full-degree scholarships, 1,006 have supported PhD candidates, 2,915 master's students, and 269 postdoctoral fellows. Importantly, most scholarships were awarded to staff at partner institutions in the Global South, thereby strengthening both research capacity and the quality of teaching. As most degrees are completed in the students' home countries, the programme also promotes sustainability and builds institutional capacity where it is most needed.

Health is NORHED's largest thematic area, accounting for 24% of all projects, and making a significant contribution to the health sector in partner countries. Projects in nutrition, public health, One Health, midwifery, surgical training, maternal and neonatal health, and other areas contribute to building a skilled workforce while generating knowledge directly relevant to national priorities and health systems.

Among NORHED's many achievements, the following examples illustrate the breadth and impact of the programme's contribution to global health.

In Malawi, collaboration between academic institutions and hospitals has strengthened surgical training and established specialist programmes in neurosurgery, urology, and paediatric surgery. The project trained 35 surgeons and increased the ratio of surgeons from 0.1 to 0.2 per 100,000 inhabitants between 2013 and 2020. It also strengthened national research, improved treatment practices, and enhanced the quality of surgical services.

In Malawi and Mozambique, collaborative research has informed policy changes that support more appropriate antibiotic use and improved management of infectious diseases.

In the field of primary health care, a leadership training programme has been established in Malawi and Zambia. By linking academic research with day-to-day management in resource-constrained health systems, the programme provides participants with mentoring, training, and practical tools for planning and decision-making. In doing so, it strengthens leadership capacity and demonstrates how universities can contribute directly to more effective primary health care services.

In Zambia, Uganda, and South Sudan, a NORHED-supported One Health project has established new postgraduate programmes in One Health and zoonotic diseases. The project has generated important research data, produced 20 scientific articles, and worked closely with local communities through awareness-raising, training, and dialogue on disease prevention and risk reduction.

In Tanzania, a NORHED project aligned with the country's inclusive education policy has promoted gender equality in research training and strengthened research into health challenges affecting marginalized groups, including sex workers and men who have sex with men. Through new PhD courses, enhanced supervisor training, and improved quality assurance developed in close collaboration with the national quality assurance body, the project aims to establish a model with broader national relevance.

NORHED's success lies not only in the scale of its achievements, but also in the nature of its partnerships. The programme is built on long-term collaboration between Norwegian universities and universities in the Global South, often within broader North–South–South networks. These partnerships are anchored both institutionally and personally, and they grow through mutual trust, shared ambitions, and shared responsibility.

On the occasion of this anniversary, we extend our gratitude to Norway's global health academic community—for its commitment, collaboration, and lasting contribution to stronger institutions, better health systems, and new generations of researchers and professionals across the Global South.

NORHED II 2021-2026
Click the QR code to learn more.

Perspectives from Young Scholars in Global Health



Anand Bhopal

Affiliations: Primary: Global Health Cluster, Norwegian Institute of Public Health; Secondary: Bergen Centre for Ethics and Priority Setting in Health (BCEPS), University of Bergen

I work at the Norwegian Institute of Public Health where I primarily support Africa CDC in implementing its Climate Change and Health Strategic Framework and lead the secretariat of the Lancet Regional Health – Europe Commission on climate change, migration, displacement and health. At the University of Bergen my research focuses on the ethics of environmentally sustainable health systems and the integration of climate change concerns into fair priority setting.

I became aware of global injustice first-hand at a young age and was always interested to understanding the political, economic and historical forces that shape who lives and who dies. A year in India before medical school turned that broad interest into a commitment to global health which I pursued throughout my studies, through student groups, summer clinical placements, research projects and advocacy, and have continued in different forms ever since.

Amid daily news of climate breakdown, political polarisation and devastating armed conflicts, optimism can be hard to hold on to. For me, the answer is to try to understand the present well enough to be able to imagine alternative futures, avoid the same old pitfalls and make the case for continuing to invest in health. We powerful story to tell and strong international partnerships will be increasingly important in turbulent years ahead.



Grace Wezi Mzumara

Affiliations: PhD Candidate, University of Bergen and Training Research Unit of Excellence, Malawi.

My name is Grace Mzumara, and I am a PhD candidate at the Faculty of Medicine at the University of Bergen. My project is estimating how much governments spend to care for children with malaria and anaemia, and how much families spend to access the care in Malawi, Kenya and Uganda. I am also evaluating the cost-effectiveness of a new intervention to prevent sick visits and re-admissions in children hospitalised with malaria and anaemia in these countries.

While working as a medical doctor in Malawi, I got interested in global health because I wanted to learn how to make health care decisions that affect patients and the community. This led me to pursuing an MSc in International health and Tropical Medicine. Now, as I study how the health care system is financed, I think the future of global health will be about how governments are dedicated to protecting families from financial harm when accessing health services. This is because systems for health financing are changing in low- and middle-income countries. It is now more important to prioritise services for universal health coverage and advance equitable public health insurance.



Castory Munishi

Affiliation: PhD Candidate, University of Bergen

To contribute to building stronger evidence for prevention, I am pursuing a PhD at the University of Bergen titled “Aligning Global Public Health and Specialized Care: Evaluating the Costs and Effects of Public Interventions for Lifestyle Risk Factors Using Mathematical Modelling.” My project focuses on developing models to estimate the cost-effectiveness of public health interventions such as tobacco taxation, sugar taxation, and building walkable cities in low- and middle-income countries.

My motivation for pursuing this project is grounded in my academic background, practical experience, and passion for public health, big data analytics, and health economics. I aim to explore how public health interventions can be integrated into health benefit packages, working with the Fair Choices team. I see the future of global health as increasingly focused on disease prevention and efficient resource allocation using health technology assessment. Most NCDs are chronic and costly to treat, making prevention increasingly important as the global population ages. At the same time, shifting political priorities and reduced funding for healthcare, particularly in the Global South, are placing greater constraints on already limited health resources. This further strengthens the case for preventing diseases rather than relying primarily on costly long-term treatment.



Sine Grude

Affiliations: PhD Candidate, Department of Community Medicine and Global Health, University of Oslo; Resident doctor, Akershus University Hosptial

My involvement in global health was shaped by a course in social medicine and global health I attended in Uganda at the beginning of 2020. Learning alongside colleagues from across the globe has shaped my views and discourse in the field ever since. I use ethnography to study how the Tanzanian health system shape practices related to antibiotic use and antimicrobial resistance (AMR) in the clinic, and how global AMR policies play out within local settings. AMR disproportionately affects low- and middle-income countries, while global health priorities are often set by high-income countries. That leads me to another research project I am currently immersed in on the ongoing global health architecture reform. There is an opportunity now to shift some of the structures that shape health inequities. I hope we will succeed in building an architecture that better equips us to tackle future global health challenges such as climate change, antimicrobial resistance, and pandemics. With a marked reduction in funds for global health, it is both a challenge and an opportunity to reduce fragmentation and duplication in the system, while making sure that states are able to set their own health priorities rather than having funder agendas imposed on them.



Lilongwe Institute of Orthopaedics and Neurosurgery (LION), Lilongwe, Malawi. Photo: Sven Young.

Haukeland University Hospital

Sustainable surgical capacity and research in Malawi, 2016–2026

For Haukeland University Hospital (HUH), global health is a partnership-based approach to strengthening healthcare systems through capacity building, knowledge exchange, and long-term institutional collaboration. HUH addresses global health challenges through a win-win perspective and mutual learning based on collaboration with selected partner hospitals in the Global South. We aim to strengthen healthcare services both in the communities served by our international partners and in Western Norway, based on the priorities and needs of each partner institution, and by concentrating on selected clinical specialties at each institution in the south.

Specialist training, capacity building, research and supportive infrastructure are central components of HUH's international partnerships.

Ten-year snapshot

HUH's partnership with Kamuzu Central Hospital (KCH) in Lilongwe, Malawi began in 2007. It has grown from clinical support including staff exchange through Norec supported programs to also include specialist education, research, infrastructure and patient care.

Research addresses trauma and musculoskeletal disease, surgical outcomes and safety, health-system costs, and affordable treatment. Norad financed NORHED I and II, supporting the UiB–KUHeS (Kamuzu University of Health Sciences) partnership alongside HUH, KCH and Queen Elizabeth Central Hospital (QECH) in Blantyre. NORHED I delivered 127 peer-reviewed publications, 19 specialist graduates during the programme after 16 afterwards, as well as four completed PhDs. NORHED II strengthens surgery, orthopaedics, neurosurgery, anaesthesia and radiology.

A defining achievement was the opening of the Lilongwe Institute of Orthopaedics and Neurosurgery (LION) in 2023. The Mohn family from Bergen financed most of LION's infrastructure, complementing Norad's investment in people, education and research. LION combines public clinical services, training, and locally led research.

Equity is advanced through in-country training, Malawian leadership, women's participation and locally shaped research. Partners include KUHeS, KCH, QECH, the Ministry of Health (Malawi), UiB, Norad, Norec, the Mohn family, AO Alliance and Christian Blind Mission (CBM).

Looking ahead, priorities are sustainable Malawian specialist leadership, stronger research systems, rehabilitation, patient safety and evidence that enables affordable surgical care.

Haukeland University Hospital: NORHED
Click the QR code to learn more.

The Lilongwe Institute of Orthopaedics and Neurosurgery
Click the QR code to learn more.

Nord University

At Nord University, we understand Global Health as research and education addressing health and health inequalities across populations and settings, with particular attention to the systems, social, environmental and structural factors that shape access to and quality of care. Our approach emphasises interdisciplinary collaboration, equity, meaningful engagement with communities and partners, and translating evidence into sustainable improvements in health and healthcare.

Research themes and main global health projects at Nord University

Key themes are: (1) maternal health; (2) implementation science and health-system strengthening; (3) co-design and community engagement; (4) health-worker capacity and quality of care; (5) equity in maternal health; (6) one Health; and (7) environmental health.

Dr Maria Lisa Odland has recently joined Nord University but has conducted research to improve access to quality healthcare in low-resource settings for over a decade. Her main focus has been postabortion care and maternal health, particularly in Malawi, alongside research on access to care for injuries, surgery and cardiovascular disease in Sierra Leone, Ghana, South Africa, Rwanda, Brazil and Pakistan. A defining feature of this work is translating evidence into sustainable improvements in care and examining how health systems, health workers, communities and families can work together to improve quality, uptake and continuity of care. Her work combines rigorous research with co-design, implementation science and meaningful engagement with local stakeholders.

Another major project at Nord University is ArcSolution, initially led by the late Professor Jon Øyvind Odland. The ArcSolution project, funded by an EU call on ZeroPollution, will map and evaluate the impact of different stressors (pollutants, infectious diseases) in the Arctic environment. There are six study sites, located in Norway, Svalbard, Finland, Greenland, the Faroe Islands and Arctic Canada, where the focus is on organic chemicals, mercury, plastics and pathogens and on pollution that is locally concerning. The ArcSolution project will co-create activities and solutions, e.g., sewage treatment mitigation strategies, with local experts. Over the four-year ArcSolution project, the project focuses on Arctic pollution from a One Health perspective, providing sustainable solutions to complex environmental health challenges.

Partnerships, capacity strengthening and equity

Nord University's Global Health work is grounded in international partnerships. Maria Lisa Odland has strong collaborations in sub-Saharan Africa, particularly with the Malawi Liverpool Wellcome Programme and the Botswana Sexual and Reproductive Health Initiative. Also, ArcSolution is a multi-country project with close collaborations with several countries and universities in the Arctic. Capacity strengthening is embedded through collaborative research leadership, mentoring, training, methodological development and opportunities for researchers and health professionals to lead locally relevant research.

Looking forward

Over the coming years, the priority is to continue developing research designed with communities



Training in Manual Vacuum Aspiration at Queen Elizabeth Central Hospital in Blantyre, Malawi, 2016.

rather than for them, strengthen interdisciplinary Global Health and One Health collaboration, and contribute to sustainable improvements in maternal, reproductive and environmental health. A key opportunity is to build on strong international partnerships and methodological expertise while drawing on Nord University's strengths in health, sustainability and the Arctic.

Arctic pollution in a One Health perspective
Click the QR code to learn more.

The Norwegian Institute of Public Health (NIPH)

The Norwegian Institute of Public Health (NIPH) is a government agency under the Ministry of Health and Care Services. NIPH's Global Health portfolio is distinctive as it integrates research, knowledge support and implementation within a public health institute, linking evidence, policy and practice to address real-world health challenges. The vision is *"sustainable health systems to ensure better health for all"* and the mission is *"working in equitable partnerships globally to support and strengthen public health institutions and systems"*.

Ten-year snapshot

Since the Global Health Cluster was established in 2012, NIPH has developed into a central hub for global health research and implementation at the institute. The work combines research and twinning approaches (institutional partnership that promotes mutual learning and improvement through collaboration and the exchange of knowledge, skills, and experience) for health systems strengthening. A hallmark of NIPH's approach is the close integration of research and implementation: research questions are developed with partners and grounded in real-world needs, while implementation activities are evidence-informed and used to generate learning to inform policy and practice.

> Working in equitable partnerships globally to support and strengthen public health institutions and systems.

The cluster has strong long-term collaboration with public health institutions, universities, health ministries, regional organisations and global partners. Through Norad-funded institutional collaborations and research projects funded by the EU and the Research Council of Norway, NIPH has together with partners contributed to stronger public health institutions and systems, improved use of evidence in decision-making, digital health innovation, and capacity development in low- and middle-income countries. The cluster received excellent scores for research production, publication quality and societal contribution in the Research Council of Norway's evaluation of medicine and health sciences.

Research Themes

NIPH's global health research is organised around five closely connected themes: Digital Health, Infectious Diseases, Non-Communicable Diseases and Mental Health, Evidence-Informed Decision Making, and Climate Change and Health.

Examples of flagship work include "Building Stronger Public Health Institutions and Systems", a long-term Norad funded twinning-based programme with sister public health institutions and regional/global partners. BIS combines institutional collaboration, capacity strengthening and implementation research to support stronger public health functions and more resilient health systems. Through these partnerships, BIS has contributed to stronger institutional capacity, greater use of evidence in decision-making, and improved collaboration across national, regional and global public health networks.

Another flagship is the eRegistries program "Digital registries for maternal and child health", focusing on implementing digital health registries and other digital health interventions together with primary health care providers in collaborating countries. The program evaluates digital health interventions through intervention and



Structured group discussion from co-design workshop with health facility in-charges and Municipality officials in Nepal

implementation science and registry-based epidemiology to generate robust evidence to inform scale-up. The aim is to support provision of evidence-based healthcare and improve uptake in the health system. Over 30 masters, PhD, and Post-doctoral Fellows across Africa, Asia and Europe have been involved.

Partnerships, Capacity Strengthening, and Equity

NIPH works through equitable, respectful and trustworthy partnerships. Key partners include sister public health institutions and ministries in Ethiopia, Malawi, Nepal, Palestine, Uganda, Ghana, Ukraine and other countries, as well as regional and global organisations such as Africa Centres for Disease Control and Prevention (Africa CDC), World Health Organization (WHO), and the International Association of National Public Health Institutes (IANPHI). NIPH also partners with universities, research institutions and networks.

Capacity development is central to the work (e.g. in BIS) and takes place through a twinning process at several levels: individual capacity (e.g. PhD supervision, workshops); organisational capacity (e.g. technical collaboration and knowledge exchange to support essential public health functions); institutional capacity (e.g. supporting evidence to policy); and regional/global capacity (e.g. through networks and communities of practice).

Equity is integrated both as a mission, research topic and a way of working. Projects are designed with partners, attention to local priorities and context, and a focus on reducing health inequities.

Looking Ahead

NIPH will maintain a strong focus on global health by strengthening public health institutions and systems, advancing implementation research, and continuing its work across established thematic areas, while introducing health security as a new strategic priority. Challenges include a changing global health landscape and reallocation of resources in already stretched health systems. We strive to stand in solidarity with national health authorities in partner countries and deliver good quality outputs together.

Global health
Who we are - NIPH
Click the QR code to learn more.

Global Health
What we do - NIPH
Click the QR code to learn more.

SINTEF Digital

SINTEF is involved in multidisciplinary applied research, innovation and development globally. SINTEF and NTNU have a strategic collaboration on global health. One of our longest standing research and innovation areas concerns initiatives to secure assistive technology (AT) to all in need. The critically large gap between AT need and access has been called "the hidden global disaster" due to low attention and indifference to the need for AT both at national and international levels. A key principle in all our research and innovation projects is equal partnerships with local user organisations, policy makers and researchers.

Key research areas

Knowledge and data: SINTEF has initiated and led 14 large nationally representative studies on living conditions among persons with disabilities in sub-Saharan Africa and in Nepal, collaborating with national authorities and Organisations of Disabled People (OPDs). These studies represent a first generation of comparative and comprehensive data on the situation for persons with disabilities including data on AT need, use and services.

SINTEF was lead research institute on the Rapid Assistive Technology Assessment (rATA) organised by WHO, covering 35 countries. The study captured AT access, need, unmet need, barriers to access and quality of service delivery and was included in the Global Report on Assistive Technology (GReAT) (WHO 2022).

In collaboration with the Norwegian Association of Disabled (NAD), SINTEF has initiated innovation of AT data availability through the exploration of the feasibility of integrating an AT module in existing Health Information Systems in Uganda, Zanzibar and Zambia.



Innovation and production of AT: SINTEF has through the Local Rehabilitation Workshop (LOREWO) concept, established two workshops to improve access to AT and create work for persons with disabilities in Namibia and Zimbabwe in



Schoolgirl testing game-based screening for hearing loss.
Photo: SINTEF.



SINTEF contributed as lead research partner to GReAT.

collaboration with respective health authorities and Organizations of Persons with Disabilities (OPDs).

Local community services: SINTEF and NTNU have worked with community structures and authorities in Tanzania and Ethiopia to establish hearing care services for school children. This was achieved through technological innovation using game-based hearing screening within existing school and health community services.

Looking forward
Continued support to international initiatives to secure AT for all in need, new technological and structural innovation to promote adapted AT and cost-effective supply chains. Further develop collaboration with NTNU through the Gemini Centre "Global Impact".

SINTEF: Health Research
Click the QR code to learn more.

Gemini Centre Global Impact
Click the QR code to learn more.

Norwegian University of Life Sciences (NMBU)

Global health at NMBU

NMBU understands global health as the improvement of health and well-being across people, animals, food systems and environments, with equity and sustainability at the centre. Grounded in a One Health approach, our work connects disease prevention with safe food, resilient ecosystems, responsible resource use, climate adaptation and strong local institutions.

NMBU has a long history of collaboration with academic institutions in the Global South. Several partnerships date back to the 1970s and have focused on research, education and capacity building. During 2016–2026, NMBU has contributed to global health through long-term partnerships in East and Southern Africa, combining research, higher education, field-based learning and institutional capacity strengthening. A defining feature has been the integration of veterinary medicine, environmental sciences, social sciences, agriculture, aquaculture and international development studies.

Safe and resilient food systems in a One Health perspective: NMBU collaborations in Malawi and East and Southern Africa strengthen safe, sustainable food production from livestock and aquatic systems through projects: 1) ECARESA (Enhanced Capacity for Aquatic Resources in East and South Africa - NORAD funded), 2) FORTECASE (Fostering quality graduate and postgraduate training and research through enhanced academic collaboration and mutual student exchange), and 3) EDUPROMO (Promoting higher education through collaboration and exchange - DIKU funded). Work on Zebu cattle, mastitis, milk quality and aquaculture, fish health, environmental toxicology and food safety supports climate resilience, antimicrobial resistance awareness, animal welfare, nutrition, livelihoods and public health.

Environmental pollutants, maternal and child health: In Tanzania, NMBU researchers and partners documented exposure to persistent organic pollutants in mothers and infants, studying breast milk and potential risks to nursing infants in the project "Monitoring and risk assessment of contaminants in Southern Africa: Arusha in Tanzania as a model" funded by Research Council of Norway (RCN). Project SHINE (Sanitation and Hygiene Innovation in Education), aimed at working with youth and communities to help them find simple, low-cost, low-tech ways to improve sanitation and hygiene to reduce diarrheal incidence in rural Tanzania and India.

Neglected zoonoses and One Health implementation: NMBU students contributed to rabies research in Malawi in a project led by the Norwegian Veterinary Institute, Malawi's Central Veterinary Laboratory, LUANAR, veterinary authorities and local animal-health personnel. The project "Improving implementation and operation of a One Health platform to combat rabies in Malawi", funded by RCN, addressed diagnostics, sample transport, surveillance, paraveterinary practice, dog welfare and community-level barriers to rabies control.

Climate adaptation, food security and environmental governance: Our Department of International Environment and Development Studies (Noragric) draws on long-standing experience in East Africa. Jennifer Joy West's work, funded by RCN, highlights the social-science contribution to global health by connecting climate information, sustainability transformations and food security. Work on climate-smart dry-forest governance in Ethiopia further shows how ecosystems, livelihoods, resilience, policy and health are interconnected in practice.



PhD students get practical hands-on training in detection of antimicrobial resistance in zoonotic pathogens at Mbeya University of Science and Technology in Mbeya, Tanzania as part of the EDUPROMO project. Printed with permission. Photo: Eliezer Brown.

Partnerships, capacity strengthening and equity

Capacity strengthening is central to NMBU's global health contribution. EDUPROMO, FORTE-CASE, and ECARESA represent complementary platforms for postgraduate training, staff and student mobility, joint supervision, field courses, laboratory training, scientific writing, biostatistics, bioinformatics, toxicological risk assessment, fish health and One Health education. NMBU also participates actively in NORHED-II, which strengthens higher education and research capacity in the Global South and supports inclusive, sustainable societal development. Key partners in the Global South include the University of Zambia, Makerere University (Uganda), Mbeya University of Science and Technology (Tanzania), the Institute of Marine Sciences at the University of Dar es Salaam (Tanzania), Lilongwe University of Agriculture and Natural Resources (Malawi), Sokoine University of Agriculture (Tanzania), Mekelle University (Ethiopia), and Hawassa University (Ethiopia). NMBU's long-standing collaboration with Hawassa University and Mekelle University in Ethiopia, dating back to the 1980s, is an important example of institutional partnership. The current Institutional Collaboration Programme, Phase V, supports research collaboration, doctoral and master's education and capacity building at Ethiopian universities. NMBU's commitment to global academic solidarity is also reflected in its membership in Scholars at Risk, through which the university supports academic freedom and offers temporary academic positions for scholars facing threats or restrictions.

Looking forward

NMBU will strengthen global health research linking One Health with climate, food systems, pollution, AMR, zoonoses, aquatic health and livelihoods. By building equitable Global South partnerships, supporting laboratories, surveillance and postgraduate education, integrating social and natural sciences, and translating evidence into policy, NMBU can train cross-sector researchers and practitioners worldwide.

NMBU
Click the QR code to learn more.

International Research Cooperation
Click the QR code to learn more.

Norwegian University of Science and Technology (NTNU)

At NTNU, global health encompasses interdisciplinary education, research, innovation and applied work addressing health inequities across borders, especially in low-resource and underserved settings.

Contributing units are the Faculty of Medicine and Health Sciences, including Public Health and Nursing, Clinical and Molecular Medicine, Mental Health, and Neuromedicine and Movement Science, with collaboration from the Department of Design, and the Department of Sociology and Political Science, including CHAIN – NTNU's Centre for Health Equity Analytics.

Ten-year snapshot, including research themes

During 2016-2026, global health at NTNU expanded across health systems strengthening, maternal and newborn health, mental health, global surgery, infectious diseases, antimicrobial resistance, gender-based violence, digital health, humanitarian response and implementation research.

A flagship example is NTNU's long-term collaboration with CapaCare and Ministries of Health in Sierra Leone and Liberia. The partnership has trained more than 100 clinical officers and doctors in essential surgery, delivered over 450 clinical and academic courses, and generated more than 50 peer-reviewed publications, PhD and MSc projects, and innovations in surgical training and system strengthening.

NTNU also has nearly two decades of collaboration in Nepal, particularly with Dhulikhel Hospital and Kathmandu University. Joint work spans maternal and newborn health, mental health, physiotherapy, infectious diseases, emergency care, antimicrobial resistance and gender-based violence. Current projects include Addressing Domestic Violence in Antenatal Care Environments 2 (ADVANCE 2), Strengthening Academic Capacity in Physiotherapy Education in Nepal (NORHED II, Physiotherapy in Nepal), Implementing point-of-care test in Nepal and identifying barriers to reduce antibiotics for vaginal



Dr. Jonathan Vas Nunes demonstrating mesh repair for groin hernia using a 3D-printed model in Masanga, Sierra Leone. Photo: CapaCare.

discharge (POCT-BRA), Childrens Lung Study in Dhulikhel, Nepal (C-LUNG) and Building Healthy Food Environment in Schools: Evaluating Co-created Interventions in Low Resource Settings,

Global health education has also expanded substantially. NTNU established its MSc in Global Health in 2015, helped establish and lead the first Norwegian Research School in Global Health for PhD education, and now co-leads the EU-funded Erasmus Mundus Joint Master HumanResponse: Coordinated Humanitarian Response, Health and Displacement.

Partnerships, capacity strengthening and equity

Across these activities, equity and capacity strengthening are embedded through long-term partnerships, joint supervision, collaborative PhD training, staff and student mobility, support for locally led research, and interdisciplinary work linking health with technology, design and implementation science, such as the PATHS project - Promoting Access to Health Services through Participatory Approach.

Increasingly, NTNU global health researchers collaborate with the Faculty of Architecture and Design, contributing to innovation-oriented work in areas such as health literacy, humanitarian response, digital health, and patient-centred design (for example, the PATHS project—Promoting Access to Health Services through Participatory Approach).

Collaborations with partners such as Picterus AS – a company originally established by NTNU and St. Olavs Hospital researchers and clinicians – have contributed to the development and implementation of scalable newborn health technologies for both high- and low-resource settings, generating multiple MSc theses, PhD projects, and international research collaborations.

This interdisciplinary and innovation-oriented profile is also reflected in NTNU's educational activities. Courses such as Innovation in Global Health and Humanitarian Design and Technology, bring together students from diverse disciplinary backgrounds, while international case challenges developed with Nordic and global partners provide opportunities for collaborative, challenge-based learning on real-world global health and humanitarian issues. These initiatives help strengthen global competencies, foster cross-cultural collaboration, and connect education, research, and innovation.

Faculty of Medicine and Health Sciences: Global Health
Click the QR code to learn more.

NTNU Health and Life Science: Team Global Health
Click the QR code to learn more.

Norwegian SciTech News: Cutting maternal deaths in Sierra Leone
Click the QR code to learn more.

Norwegian Veterinary Institute

Improving rabies control through One Health
The Norwegian Veterinary Institute contributes to global health by strengthening One Health collaboration to prevent and control zoonotic diseases, improve food safety, and support food security.

One example is the project: **Improving implementation and operation of a One Health platform to combat rabies in Malawi** (2021–2026), funded by the Research Council of Norway.

Rabies is a neglected zoonotic disease that mainly affects poor, rural communities in Africa and Asia, despite being preventable through dog vaccination and timely post-exposure prophylaxis (PEP) for exposed humans. Successful rabies control depends on a One Health approach with collaboration between the veterinary and public health sectors.

The project combined implementation research with veterinary, public health and social science approaches to investigate how rabies control can be strengthened in Malawi. Studies mapped the existing rabies control system and One Health partnerships, evaluated rabies surveillance, identified barriers for bite victims to access to PEP, worked to improve sustainability of mass dog vaccination campaigns, and reviewed how community-based surveillance can strengthen control of rabies and other neglected zoonotic diseases.

The project was carried out in partnership with governmental institutions, universities and non-governmental organizations in Malawi, Norway and the UK. The research provided practical guidance on how a One Health approach can strengthen rabies control in resource-limited settings, that is also relevant for other neglected zoonotic diseases. As countries work towards the WHO target of eliminating dog-mediated human rabies deaths by 2030, improving implementation of control measures are the key priorities.

Experience from Malawi highlights the need to strengthen One Health partnerships across sectors to improve disease surveillance and implementation of proven interventions against neglected zoonotic diseases.

Partners
Norwegian Veterinary Institute, Central Veterinary Laboratory (Malawi), Norwegian Institute of Public Health, University of Bergen, University of Edinburgh, University of Glasgow, Public Health Institute of Malawi, Trustees of Agricultural Promotion Programme (TAPP), and Mission Rabies.



Community theatre for awareness raising in Malawi. Photo: Hannah J. Jørgensen.

Norwegian Veterinary Institute
Click the QR code to learn more.

Safer Births research consortium

Safer Births is collaborative, equity-oriented research, education, and innovation that strengthens health systems through long-term partnerships and shared leadership.

Contributing institutions are Stavanger University Hospital (SUS), University of Stavanger (UiS), SAFER - Stavanger Acute Medicine Foundation for Education and Research, and Laerdal Global Health (LGH), in partnership with Tanzanian institutions including Haydom Lutheran Hospital and the Ministry of Health.

Ten-year snapshot (2016–2026)
Over the past decade, the Stavanger-based Safer Births collaboration has become one of Norway's largest global health partnerships in maternal and newborn health. Through long-term collaboration between Norwegian and Tanzanian partners, the programme has combined research, higher education, simulation-based training, and innovation to improve survival during childbirth.

The consortium combined academic research, clinical expertise, implementation science, and innovation to co-develop products such as the newborn simulator NeoNatalie Live, newborn heart rate meter NeoBeat, and Moyo fetal heart rate monitor, used with the Helping Mothers and Babies Survive educational materials and the SimBegin simulation programme.

The collaboration resulted in the Safer Births Bundle of Care (SBBC), implemented across 30 hospitals in Tanzania through simulation training, mentorship, and continuous quality improvement. More than 280,000 mothers and newborns were included, and the study was published in the New England Journal of Medicine in 2025, demonstrating an 18% reduction in perinatal deaths, a 40% reduction in newborn deaths within 24 hours, and a 75% reduction in maternal deaths within 7 days following implementation.

Safer Births has been a long-term partnership with Tanzanian healthcare workers and researchers. The consortium involves more than 40 PhD candidates, many from Tanzania. They contribute to local research leadership and national scale-up.

Looking forward
Future priorities include scaling up the Safer Births Bundle of Care in Tanzania and Nigeria and expanding to more than 10 countries supported by the World Bank's Global Financing Facility and Beginnings Fund. The partnership focuses on sustainable implementation and measurable improvements in maternal and newborn survival.



Photo: NeoNatalie Live simulation.

Safer Births
Click the QR code to learn more.

BMDLab – Biomedical data analysis laboratory
Click the QR code to learn more.

Oslo Metropolitan University (OsloMet)

OsloMet's approach to global health policy is rooted in its strategic focus on sustainable welfare solutions, social justice, and reducing health inequalities across populations. The university integrates global health policy through a combination of strategic research, interdisciplinary academic programs, and specific research groups.

Ten-year snapshot

Our global health work has focused on reducing health inequities and inequalities through education, research, and international partnerships. OsloMet's involvement spans several health professions, including paramedicine, nursing, medicine, and midwifery. The collaborations have focused on capacity building in higher education, postgraduate training, student and staff mobility, collaborative research, and mentorship.

During the past decade, two major projects received funding: a NORPART project (2018–2024) and a NORHED II project (2021–2026). In addition, OsloMet has recently secured funding for two new projects: 1) INNOVETH develops community-based and digital interventions to improve the health and well-being of Ethiopian migrant domestic workers in the Middle East; 2) EQUIP aims to strengthen rights-based mental health and addiction services through educational collaboration between Norway and South Africa by promoting digital learning, student mobility, and intercultural competence among future mental health professionals.

Research themes

At OsloMet our global health work follows four major themes:

1. Migration and Health Equity – Digital Health and Community-Based Mental Health Interventions
2. Rights-Based Mental Health Care
3. Emergency Medical Care



From an interdisciplinary seminar on Quality Maternal and Newborn Care improvements held in Accra, Ghana, in 2023. Photo: MIDRED.

4. Sexual and Reproductive Health and Rights (SRHR), Quality Maternal and Newborn Care and Midwifery

Projects

1. The NORPART- project Academic Partnership and Student Mobility Foster Evidence-based Practice, Innovation and Quality in Health Sciences Education in Ethiopia and Norway (NorEt Aptitude) received 5.6 million NOK in funding for the period 2019 to 2024 (ref no: 2018/10182). The aim was to enhance high-quality teaching and training programs in paramedic (emergency) care and biomedical sciences. Focusing on quality improvement, evidence-based practice, innovative learning, international academic partnerships and networks, as well as student and staff mobility. The project supported a new master's program in Addis Abeba and provided scholarships and exchange activities for 36 master's and 5 PhD students.

2. The NORHED II project Midwifery Research and Education Development in Ghana and Palestine (MIDRED) received 20 million NOK in funding for the period 2021 to 2027 (ref no. 70320). The main objective was to strengthen the quality and relevance of local midwifery research and education in Ghana and Palestine. Capacity was enhanced by a new master's program in Women's Health at Birzeit University (Palestine), where 50 students has enrolled. At University of Ghana the project supported a new master's program in Midwifery where 252 students had been enrolled by 2025. The program also supported development of a new PhD program in Midwifery, expected to start in 2026. In all, 48 master's students and 3 PhD students received scholarships, all of whom are expected to graduate within the project period. The project also supported student and staff mobility between the countries.

3. OsloMet has received funding for the global health project INNOVETH: Innovative Health Intervention for Ethiopian Migrant Domestic Workers in the Middle East. The project period runs from 2025–2029 and is funded by the Wellcome Trust and Novo Nordisk Foundation with a budget of 1.5 million EUR.

The main beneficiaries of our global health work include vulnerable populations, health service users, healthcare professionals, students, educators, and policymakers.

Partnerships, capacity strengthening and equity

Our work is built on long-term partnerships with universities, healthcare institutions, governments, and international organizations in Africa, Middle-East and Europe. Capacity strengthening is achieved through postgraduate training, student and staff mobility, collaborative research, and mentorship. Equity is embedded across all activities through meaningful involvement of underserved populations and equitable North–South partnerships.

OsloMet: Migration and minority health
Click the QR code to learn more.

OsloMet: Midwifery Sciences
Click the QR code to learn more.

University of South-Eastern Norway (USN)

For us, global health focuses on improving health and achieving equity in health for all people worldwide, recognizing the interconnectedness of human, environmental, and societal factors.

USN has contributed to global health through interdisciplinary research, education, and long-term international partnerships, with a strong emphasis on capacity building and equitable collaboration. Key initiatives include strengthening global health education in partnership with institutions in Moldova, Kenya, Madagascar, Malawi, Tanzania and India.

Research, development of educational programmes and strengthening ties across academic institutions are advanced through projects such as the NOREC-funded Eye Education Foreign Exchanges Project (EYE-FX) in collaboration with the Brien Holden Vision Institute South Africa and Masinde Muliro University of Science and Technology in Kenya, as well as the Norwegian-funded Health Education in India and Norway (HEIN) project. These inititiaves combine research, education, and mobility while strengthening global competencies, adressing health inequities and building knowledge across partner institutions. The faculty is also an active member of the Global Health Consortium, an alliance of nine academic institutions committed to collaborative global health education and research.

Main research themes and projects

USN's global health research takes a broad relational and interdisciplinary approach, recognising the interconnectedness of human, environmental and societal health, while also drawing on One Health perspectives where relevant. Core themes include infection prevention and control, hygiene, optometry, environmental health,women's, family and child health, and health promotion through sustainable and nature-based approaches.



Examples of research and international collaboration include:

- Research linked to the EU-funded GO GREEN ROUTES project explores how nature-based solutions can improve mental health and well-being in urban settings.
- The EU-funded HEALTH SAILING project (2022–2026) develops evidence-based strategies for infectious disease prevention and preparedness in the passenger shipping industry.
- OCULUS, an Erasmus+ project, strengthened optometry education through curriculum development, evidence-based practice, and cultural competence across partners in Europe, Israel and India.
- Research collaborations with African partner institutions address women's family and child health and contribute to locally relevant knowledge development and research capacity.



Partnerships, capacity strengthening and equity

USNs Global Health work is characterized by mutual knowledge exchange and a strong commitment to sustainable and locally relevant solutions across diverse geographical, cultural and institutional contexts. A distinguishing feature of USN's approach is its strong integration of education, research and capacity-building in long-term equitable partnerships.

Looking forward

USN aims to further strengthen interdisciplinary global health research and expand equitable international partnerships addressing emerging global challenges.

Global Health
Click the QR code to learn more.

The University of Tromsø - The Arctic University of Norway (UiT)

To us, global health means bringing together research, education and partnerships to tackle health challenges that do not stop at national borders. People's health is influenced by far more than medical care alone. It is shaped by where they live, the conditions around them and the systems meant to support them. We focus especially on vulnerable populations and visibilizing communities whose health risks are all too often underestimated, under-communicated or left unaddressed.

Ten-year snapshot

During 2016–2026, the working group at the Department of Community Medicine (ISM) has developed a distinctive profile in applied epidemiology, registry-based public health, environmental health and educational activities. A central achievement has been the Georgian Birth Registry (GBR), developed by UiT with UNICEF and the National Center for Disease Control and Public Health (NCDC) in Georgia and launched nationally in 2016. The registry currently has around 500 000 births in its database. The GBR became the country's official source of birth data and now supports legal identity from birth, maternal and child health monitoring, quality improvement and research.

In 2017, the GBR formed the base for a large capacity building project that resulted in several PhD students, two new English-language master's programs in public health (MPH) and over 100 registered student and staff exchange activities, mutually beneficial to all institutions involved. Since 2017, registry and linked health data supported five completed PhD theses, two ongoing PhD projects, numerous master's projects and one postdoc on a range of topics including birth outcomes, maternal mortality, hepatitis C, cancer and lead contamination.

Since 2021, we have been engaged in lead contamination issues and have created a national surveillance system for lead in children in Georgia.

Main research themes and projects

- Maternal, perinatal and reproductive health in Georgia, including caesarean section policy, antenatal care, adolescent pregnancy, fertility trends, COVID-19 effects and maternal mortality.
- Environmental epidemiology, especially lead exposure among children and pregnant women in Georgia and Viet Nam, including pioneer work using newly developed detection and analytical methods from our partners in Canada.
- Registry linkage and digital public health infrastructure, including birth, hospitalization, mortality, COVID-19, hepatitis C, and lead surveillance data.
- Health-system strengthening and capacity building through PhD, postdoctoral and master's training, local data use and joint project development.

Projects

Two projects illustrate our profile: 1) Georgia Public Health Capacity collaboration around the national birth registry and linked health registries; 2) CLEAN Start: Combating Lead Exposure and Advancing Nutrition among Vietnamese children, a new Research Council of Norway-funded project led by UiT. CLEAN Start extends the group's work on lead surveillance and child health from Georgia to Vietnam, where routine population-based lead surveillance remains limited and





evidence is needed to guide prevention, clinical follow-up and nutrition-sensitive interventions.

Partnerships, equity and looking forward

Key partners include UNICEF, NCDC Georgia, Georgian universities and health authorities. Our laboratory partners in Canada, Quebec Public Health Institute (INSPQ) and emerging collaborators in Vietnam: Vietnam Administration for Disease Prevention (VADP), Ministry of Health, Vietnam National Institute of Nutrition (NIN), National Institute of Occupational and Environmental Health (NIOEH), and UNICEF Vietnam.

The group focuses on vulnerable populations, especially women and children. Through collaborative projects, we aim to develop strong and sustainable partnerships in which research topics are jointly defined, and responsibilities and scientific credit are shared equally among partners. Over the next years, priorities include consolidating lead exposure research in Georgia and Vietnam, expanding maternal and child health collaborations in Ghana, and continuing to build equitable partnerships where research capacity, data ownership and policy relevance remain central.

Global and Environmental Health
Click the QR code to learn more.

University of Bergen (UiB)

The University of Bergen (UiB) has three strategic priority areas, one of which is "Global Challenges" which includes global health. In line with global health as a cohesive, interdisciplinary field, all faculties contribute to education, research and capacity strengthening relevant for global health.

The Faculty of Medicine and in particular the Department of Global Public Health and Primary Health Care has global health as a core feature. The department's Centre for International Health (CIH) remains a cross-faculty centre, and a hub for global health at UiB.

CIH has had a leading role in research training and research capacity strengthening in collaboration with several low- and middle-income countries' (LMIC) institutions for decades. From 2013, CIH hosted the "Centre for Intervention Science in Maternal and Child Health (CISMAC)" funded through the Research Council of Norway (RCN) Centre of Excellence (SFF) scheme to pursue a vision of equitable improvements in maternal, newborn and child health and development in LMICs. Part of this work now carried forward as part of a current SFF, the Bergen Centre for Ethics and Priority Setting in Health (BCEPS), first established in 2019. BCEPS strengthens the work on global health priorities, knowledge and tools to support equitable health systems. The Pandemic Centre was established in 2020 and recently co-located with CIH. It has an international and interdisciplinary scope, and expands to emerging priorities in climate and health, polycrisis and preparedness.

In education, CIH coordinates global health education for medical and nutrition students at UiB,



Master's students, PhD-candidates and teachers during one of the elective courses at CIH in 2026.
(T. Tylleskär with permission)

a designated master's program in global health, runs a local research school in global health and hosts the Norwegian Research School in Global Health for Sustainable Futures (separate article). The Faculty of Psychology hosts a master's program in Global Development with Health Promotion as one of the available tracks. Since 2008, UiB has offered the two-week interdisciplinary Bergen Summer Research School dedicated to global challenges, attracting PhD-students from across the globe.

At the core of our efforts is an orientation towards strong institutional anchoring, sustained international partnerships, and a balance between research, education, and implementation. A defining feature of UiB's global health activity has been the continued development of long-term institutional collaborations, particularly in sub-Saharan Africa and South Asia. These partnerships have supported both knowledge generation and institutional strengthening, reflecting a commitment to equitable research collaboration. This last decade has seen us continue the shift from predominantly disease-specific research toward more systems-oriented and equity-focused approaches aligned with the Sustainable Development Goals (SDGs). Core focus areas have included infectious diseases, maternal and child health, non-communicable diseases (NCDs), and the strengthening of health systems through capacity strengthening and policy-relevant research.

USEFUL LINKS

University of Bergen's "Global Challenges"
Click the QR code to learn more.

Bergen Summer Research School
Click the QR code to learn more.

Dept of Global Public Health and Primary Health Care
Click the QR code to learn more.

Centre for International Health (CIH)
Click the QR code to learn more.

BCEPS
Click the QR code to learn more.

The Pandemic Centre
Click the QR code to learn more.

University of Oslo (UiO)

Over the past decade, the Faculty of Medicine (MED) at the University of Oslo has been a leading contributor to global health research, education and international collaboration. Through research groups across the Faculty of Medicine global health is a multi- and interdisciplinary endeavour, bringing together perspectives and methods from clinical medicine, social sciences, history, ethics and epidemiology. Research has spanned infectious diseases, antimicrobial resistance, maternal and child health, non-communicable diseases, mental health, migration and health, health systems strengthening, pandemic preparedness and planetary health.

The Centre for Global Health has played an important convening role, organizing public events and policy dialogues, nurturing global health networks, and serving as a bridge between research, practice and decision-makers. Over the past ten years, the Faculty of Medicine has also expanded opportunities for students through global health teaching at all levels, including courses in medical school, the master's programme in International Community Health, and a PhD course in Global Health.

Main research themes

1. Acute and chronic infectious diseases, including HIV and tuberculosis, hepatitis B and sepsis, studied through translational research, clinical trials, ethnographic, historical and epidemiological approaches. A key achievement was the establishment of the Africa–Europe Cluster of Research Excellence in Health, Gender and Sexualities (CoRE HGS), which brings together five African and three European universities in joint research, postgraduate training and capacity building (PI: Moen).

2. Emerging global health threats, such as antimicrobial resistance and environmental health, and new frameworks for analysis. A key achievement was the launch of the Lancet Commission on One Health in 2025 (PI: Winkler).

3. The history, actors and politics of global health, including health systems research and capacity building. Key achievements were the ERC projects "Universal Health Coverage and the Public Good in Africa" (PI: Prince) and "From International to Global Health" (UiO PI: Gradmann).

4. Pandemic preparedness, through research on surveillance, public health responses, vaccine development, health systems resilience and evidence to inform policy during and beyond COVID-19. A key achievement was the establishment of the Centre for Pandemics and One Health Research (PI: Grødeland).



The interdisciplinary FAR project (PI: Fjeld) followed antibiotics from their production in and export from China and India, to Tanzania, tracing their circulation into rural Kilimanjaro and examining how farmers used them for humans, animals, and agriculture. Hyderabad pharmaceutical hub. Credit: Lise Bjerke.



The PRESHA project (PI: Miltenburg) organised the first preeclampsia conference in Africa south of Sahara 21-22 May 2026 – a collaboration between researchers, health professionals, governments, and women who have survived this condition. Photo: CUHAS.

Partnerships

Long-term collaborations with universities, hospitals and ministries of health in countries including Tanzania, Kenya, Nepal, Bhutan, Ethiopia, Uganda, Myanmar and India have been central to the Faculty of Medicine's work. NORHED-supported projects such as COMENTH in Nepal, DOCETHA in Tanzania, AnthEM in Kenya and SACCADE in Ethiopia have strengthened research capacity and medical and health education. These collaborations are grounded in strong competence in local settings, including cultural and language skills.

Looking forward

In the coming years, we will continue to frame global health not only as health challenges in LMICs, but as shared, truly global concerns that affect all populations, including factors such as environment and climate change, migration and displacement. A core priority will be to work further towards more equal collaborations in global health, ensuring jointly defined agendas, shared leadership and mutual benefits.

Faculty of Medicine
Click the QR code to learn more.

Department of Community Medicine and Global Health
Click the QR code to learn more.

Global Health and Health Equity (GHE)
Click the QR code to learn more.

University of Stavanger (UiS)

For us, strengthening and ensuring the quality of health services at local, regional, national, and global levels is a central concern in global health, both at the individual and system levels.



Ten-year snapshot, research themes and partnerships

The Faculty of Health Sciences' (UiS) strategy for 2021–2030 identifies "Global Health Challenges" as a strategic priority area. This implies that the faculty will contribute to improving public health and enhancing societal participation at both national and international levels. The Faculty of Health Sciences has contributed through capacity-building and research projects focused on improving pre-service education in sub-Saharan Africa, particularly through simulation-based education (SBE).

The NORHED II project (2021–2026), titled "Implementing simulation-based education in Malawi and Tanzania" is the most central initiative from the last decade, bringing together partners from UiS, Norway, Kamuzu University of Health Sciences (KUHeS), Malawi, and Kilimanjaro Christian Medical University (KCMC), Tanzania, to strengthen nursing and midwifery education. Supported by NORAD, the project has trained over 140 educators and healthcare workers in SBE. It has also contributed to research through PhD and master's projects, curriculum development, and the establishment of simulation guidelines. Key outcomes include the accreditation of an MSc Midwifery programme in Tanzania and the development of more than 24 hospital simulation corners in Malawi, implementation of simulation guidelines alongside a national network of simulation ambassadors.

Over the past decade, the Faculty of Health Sciences has contributed to educational projects and research in education through several smaller initiatives focusing on global health challenges. As an educational institution, we place strong emphasis on building partnerships and collaborative agreements with international stakeholders. Global mobility that supports these efforts is likewise regarded as important. Below, we highlight some of these projects:

- *"Simulation-based education in nursing education programs, Tanzania and Madagascar"* (2017-2019). A collaborative project with Haydom Institute of Health Sciences, Tanzania and Malagasy Lutheran Institute of Nurses Education (SEFAM), Antsirabe, Madagascar. Funded by Laerdal Foundation.

- *"Improving post-operative nursing care in an ICRC supported hospital in northeastern*





Nigeria" (2024). A collaborative project with the International Committee of the Red Cross (ICRC), Geneva.

- *"Increased international student mobility to Africa and Asia"* (2024-2027). A collaborative project with the Norwegian Missionary Society Global Exchange, Norway and Manipal Academy of Higher Education, India. Funded by the Norwegian Directorate for Higher Education and Skills.

- *"Strengthened clinical mentorship practice of nursing students on international Exchange programs, India/Norway"* (2025-2028). UTFORSK-project funded by the Norwegian Directorate for Higher Education and Skills.

- *"Peer-to-peer simulation training as a pedagogical approach to enhance skills in neonatal resuscitation and use of a digital application for students in the nurse-midwife program at KCMC and midwifery students on mobility from the University of Stavanger"*(2024). A collaborative project within the University of Stavanger and KCMC, Moshi, Tanzania. Funded by Laerdal Foundation.

Faculty of Health Sciences
Click the QR code to learn more.

Oslo University Hospital (OUS)

Building Health Systems Through Long-Term Hospital Partnerships

Oslo University Hospital (OUS) has developed a model for global health based on long-term institutional partnerships between hospitals. Through a dedicated Department of Global Health, OUS coordinates international collaborations that combine specialist training, health personnel exchange, research and health system strengthening.

A central objective is to support partner institutions in building the capacity to educate and train their own health professionals. The model is based on long-term engagement, exchange of health personnel, continuous bedside teaching and mentoring with healthcare professionals working together as colleagues and partners. This approach promotes local ownership, sustainable workforce development and mutual learning.

In Ethiopia, OUS has contributed to the development of local training programs in oncology, radiation therapy and oncology nursing, supporting the education of a new generation of cancer specialists. In Malawi, the collaboration has focused on neurosurgery, anesthesia, intensive care and pediatric surgery, including specialist training and clinical capacity building. In India, OUS has worked with partners to improve newborn health through nursing exchange, human milk banking and implementation of low-cost, evidence-based interventions. In South Africa, OUS participates in research and innovation projects exploring the use of artificial intelligence for the diagnosis of Female Genital Schistosomiasis and cervical disease. In Palestine, OUS collaborates with NORWAC and local institutions through clinical exchange, training and capacity-building activities.

Across these partnerships, the emphasis is on strengthening institutions rather than delivering short-term interventions. By supporting education, research and clinical development within existing health systems, the aim is to enable countries to train and retain their own health workforce and build sustainable specialist services for the future.

Oslo Universitetssykehus: Avdeling for global helse
Click the QR code to learn more.

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- Hege Ersdal, Safer Births Research Consortium
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- Thor Ole Gulsrud, University of Stavanger
- Jennifer J. Infanti, Norwegian University of Science and Technology
- Line Joranger, University of South-Eastern Norway
- Hannah Joan Jørgensen, Norwegian Veterinary Institute
- Karine Kålsås, Research Council of Norway
- Ann-Katrin Llarena, Norwegian University of Life Sciences
- Berit Mortensen, Oslo Metropolitan University
- Maria Lisa Odland, Nord University
- Kristin Schjølberg, Oslo University Hospital
- Solbjørg Sjøveian, Norad
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- Thorkild Tylleskär, University of Bergen

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