

Self-evaluation report for programme evaluation of: The Master's Programme in Public Health Sciences

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The Assessment Panel's report for the programme evaluation of: Master's Programme in Public Health Sciences

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Self-evaluation and Assessment Panel's report for the programme evaluation of the programme: Master's Programme in Public Health Sciences

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Introduction

Self-evaluation

The programme's responsible parties, together with representatives from the faculty and students, should conduct a reflective self-evaluation by identifying strengths and areas for improvement in the programme. They should also describe and evaluate how these areas are addressed to ensure high-quality education. The focus of the self-evaluation should be on reflection rather than description. The self-evaluation should be supported with examples if possible. It should be based on the current status of the programme at the time of submission. The self-evaluation should be based on the four assessment areas listed below, which include ten assessment criteria.

1. Preconditions

- 1.1. Staff
- 1.2. Learning environment

2. Design, implementation, and outcomes

- 2.1. Goal attainment
- 2.2. Equal opportunities
- 2.3. Sustainable development
- 2.4. Follow-up, measures, and feedback

3. Student perspective

- 3.1. Student perspective

4. Work-life and collaboration

- 4.1. Work-life and collaboration
- 4.2. Internationalisation
- 4.3. Interprofessional competence

The self-evaluation should follow the provided headings. The headings, including the assessment criteria in the template, must not be removed. Subheadings may be added if necessary. The template's formatting, such as margins, must not be changed. The programme's text should consist of 1-3 pages per section, with font size 11 points and single spacing. The self-evaluation should provide the assessment panel with a comprehensive overview of the programme without including links to additional information. It should begin with a brief description of the programme's organisation, structure, and overall focus, with justification in relation to the degree regulations. The self-evaluation should also explain how long the education has been provided at KI. In the self-evaluation for the assessment criterion "Follow-up, measures, and feedback" and "Student perspective," an overall description at the KI level should also be included. This description is already prepared centrally by KI in this template. The self-evaluation should conclude with the section "Other aspects," where the programme can describe relevant areas that are not included in any of the assessment criteria, such as other generic competencies and forward-looking developments to enhance the programme's quality.

The following attachments are to be included in the self-evaluation:

- Teacher table for teacher competence and capacity. The table should provide an overview of the main teacher competence and capacity for the programme. It is not

necessary to report all teachers who teach. The teacher table is compiled in an Excel file that contains additional instructions.

- Mapping of the outcomes of a Master's degree to course learning outcomes, learning activities, and assessments. The mapping should provide an overview of which courses have learning outcomes related to the evaluated outcomes of a Master's degree. The mapping should also indicate which learning activities are used to support student learning to achieve the learning outcomes and how the learning outcomes are assessed. The mapping is compiled in an Excel file that contains additional instructions.
- Programme curriculum.
- Course syllabi for all courses included in the programme.
- Compilation of key figures regarding application numbers per place, number of students starting the programme, number of full-time equivalent students, and number of graduates.

The programme should compile the information in the teacher table and the mapping of outcomes for a Master's degree, while the programme curriculum, course syllabi, and key figures will be provided centrally by KI.

The academic advisor for the programme evaluation round, together with the coordinator for programme evaluations, should review that the programmes' submitted self-evaluations are complete before sending them to the assessment panel.

If necessary, the assessment panel may request additional supporting documents to ensure their assessment of the programme.

The self-evaluation should be approved by the committee responsible for the programme.

The Assessment Panel's Report

The Assessment Panel is required to summarise their assessment in a report that is written in the same document as the self-evaluation. For each assessment criterion, the programme's strengths and areas for improvement, as well as the Assessment Panel's assessment, should be described under separate headings. Under the "Strengths" heading, the Assessment Panel should highlight the programme's strengths within the assessment criterion and describe them briefly, preferably in bullet points. Under the "Areas for Improvement" heading, the Assessment Panel should identify areas that are deemed in need of improvement and describe them briefly, also preferably in bullet points. Under the "Assessment" heading, the Assessment Panel should explain their assessment and motivate their conclusions.

A summary of the Assessment Panel's work should be described under the "Assessment Panel's Summary" heading. It should begin with a reflection on the conditions that the self-evaluation provided for assessing the programme's quality, such as whether the self-evaluation was easy to read, well-structured, provided answers to the questions posed, and followed the instructions. The summary should also briefly summarise the programme's most important strengths and areas for improvement. The Assessment Panel may also include any additional comments they wish to convey.

Once the Assessment Panel's report has been submitted, the self-evaluation and the report should be published on KI's staff portal.

Self-evaluation

Programme: The Master's Programme in Public Health Sciences

Degree: Master of Medical Science (120 credits) with a Major in Public Health Sciences

Description of the programme

The Master's Programme in Public Health Sciences comprises four semesters of full-time study and is taught in English. The programme offers two specialisations: Public Health Epidemiology (since 2010) and Health Promotion and Prevention (since 2019). It is provided by the Department of Global Public Health (GPH), which is dedicated to advancing knowledge about challenges and opportunities for public health in a local, national, and global setting. Alongside GPH, courses in the programme are offered by the Institute of Environmental Medicine (3 courses) and the Department of Medicine, Solna (1 course) at Karolinska Institutet (KI).

Across the continuum of public health challenges (Figure 1), the programme provides students with conceptual knowledge, analytical tools and generic competences to critically evaluate public health in different contexts and populations. It has been designed with an emphasis on the methodology and skills that feed into the application of public health sciences in terms of monitoring and surveillance of the population health; identification of the determinants of health and ill-health and; design, implementation and evaluation of interventions and preventive strategies to counteract ill-health or to promote health. With this set up, we strive to produce graduates that are methodologically well equipped to address a variety of public health problems. The programme prepares students for postgraduate studies and opportunities to work in government public health agencies and non-governmental organisations, as well as the private sector.

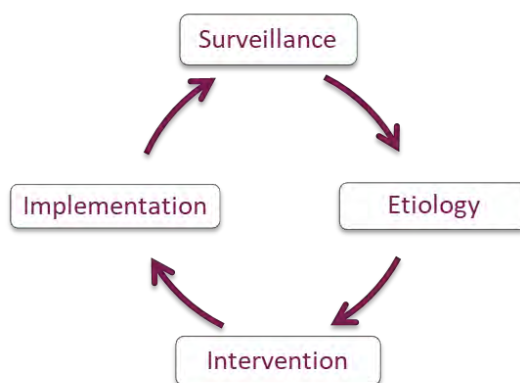


Figure 1. The public health continuum

The two offered specializations have different focuses:

Public Health Epidemiology aims to develop the student's skills in describing, analysing and reflecting on different types of public health problems, to critically review epidemiological studies and to evaluate public health interventions.

Health Promotion and Prevention aims to develop the student's skills in planning, developing, implementing and critically evaluating public health promoting and preventive strategies on both individual and structural levels.

Table 1. Schematic presentation of the study plan for the two specialisations.

Semester	Public Health Epidemiology	Health Promotion and Prevention
1	Public health sciences – concepts and theories, 7.5 hp	
	Methods for studying the distribution of health, 7.5 hp	
	Biostatistics 1, 7.5 hp	
	Collecting and organizing epidemiological data, 7.5 hp	
2	Theories of Science, 2.5 hp	
	Applied epidemiology 1 – distribution of health, 5 hp	Introduction to planning and program development, 5 hp
	Biostatistics 2, 7.5 hp	
	Qualitative methods, 7.5 hp	
	Epidemiological methods for studying determinants of health, 7.5 hp	
3	Project management, 3 hp	
	Epidemiological methods for outcome evaluation of public health interventions, 10 hp	
	Systematic review and meta-analysis, 3 hp	Theories and methods for implementation and evaluation, 7 hp
	Applied epidemiology 2 – determinants of health (4FH095), 14 hp	Applied health promotion and prevention, 10 hp
4	Degree project in Public Health Sciences, 30 hp	

The first year of the programme is mainly built upon courses common to both specialisations. It starts with an introduction to public health sciences, including concepts, theories, and principles. The students then learn about methods in public health work and research, with courses following a progression from basic to advanced knowledge and practical skills in epidemiology and biostatistics. Further common courses are offered to broaden the students' knowledge in theories and methods (theories of science, qualitative methods and project management).

During the second year of the programme, the skills and knowledge that students have acquired are broadened and deepened through courses in the subject area of the respective specialisation. For students in Public Health Epidemiology, this includes courses for applying epidemiological designs and analyses in a diversity of public health problems as well as developing the students' ability to quantitatively evaluate complex public health interventions. For students in Health Promotion and Prevention, this involves courses focused on program development, implementation and evaluation (both quantitative and qualitative). The programme is completed with a

semester devoted to the degree project. For their Master's thesis, the students reflect on, critically review and practically apply scientific methods and theoretical considerations to an empirical study relevant to their specialisation. All degree projects are performed in collaboration with public health experts, mostly in academia, and under supervision of researchers active in the public health discipline.

For each cohort, we have 44 seats, 22 in each specialisation. Half of the seats are offered to fee-paying students, and the rest to SWE/EU-students. Selection of candidates is based on a qualitative assessment of the applicant's qualifications with regard to previous education, relevant work and research experience and a motivational letter. Annually, the programme evaluates around 350-400 eligible applicants per specialisation, of which less than 1/3 apply to both specialisations. We have applicants from across the globe with diverse academic backgrounds (see internationalisation and interprofessional competence).

At the department, the Educational Committee (UN-GPH) is responsible for all education at first and second cycle level. The programme in Public Health Sciences is directed by this committee, which has the overall responsibility for the implementation and coordination of the programme; the formulation, integration, and progression of programme courses; and the distribution of educational tasks. UN-GPH also makes decisions in matters related to quality assurance, programme development and cross-programme collaborations. Furthermore, it is responsible for policy issues as well as those related to procurement and financing of the programme. The UN-GPH is led and chaired by the departmental director of education (GUA), who has overall responsibility and decision-making powers for basic and advanced education at the department. The committee also includes a deputy chairman, the programme directors of the three master's programmes run at the department, teacher and student representatives, teacher representatives from other KI departments and a stakeholder representative from Region Stockholm (representing future employers) as well as a representative for internationalization, the departmental study counselor, and an educational administrator.

Connected to the UN-GPH are several program councils, which are working groups that prepare the decisions for the committee. The Public Health Sciences Programme Council, led by the programme director, also serves the function of aligning the implementation of the programme, facilitating the sharing of insights on experiences of e.g. progression, and integration of results from course evaluations. The programme council is an important forum for collegial support and development. It consists of all course leaders, an educational administrator as well as student representatives. It meets 5-6 times per academic year.

1 Assessment area: Preconditions

1.1 Assessment criterion Staff

In their education, students should receive high-quality teaching, which requires that the teachers collectively possess the necessary scientific/professional competence. However, teachers must also have pedagogical competence to support student learning. Furthermore, it is important that the teaching capacity is proportional to the scope of the programme, including teaching and assessment. A high-quality teaching resource is characterised by a stable supply of teachers. The department or committee responsible for the programme is responsible for designing and following up on course assignments for each course and allocating the assignments so that the programme's courses are conducted by the department that is best equipped to carry out the assignment with high quality, including strong research connection. The course responsible department is responsible, amongst other things, for staffing the department's courses in accordance with the course assignment and for developing, promoting, and ensuring the teachers' subject competence, research connection, and pedagogical ability. The programme, in collaboration with the course responsible departments, should therefore work long-term on both continuity and competence development among teachers in the specific programme, and there should also be strategies for how staff turnover is managed, for example, in the case of retirements. For a programme leading to a professional qualification, it is important that students have access to supervisors with adequate competence during practice-integrated learning, in order to provide students with high-quality education.

Assessment criterion - Staff

The number of teachers and their combined expertise (scientific, professional, and pedagogical) is adequate and proportional to the volume, content, and implementation of the education in both the short and long term.

Programme description:

The policy of GPH is that all staff should both be active in research and engaged in education (basic to post-graduate level in the department, KI's executive and professional courses or Stockholm University's Bachelor program in Public Health Sciences). Furthermore, the department provides direct channels into research networks globally, through its collaboration with partners at academic institutions in multiple countries, e.g., Makerere University in Uganda, Muhimbili University of Health and Allied Sciences in Tanzania and, University Eduardo Mondale in Mozambique. Researchers at the department also contribute with their expertise to multilateral organisations such as the UNICEF and WHO, and act as temporary advisors, members of expert committees or external experts in national research councils and organisations.

All the course leaders on the Master's Programme in Public Health Sciences are actively involved in evidence-based public health research: Professors (3), assistant professors (3), senior lecturers (4), senior research specialists (1), research specialists (1), principal researchers (4), postdoctoral researchers (2). Currently, the majority of course leaders are employed by KI or affiliated through adjunct positions, via collaboration with the Center for Epidemiology and Community medicine at Region Stockholm. Course leaders that are employed by the regional public health authority, although also active in research, also provide valuable insights in public health work

outside academia. They bring an important element of real-life experiences to the teaching, which has also been seen to increase motivation among students.

That the majority of course leaders are employed by or affiliated to the department ensures a stable faculty for teaching commissions. However, the programme also draws upon expertise from other departments at KI (described above). This not only strengthens the teaching pool, but also increases the number of research areas to which students are exposed. Wider interest at KI in the methodological competence of our students, has also led to students being offered thesis opportunities by other departments across KI, which increases the possibility of securing research positions after graduation. Besides the course leaders, there is wide collaboration with and inclusion of public health experts as contributing teachers. Furthermore, the department draws on its substantial network of affiliated institutions, both in Sweden and abroad, to recruit supervisors and examiners for the master thesis projects.

Generally, the programme does not rely on any knowledge/competencies that cannot be replaced by resources within the department or from other KI departments if a course leader steps down. Epidemiological competence is well represented at KI, both within GPH but also at many other departments. In the case of health promotion and prevention, expertise is also shared by other departments (Aging Research Center, the Department of Neurobiology, Care Sciences and Society and the Department of Clinical Neuroscience), although not to the same extent. With regard to course leaders who are reaching retirement age, measures are taken to ease the transition to new course leaders. This is done by means of shared course leadership for the duration of at least one course occasion. Currently, the programme has very few course leaders with temporary employment. To recruit new course leaders, the commission is advertised at the department, and new staff are recruited based on level of area of expertise and formal pedagogical training as well as previous experience in teaching, interest and motivation.

In addition to their extensive teaching experience, course leaders on the programme also have formal pedagogical competencies. All of those that have reached associate professor/docent level have at least 5 weeks of pedagogy in higher education training. Those with full formal competence (equivalent to 10 weeks of pedagogical course work) include the majority of professors and senior lecturers. We strive for all course leaders to have formal pedagogical competence equivalent to 10 weeks of courses. From 2024, plans for pedagogical courses will be formulated during the annual employee appraisals with line managers and reviewed every year for the departmental quality report. Work is ongoing to develop process by which information regarding pedagogical training goals is shared with PDs and GUA.

Further ways of strengthening the pedagogical skills of our teaching staff include:

- Holding regular program council meetings, at which quality assurance and implementation is addressed. These meetings also serve as a forum for course leaders to learn from each other and share solutions to pedagogical challenges.
- Organising course leader workshops and seminars with a specific topic focus such as: “AI”; “How to supervise master’s students in academic writing”; “Teaching in the international classroom”; and “How to teach the SDGs”.
- Encouraging course leaders to apply for pedagogical project funding to develop and test new learning activities.

In addition to our strengths, outlined above, we have some challenges, which we aim to address in the future. Course leaders (and teachers) face the dilemma of having to

prioritise their time between research and education. We strive to provide a strong platform for collegial experience exchange and support, which we hope contributes to their perception of education as important and worthwhile. Currently, between 6-18% of course leaders' annual working time is allocated to their respective courses, depending on the number of weeks the course runs. Hence, the time allocated for teaching is limited. Renumeration of course leaders and teachers should be in line with the actual time spent on both its preparation and implementation. This is an ongoing topic of debate among teachers. A specific time assessment study has not been conducted in recent years and we plan for this to be carried out once again in the near future. Since resources are strained, we are developing a new implementation strategy for the courses, which involves incorporation of digital learning tools, more self-learning and student-activating approaches, and fewer lecturers and contact hours in general.

Assessment panel's evaluation

Instruction

For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:

Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.

Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.

Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: *Meets/Meets to a large extent/Meets to some extent/Does not meet*.

Strengths:

- A notable strength of the program is the active involvement of prestigious professors from KI as teachers. The student interviewees also highlighted the value of having top researchers as teachers who implement their research expertise to their teaching.
- All teachers are active in research, have pedagogical training and several have current engagement also in public health practice via different organizations.
- Although the bulk of competence among the staff is within health sciences the program has some teachers with a background in social sciences. This is a strength due to the interdisciplinary core of public health science.
- It is also positive that the department has several international collaborations that might enhance learning in both teachers and students.
- There is a broad base for a stable supply of course leaders and teachers, and there are procedures in place to ensure continuity when new course leaders are needed.
- There are new procedures for supporting teachers to work on their pedagogical competence and an aim that all course leaders have formal pedagogical competence equivalent to 10 weeks of courses. (Of the 20 teachers listed in the "lärartabell", 10 teachers had at least 10 weeks, 7

teachers had more than 5 but less than 10 weeks, and 3 teachers had 5 weeks of courses.)

Areas for improvement:

- What is mentioned in the self-evaluation about limited time for teaching, a challenge to find time to be innovative and employ new technologies in teaching, strained resources, and that *“Course leaders (and teachers) face the dilemma of having to prioritize their time between research and education. We strive to provide a strong platform for collegial experience exchange and support, which we hope contributes to their perception of education as important and worthwhile”* was largely confirmed by the interviews with the teachers and leaders. We acknowledge the challenge in the time management that is probably joint for most universities. However, objective or subjective expectations to work outside the working hours may in the long run contribute to increased stress and impaired recovery. It seemed to us that there could be room for more discussions about how to clarify, define, measure and allocate time used for teaching and research in a context where these two are tightly intertwined.
- There is also a plan to make a specific time assessment study in the near future, a *“new implementation strategy for the courses, which involves incorporation of digital learning tools, more self-learning and student-activating approaches, and fewer lecturers and contact hours in general”*, and a will by the program leaders to increase the perception of the value of teaching among the staff. These all aim to tackle the challenges of limited time for teaching and strained resources, mentioned in the self-evaluation. We support these efforts.

Evaluation:

Overall, it is the evaluation that the program meets to a large extent the requirements of the assessment criterion.

The justification for that evaluation is the above-mentioned strengths, and that there are several plans/strategies to tackle the limited time for teaching and strained resources while simultaneously increasing the pedagogical competence of the staff and having a need to broaden the intake of students. A more concrete approach may be needed to achieve a balance that allows for both development of pedagogical competence, and high-quality research and teaching that are interconnected. Regarding some of the challenges, the program lead is dependent on the KI organization (and the teachers expressed appreciation for easy access to the program leaders). For example, that 5 weeks of pedagogical courses is enough for a *“docentur”* may not encourage to take another 5 weeks for a formal pedagogical competence. Another example is that while expertise shared by other departments is a strength for a supply of teachers, it also means that the teachers' perception of education may depend on the culture in the other departments. That research may be prioritized may again be affected by the fact that education is in practice financed through research.

Regarding the *“new implementation strategy”*, the teachers described innovative ways of doing this without decreasing the interaction among the students, and between the students and the teachers. At the same time, the students mentioned that there are too many distance courses. It is not mentioned in the self-evaluation, and we did not discuss in the interviews, whether LIME or other pedagogical experts are involved and provide support

for this. If not, pedagogical support is highly recommended: the few contact hours need to be well-planned and follow a pedagogical approach, even digitalization of the curriculum needs to be monitored and supported.

1.2 Assessment criterion - Learning Environment

The learning environment refers to the environment in which the education takes place and where students and teachers operate. A good learning environment is characterised by creativity and conditions for development, as well as a close connection between research and education. Guiding principles for KI's research-related education at first and second cycle are as follows: 1) students are involved in ongoing research, which means that they gain knowledge about ongoing research in both theoretical and practical contexts, and have the opportunity to participate in it during their education, 2) teachers are research-active and convey a scientific approach through appropriate pedagogical methods, 3) the main field and content of the education is grounded in scientific methods and updated research findings, and active research is conducted within the relevant field at the university and 4) the teaching is based on research in teaching and learning and is built on learning activities that contribute to the student's ability to understand, evaluate, and utilize the processes through which scientifically based knowledge is generated and constantly reassessed (the research process). For a programme leading to a professional qualification, it is also important that students have access to a suitable practice-integrated learning environment.

Assessment criterion - Learning Environment

There is a scientific and profession-oriented environment for the education, and the activities are conducted in a way that establishes a close connection between research and education.

Programme description:

GPH has the aim of advancing knowledge about challenges and opportunities for public health in a local, national, and global setting. This includes studying how societal phenomena affect health in a globalized world and translating research evidence into public health actions. The department has twelve research groups, which are actively involved in research projects that have the aim of understanding the etiology of different diseases as well as developing, implementing, and evaluating public health interventions. Students of the master's programme are welcome to participate in any research related activities that take place in the department, such as research seminars or lectures (i.e., weekly departmental lunch seminars, GlobeLife seminars, Stockholm Public Health Lectures) as well as PhD-level activities (e.g., half-time controls, PhD defenses).

Course leaders incorporate learning activities that are anchored in state-of-the-art knowledge and methods and use examples from ongoing research projects targeting different public health concerns in different contexts. Exposing the students to a variety of research areas is particularly exemplified in the applied courses. Applied epidemiology 2, for example, is designed to cover the methodological aspects involved in determining cardiovascular, psychiatric, social, ageing, and genetic risk factors. In Applied Health Promotion and Disease Prevention, students gain insight into the formulation and implementation of interventions pertaining to exercise, sedentary behaviour, and diet as well as mental health and sexual wellbeing in various contexts. Furthermore, through the Degree Project, students undertake a project, with the aim

of learning how to apply the theoretical and methodological skills that they have acquired during the programme to a public health problem. They also learn about how to implement a project plan and critically reflect and discuss their methods and results. The degree project is performed under supervision of a researcher with expertise in the chosen area. Many students go on to publish their work in the form of a scientific paper.

In the latest exit poll, almost 2/3 of students agreed or strongly agreed that the education's content was based on current research.

In addition to being strongly anchored in current research, programme teachers employ a scientific approach to their teaching. Current scientific articles are used as a supplement to textbooks to prepare students for class discussions and assignments and there is a strong emphasis on methodological competencies. Although students sometimes express concern at our focus on methodology for scientific research (academia), these skills can also be applied to practical tasks that public health experts are expected to perform, such as investigative work.

We believe that we have formulated a comprehensive and progressive curriculum. The individual course outcomes together ensure that the national and local degree outcomes are achieved (See goal attainment). The teaching methodology used to achieve the intended learning outcomes (ILOs) is aligned with KI's pedagogical policy and is subject to regular review in response to teacher and student reflections.

Student-centered and active learning is a fundamental principle of the programme, whereby students are encouraged to identify their own learning needs and the resources necessary to achieve these, formulate goals and evaluate their own outcomes. Individual responsibility in learning is promoted through blended learning/flipped classroom techniques and the formulation of problem-oriented group exercises (such as case challenges). The shift from classroom-based learning to independent work is, however, challenging for some students. Furthermore, students have different backgrounds and skill sets, which is reflected in differing needs in terms of time required to reach ILOs. Individual study time is, therefore, scheduled in every course, so that students can complete their class preparation and assignments. Moreover, the courses are designed with a stepwise approach towards the ILOs, and course leaders monitor the learning progress. In some courses students are asked to explicitly reflect on their learning (i.e. in learning logs). We aim for all students to complete their degree in the allocated time, providing support where needed. Course leaders offer catch-up possibilities for missed mandatory assignments and there are multiple opportunities to sit examinations. In order to proceed to the second year, students must have acquired 45 credits. Furthermore, to undertake the degree project, at least 60 credits must have been acquired. The degree project is a challenging task, even for students who have passed all courses (90 credits) at the time of the degree project, which is the vast majority. We need to ensure that those students that have fallen behind or taken a leave of absence are prepared, and therefore aim to investigate whether it is more meaningful to require students to have passed a set of core courses in the programme.

New technologies and teaching methods are continually integrated and evaluated according to their impact on ILOs. The continuity of programme leadership has allowed for streamlined progression and overview in this effort. In recent years, there has been a shift from in-class to pre-recorded lectures, which students can watch at their convenience, allowing them to process the content at their own pace. Such online lectures are followed-up with interactive sessions on campus, where students can ask questions and apply learnings in practical exercises. Another recent

development is that we have introduced digital examinations (Inspira), which make it easier for students to write clearly and examiners to assess their work.

We are also trying to implement new means by which to promote critical thinking among students. In the degree project course, we have developed a series of self-learning modules with the aim of supporting students to develop the specific skills needed for a successful thesis. They include reading, listening and watching material and then performing reflective tasks and self-assessment quizzes. In parallel, workshops are offered that focus on generic skills and the application of methods. In the biostatistics courses we are piloting the incorporation of simulations in statistical modelling. We think that statistical simulations can play an important role in fostering statistical reasoning in public health and that they can be a great didactic tool for students to generate and learn from data. First, simulations can foster critical thinking and improve our reasoning about public health problems by going from theoretical thoughts to practical implementation of designing a computer experiment. Second, simulations can support researchers and their students to better understand statistical concepts used when describing and analysing population health in terms of distributions.

When it comes to psychological safety, we are committed to maintaining a non-discriminatory class environment, in which students feel free to ask questions and share their opinions. If they have any concerns, students are encouraged to approach members of staff directly or through their representatives, with whom we strive to have a strong collaboration. We are proud of the feedback we have received from students, who describe GPH as an environment conducive to informal meetings between students and staff at all times. Psychological support is further provided by a study counsellor. Some students are anxious about their ability to perform in a “prestigious” programme or worried about the employment opportunities available to them after graduation. They also live in a time of uncertainty (climate change, war, pandemics), which influences their ability to cope with their studies.

In the latest exist poll, the majority of students agreed that the physical study environment on campus (83%) and digital learning environment (75%) suited their needs; that the structure of the education encouraged independence in their learning (75%); and that they received guidance and support from teachers and supervisors in their learning (75%). Meanwhile, almost 3/5 (58%) agreed that a variety of teaching methods were used during the education in a way which encouraged them to be active in their learning. This was reported to a higher degree during the corona years (2021-2022). 2/3 (67%) of students described the psychosocial study environment to have worked well. We would of course like this figure to be higher and will therefore look into further ways of translating our commitment into student experience.

There are challenges related to the educational environment that we believe need to be addressed.

- There is a tendency for individual teachers to rely on examples from their own context (e.g. geographic area, type of methodology or specific research area). We believe an even more diverse contextualization (i.e. use of contrasting examples) would better prepare students for the challenges that they will meet in the global area.
- In the applied courses, particularly in the Health Promotion and Prevention Track, transferring public health organization-oriented skills to students has mainly been achieved through collaboration with Swedish partners in the non-academic sector, such as Region Stockholm and the Swedish Public Health Agency. Participation of international collaborators would be beneficial for

student learning as well as future career opportunities in a global labour market.

- Since course leaders continuously revise and improve their course content, there is a constant need for realignment between courses, both to avoid repetition of content and to ensure that important content is not omitted. In order to minimize these risks, we strive to further strengthen the collaboration between course leaders. One way of doing so would be for course leaders to present and discuss the structure and content of their course as well as any planned or implemented changes at program council meetings.
- We have experienced, particularly in the wake of the COVID-19-pandemic, that recent student cohorts are opting out of non-mandatory sessions or are insufficiently prepared for lectures or seminars. In addition to focusing more on blended learning techniques (which involve less synchronous learning), we are striving to prioritise face-to face sessions that focus on skills that cannot be acquired outside the classroom, and also motivate students to engage more actively in their own learning process. For example, we would like to expand our work with case-challenges, tapping into the students' multidisciplinary and culturally diverse backgrounds, as a means by which to increase engagement.
- It is a challenge to find time to be innovative and employ new technologies in teaching. We encourage course leaders to participate in the Teaching and Learning unit's (UoL) pedagogical seminars and courses, and to make use of the multiple ways to engage and support students in the technologies available on learning platform Canvas (Mentimeter, Padlet, online self-learning modules and quizzes). We also encourage course leaders to apply for pedagogical grants (available at both KI and departmental level) to explore new pedagogical approaches and ideas.

Assessment panel's evaluation

Instruction

For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:

Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.

Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.

Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: *Meets/Meets to a large extent/Meets to some extent/Does not meet*.

Strengths:

- There is a strong connection between research and education. As mentioned in the self-evaluation it is a strength that students are invited to the research environment of the department and that they have an ongoing dialogue with teachers and the programme leadership via their student representatives.

- From a pedagogical point of view it is positive that the program leadership promotes student-active learning by the use of cases, flipped-classrooms, self-learning modules and more.
- The emphasis on students' self-reflection is also positive.
- The program's strength is underscored by its diversity, encompassing an international study environment. Drawing students from diverse global backgrounds and disciplines, the program has the potential of becoming a fertile ground for cross-cultural learning and the sharing of diverse perspectives. Still, harnessing this wealth of diversity requires deliberate pedagogical efforts during the program's teaching.
- The self-evaluation demonstrates self-criticism and also suggestions for how to improve.

Areas for improvement:

- As pointed out in the previous Assessment area (1.1. Staff), issues related to limited time for teaching, including development of pedagogical competence, and to other strained resources need improvement also regarding the present Assessment criterion (Learning environment). Further, the students expressed that even if the research expertise of the teachers is highly appreciated, the teachers should prioritize their teaching when they have a period of teaching.
- The self-evaluation notes that progression and alignment should be enhanced by "...course leaders to present and discuss the structure and content of their course as well as any planned or implemented changes at program council meetings". According to the interviews, the program council meetings are highly appreciated by the teachers for this specific purpose. At the same time, the student interviewees suggested that there could be more communication between and within the courses (leaders and teachers), to avoid unnecessary repetition. Maybe more open communication between the staff and students about the pros and cons related to "repetition", and how the students think about this? Also, we suggest making progression matrices that can be useful for the teachers and the students. Another suggestion for improvement is mentioned under Point 2.4. of the self-evaluation: "... consider developing a set of in-depth questions after the last course of each semester, to gain more information about the alignment and progression between courses covering the same topics".
- The program has defined that too many local and regional examples are used in teaching. Opening up for student contribution might be one way to progress in this matter, considering the diversity of the students. In addition, this might also increase a more student-centered approach to teaching.
- According to the self-evaluation, "although students sometimes express concern at our focus on methodology for scientific research (academia), these skills can also be applied to practical tasks that public health experts are expected to perform, such as investigative work". We suggest that the program consider discussing the curriculum outline and content with an advisory board that includes senior public health practitioners (as also mentioned under the Assessment criterion Goal Attainment).
- Low attendance of students was mentioned several times, in the self-evaluation and in the interviews. Have you considered conducting an inquiry with the students to understand why (including a question about how to raise the low response rate to the course evaluations)? And to communicate

to the students that this is not a problem only for the individuals that are not present, but also for the interaction between students, and in allocation of teacher resources?

- Another aspect related to low attendance is that, according to the course evaluation of the degree project course, there was variation in the proportion of students taking the different self-learning modules as well as in their opinions on the usefulness of these modules. Consider if and how it is possible to make these modules more “popular” and useful.
- Student’s self-reflection of their own learning is mentioned as an ambition. At the same time course evaluations say that students are not satisfied with the amount of time for reflection. A need for more time for reflection was also raised in the student interview. Another point raised in the student interview was a need for more individual feedback. Consider if and how addressing these needs can be possible, even in the context of limited resources. Maybe the leadership should go over how the courses are outlined to make room for these aspects.
- The self-evaluation mentions that the proportion of students (67%) describing that the psychosocial study environment has worked well, could be higher. A suggestion from the student interviewees was to up-date all teachers about socio-psychological aspects of a learning environment. We further suggest making these aspects explicit on the homepage or similar towards current and new students.
- Finally, a point that was not raised anywhere else, but was clear in the student interview, is that the students expressed that the education is very intensive and that they would be happy to study later in the spring/summer to have a short break around Christmas-New Year (also mentioned in 2.4).

Evaluation: Overall, it is the evaluation that the programme meets the requirements of the assessment criterion. The justification for that evaluation is that there is obviously a strong connection between education and research. The teachers are active researchers and they use their own research and other professional experience actively in their teaching. The students are invited to the research environment of the department also in other ways.

While the assessment criteria are focused on a close connection between research and education, and to some extent, profession, we are happy to see that the authors of the self-evaluation also discuss the three perspectives of the KI’s pedagogical policy, that is, psychological safety of the learning environment, scholarship in teaching and learning, and student-centered and active learning.

2. Assessment area: Design, implementation and outcomes

2.1 Assessment criterion Goal attainment

For each degree, there are a number of formulated qualitative targets (outcomes for the degree) in the System of Qualifications (Appendix 2 to the Higher Education Ordinance). In addition to the national outcomes, programmes may also have local outcomes, which are described in the programme’s curriculum. In order to delimit the scope of the evaluation, KI makes a selection of outcomes prior to each programme evaluation. The principle of selection is that at least one outcome per form of knowledge is included in the selection. For programmes that provide both a general

qualification and a professional qualification, at least one outcome from each degree must be included. For programmes with local outcomes, at least one local outcome must be included. The total number of outcomes chosen should not exceed six.

The qualitative targets (outcomes for the degree) define what the student should have achieved when the degree is issued. The programme must describe how the education ensures that the student is given the opportunity to achieve the outcomes when the degree is issued. Such a report may include, for example, the nature of the progression, the link between outcomes for the degree, intended learning outcomes in course syllabi, learning activities and assessments, grading criteria and how they are used, appropriate teaching methods and activities and the way in which student learning is promoted, and how the student's conditions and needs are considered.

Assessment criterion: Goal fulfilment, the form of knowledge and understanding

Assessment criterion for Goal Fulfilment – Knowledge and understanding

Through design and implementation, the programme enables, and ensures through assessment, that the student, when the degree is issued, can achieve the selected outcomes within the knowledge form knowledge and understanding in the system of qualifications.

Target

For a Degree of Master (120 credits) the student shall demonstrate knowledge and understanding in the main field of study, including both broad knowledge of the field and a considerable degree of specialised knowledge in certain areas of the field as well as insight into current research and development work.

Programme description:

In our mapping of the degree outcomes, ILOs, learning activities and examinations it became clear that course leaders find it challenging to separate the ILOs related to knowledge and understanding, competence and skills, and judgement and approach, since the definitions of these overlap considerably.

The ILOs closely associated with knowledge and understanding involve the principles, concepts and methods associated with public health across the continuum of its challenges (Figure 1). The programme is characterized by progression of knowledge and understanding in terms of early courses providing an introduction to the main field of study and later courses building on these, in terms of increased complexity and specificity in relation to respective specialization. The ILOs are generally characterised by such descriptors as understand/ comprehend/be familiar with; identify; define; describe and discuss; present; explain; reflect upon; relate; interpret; apply; formulate; demonstrate; draw conclusions; make informed decisions. All courses have ILOs that progressively contribute to the achievement of this national degree outcome. Three example are outlined below.

Surveillance of public health challenges

ILOs	Course
Compare and contrast population health in different contexts over time from a global health perspective using data on health status, burden of disease and	Public health sciences - concepts and theories

social determinants/ Relate the changes in health and social determinants to the SDGs.	
Describe and discuss the key components of epidemiology/ Discuss the application of epidemiological methods in different contexts, including etiological and descriptive purposes	Methods for studying the distribution of health
Understand key theoretical concepts regarding survey methodology, data collection and questionnaire design	Collecting and organizing epidemiological data

Etiology

ILOs	Course
Reflect upon the importance of the social determinants of health in relation to equity in health.	Public health sciences - concepts and theories
Describe theoretical models for causality and discuss principles of causal mechanisms/ Draw conclusions from epidemiological scientific articles and summarise and review these critically based on study design, results, validity and precision.	Epidemiological methods for studying determinants of health
Identify and account for how determinants for public health problems are studied and be able to reflect and account for strengths and weaknesses in different study designs.	Applied epidemiology 2 – determinants of health

Intervention/Implementation

ILOs	Course
Explain key public health concepts and theories used in public health science and discuss how they can be applied in public health work and research.	Public health sciences - concepts and theories
Demonstrate knowledge and understanding of health promotion and evidence-based public health/ Discuss the systematic approach of health promotion programme development	Introduction to planning and program development
Formulate relevant questions related to outcome evaluation of specific projects or interventions/Discuss pros and cons of different study designs to be employed in the evaluation, considering scientific robustness (e.g. causal inference), feasibility and costs/ Identify possible sources of bias (especially confounding)	Epidemiological methods for outcome evaluation of public health interventions

in establishing a causal role of the intervention on the chosen outcome	
Demonstrate knowledge and understanding of theories, models and frameworks in implementation research/ Demonstrate how implementation strategies are chosen based on barriers and facilitators	Theories and methods for implementation and evaluation

In order to support students in achieving the ILOs related to knowledge and understanding (as well as competence and skills and judgement and approach, which are described below) different learning activities are offered, with a focus on student-activating methods. These include providing students with relevant literature, carefully formulated lectures, discussion/debate/roleplay seminars and workshops, interactive Q&A sessions, practical/lab sessions, study visits, quizzes, targeted written and oral assignments (both individual and performed in groups). Guided self-study (including self-assessment) also plays an important role in learning as does peer review and teacher feedback. Teaching activities are formulated to ensure that all students receive the support necessary to meet the course learning outcomes. For example, in the Qualitative Methods course (with reference to goal fulfillment of competence and skills), an iterative task design is used, where task challenges increase with sequential learning activities:

Develop interview guide à Revise guide in response to feedback à Conduct an interview à Reflect on pros and cons of the data collection instrument à Undertake peer review of interview performance.

Another example of student support in reaching ILOs (related to judgement and approach) is the requirement of students to keep a learning diary in the Applied health promotion and prevention course.

Learning outcomes are formally assessed through mandatory course assignments and examinations as well as the final thesis. Each course is graded on a scale pass with distinction/pass/fail. Challenges that we have identified in relation to goal attainment of knowledge and understanding are as follows:

- We have experienced that some students still do the bare minimum to pass their exams. We need to investigate how we can further motivate students to deep-dive into their learning before they are faced with the degree project.
- Assessment drives learning and we are looking into how we can further diversify examination forms.
- When it comes to the availability of AI tools, we are faced with a number of questions that we need to explore and discuss: How can we integrate AI in assessments? How can we accurately assess student knowledge? How can we motivate students to learn independently?

Assessment panel's evaluation

Instruction
For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below: Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them,

preferably in bullet points.

Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.

Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: *Meets/Meets to a large extent/Meets to some extent/Does not meet*.

Strengths:

- The epidemiology strand is very strong in epidemiology, incl. evaluation of interventions
- The health promotion strand is equally strong but with an emphasis on intervention planning, including prioritisation, implementation, and evaluation.
- Students generally appreciate the program's structure, content, and instructors.
- The close connection between teaching and ongoing research at KI is a significant advantage, including an open research environment where students are invited to research seminars and other events.
- Students are clearly inspired by the participation of leading researchers as teachers in their courses.
- The program's commitment to enhancing student engagement through various teaching methods is a strength.
- The availability of digital resources supports self-learning and preparation for in-depth class learning, which is highly beneficial.
- The inclusion of a course in theory of science is a notable strength.
- The inclusion of a course in qualitative methodology is a notable strength.

Areas for improvement:

- Public health science is a broad field. Consequently, not everything can be covered in a two-year master's program and choices have to be made. However, we are concerned that the strong emphasis on methodology in the Epidemiology strand may limit the opportunity to address the broader spectrum of public health challenges, which are crucial for both public health practice and research (also see Goal Fulfillment, Local Outcome below). We suggest that the program consider discussing the curriculum outline and content with an advisory board including senior public health practitioners to see if the current syllabus and its courses need to be complemented with more practical public health knowledge and skills. Although a broader public health perspective to some extent is covered in the first courses of the program, practical implications of for example epidemiology and the relevance of theory could potentially be improved in later courses in the program.
- Although clarified for some courses (as displayed in the excel document), consider making the connection between ILOs and examination even more explicit towards the students for all courses in the program.
- Progression is discussed in the self-evaluation and it is stated that "Students continuously build on the competence and skills acquired in previous modules and this culminates in the Master's thesis". This is positive.

However, details on these progressions are only found in some areas. Consider developing more detailed progression matrices within each main field, e.g., theoretical frameworks, biostatistics, epidemiology, qualitative methodology, policy and intervention, etc. This exercise might enhance alignment and progression between courses and the final document can also be used in communication with students and guest lecturers.

- As noted in the self-evaluation, it can sometimes be challenging to distinguish between knowledge and understanding, competence and skills, and judgment and approach. However, doing so remains valuable and aligns with the Bologna Agreement. Therefore, even though KI does not seem to regulate the format for Intended Learning Outcomes (ILOs), we suggest that the program consider explicitly including these three headings in all course plans which is the case in many other universities. This approach will clarify the course content for both teachers and students and enhance and clarify the connection between ILOs and assessments.
- The student interviews indicated that criteria (and their rationale) for the different grades can be improved and made clearer for the students. We suggest that course leaders report to program leadership how this is done today and if improvements are possible.
- Like all universities, this program needs to discuss how to handle Artificial intelligence. Some other universities have developed policies that are made transparent to both teachers and students. Consider if this would contribute to the quality of this program.
- In course evaluations and interviews, students expressed a desire for more individual feedback. While we recognize the budgetary constraints, we agree that individual feedback is a crucial component of a master's program. We recommend exploring ways to enhance individual feedback, even within the limitations of available hours.

Evaluation: Overall, the evaluation concludes that the program meets the assessment criteria. The justification for this evaluation is that students receive a solid foundation in methodology, particularly in the epidemiology strand. Likewise, students in the health promotion strand are well-prepared to understand and manage the complexities of prioritization, planning, and implementation. The learning environment is enriched by diverse teaching methods, a close connection to research environments at KI, and the presence of leading researchers who serve as inspirational teachers.

However, some improvements are suggested, particularly focusing on additional topics needed for students in the epidemiology strand to fully meet the local outcome expectations but also to be a masters in Public health science rather than a masters in Epidemiology.

Assessment criterion: goal fulfilment, the form of knowledge competence and skills

Assessment criterion: Achievement of objectives – competence and skills

Through design and implementation, the programme enables, and ensures through assessment, that the student, when the degree is issued, can achieve the selected outcomes within the knowledge form of competence and skills in the System of Qualifications.

Target

Degree of Master (120 credits) the student shall demonstrate the ability to identify and formulate issues critically, autonomously and creatively as well as to plan and, using appropriate methods, undertake advanced tasks within predetermined time frames and so contribute to the formation of knowledge as well as the ability to evaluate this work.

Programme description:

The overall aim of the programme is to prepare students for public health practice and research. Research methodology is therefore a key element of the programme content. Some epidemiology courses are shared by the two specialisations: Methods for studying the distribution of health, Collecting and organizing epidemiological data, Epidemiological methods for studying determinants of health and Epidemiological methods for outcome evaluation of public health interventions. Additionally, both specialisations receive a solid foundation in biostatistics (offered via two progressive courses) and a course on qualitative methods. Students of the Public Health Epidemiology specialisation are offered a module on Systematic review and meta-analysis. Within their specialization, students of Public Health Epidemiology learn how to apply epidemiological methods and designs in a diversity of public health problems as well as developing their ability to quantitatively evaluate complex public health interventions. Meanwhile, students of Health Promotion and Prevention develop their ability to develop, plan, implement as well as evaluate complex public health interventions, both quantitatively and qualitatively.

The ILOs associated with the national degree outcome related to competence and ability are characterised by such descriptors as compare and contrast; discuss; relate; distinguish; differentiate; interpret; critically evaluate; explain; link; draw conclusions; make informed decisions; demonstrate; formulate; propose; motivate; plan; design; construct; apply; integrate; perform; implement.

Students continuously build on the competence and skills acquired in previous modules and this culminates in the Master's thesis. For example the Degree course ILO "Being able to reflect upon and apply a suitable approach to the thesis, study design, and to select appropriate methods for data collection and analysis" builds on multiple ILOs from previous courses including:

- Biostatistics 1 - Construct and interpret point estimates and confidence intervals/Formulate and conduct test of hypothesis.
- Biostatistics 2 - Implement different strategies for modelling quantitative predictors/ Assess and present interaction between predictors.
- Qualitative methods Make informed decisions about which types of research questions are best answered using qualitative methods/ Describe key characteristics of main qualitative analysis methods.

- Epidemiological methods for studying determinants of health: Explain and discuss epidemiological concepts including validity and precision related to different epidemiological study designs.
- Epidemiological methods for outcome evaluation of public health interventions - Formulate relevant questions related to outcome evaluation of specific projects/interventions.
- Compile and critically review current scientific literature, with regard to determinants for public health problems PHEPI - Applied epidemiology 2 - determinants of health.
- HPP - Theories and methods for implementation and evaluation - Demonstrate knowledge and understanding of theories, models and frameworks in implementation research: Ability to choose a suitable theory, model or framework for a given complex intervention and how to combine them to build a program theory.
- HPP - Applied health promotion and prevention - Apply relevant theories, models and frameworks to an existing health intervention.

At the end of the programme, students are expected to be able to independently write and defend a Master's thesis. As a part of the thesis writing process, students should be able to identify their need for additional knowledge and skills in relation to the implementation of their chosen project, and to reflect on their approach to acquiring these. Assessment also includes the student's ability to critically evaluate and discuss the degree project of one of their peers, at different stages of the process, culminating in the Master's thesis.

As described above, we emphasise the principle of self-directed and student-active learning and the provision of structured feed-back with a view to promoting the skills and ability to plan and execute good-quality work within specified deadlines. Students are expected to submit mandatory assignments and their Master's thesis on time (and cannot achieve distinction if they do not do so). These skills are also taught in the program management course, where students learn how to apply tools, such as Gantt charts, to facilitate the process.

The disciplinary background and previous experiences of the students is heterogeneous. This is a challenge when planning learning activities. The programme is structured in such a way that students quickly establish a common foundation of concepts, with some students e.g. receiving additional literature to bring them up to speed. Application of concepts and critical review is, however, easier for students with certain pre-knowledge. Being aware of this, the course leaders aim to mitigate the potential frustration of those students who feel that they are not advancing rapidly enough, by means of encouraging them to contribute their abilities to the learning of their classmates (i.e. by sharing examples of previous work/study experience).

Assessment panel's evaluation

Instruction
For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:
Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.
Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.

Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: *Meets/Meets to a large extent/Meets to some extent/Does not meet.*

Strengths:

- There is an outspoken ambition with a clear progression towards the thesis where students are expected to demonstrate a comprehensive range of competencies and skills.
- An evident strength is the various use of teaching methods with an emphasis on a student active approach where the students themselves are responsible for their learning process.
- It is a strength that the program is aware of the challenges with a heterogeneous student group and that various methods are used to meet the needs of both students that struggle and students that are more advanced. We acknowledge the challenge in this work that is probably joint for most international masters programs in public health.
- A notable strength of the health promotion strand is that students explicitly practice competencies related to prioritization, intervention planning, and evaluation, all core competences within public health practice.

Areas for improvement:

- As mentioned under Goal fulfillment for the local outcome below, we are concerned that students in the epidemiology strand might get too little of essential public health competencies & skills beyond biostatistics and epidemiology, e.g., prioritization, planning, and implementation, including considerations related to public health ethics, human rights, sustainability, evidence-based public health, politics, trade-offs and public health dilemmas.
- Although some generic competencies are mentioned we miss a more explicit progression plan of these competences/skills throughout the program in the two different strands. Beyond general generic skills like working in a group, presentation, synthesizing data etc, public health practitioners might also need competences in how to work in interdisciplinary teams, understand and handle political frameworks, etc. We suggest that the program discuss what generic competencies that might be relevant to its students and their future work. The result can then be displayed in a progression matrix. This can be useful, not only to see that the generic skills are covered, but also as a tool for teaching planning and communication with students.
- As noted in the self-evaluation some teachers struggle with the distinction between knowledge and understanding, competence and skills, and judgment and approach. We acknowledge that this can sometimes be challenging but nevertheless, to be able to assess whether students meet the ILOs this distinction needs to be done, both in the course plans and in relation to assessment. This should also be clear to the students. Therefore to distinguish competence and skills from other ILOs we suggest that 1) ILOs are structured under each of these three headings in the course plans and , 2) each course leader provides an overview of the connection between each ILO and the assessment. The provided excel document is a good start but can be made clearer for some courses.
- We appreciate and agree with the self-evaluation that students in the HP strand might need added training in meta-analyses and systematic reviews

and that all students might need additional training in conducting qualitative studies.

- We also agree with that the students might need “more training in the prioritization process”, although this seems to be more urgent in the epidemiology strand

Evaluation: Overall, it is the evaluation that the programme meets the requirements of the assessment criterion. The justification for that evaluation is that students in the two strands get explicit competence in respective fields of focus, i.e., health promotion and epidemiology. Quality is strengthened by the student active approach, the large variation in teaching methods and the close collaboration with research environments at KI. Still, we also note that the quality could be improved further by clearly distinguishing and communicating the three levels of Intended Learning Outcomes (ILOs) and by providing an explicit progression matrix for generic competencies. Additionally, it is noted that the epidemiology strand may lack sufficient practical public health competencies in areas such as prioritization, planning, and implementation.

Assessment criterion: Goal fulfilment, the form of judgement and approach

Assessment criterion: Goal fulfilment – judgement and approach

Through design and implementation, and through assessment, the programme ensures that the student, when the degree is awarded, can achieve the selected outcomes within the form of knowledge of judgement and approach in the System of Qualifications.

Target

For a Degree of Master (120 credits) the student shall demonstrate the ability to make assessments in the main field of study informed by relevant disciplinary, social and ethical issues and also to demonstrate awareness of ethical aspects of research and development work.

Programme description:

Ability to make assessments in the main field of study informed by relevant disciplinary, social and ethical issues

Throughout the programme and in a progressive manner, students learn how to critically reflect upon and make judgements about relevant scientific, social and ethical aspects related to public health as exemplified in the ILOs below.

Scientific	Social	Ethical
<p>Theory of Science Reflect on the authority of scientific knowledge and its basis and to critically examine scientific debates in the public health sciences.</p>	<p>Public health sciences - Concepts and theories Reflect upon the importance of the social determinants of health in relation to equity in health.</p>	<p>Public health sciences concepts and theories Explain major theories pertaining to normative ethics and apply normative principles to ethical dilemmas in public health research and practice.</p>

<p>PHEPI - Applied epidemiology 2 - Determinants of health</p> <p>Compile and critically review current scientific literature, with regard to determinants for public health problems.</p>	<p>HPP - Theories and methods for implementation and evaluation</p> <p>Reflect on the strengths and limitations of an evidence-based approach to health and how this relates to the Sustainable Development Goals.</p>	<p>Project management</p> <p>Describe and apply the ethics principles throughout the planning.</p>
<p>HPP - Introduction to planning and program development</p> <p>Critically analyse and adequately justify the decisions made during the systematic development of the programme theory.</p>		<p>HPP - Applied health promotion and prevention</p> <p>Reflect on potential ethical considerations for various health interventions.</p>
<p>Degree Project in Public Health Sciences</p> <p>Reflecting and discussing the research project's possibilities and limitations from a population perspective.</p>		<p>Degree Project in Public Health Sciences</p> <p>Adopting a research-ethics approach, including the application of general ethical principles in his/her own thesis work/ Assessing and critically scrutinising other students' work using relevant scientific and ethical aspects.</p>

Awareness of ethical aspects of research and development work.

Students are taught about the role, importance and application of ethics in public health research and practice. They are encouraged to reflect upon ethics during class discussions and incorporate ethical considerations whilst performing individual and group assignments and in answering examination questions. Progression of student understanding of ethical issues is ensured through the structured alignment of programme ILOs.

Public Health Sciences - Concepts and Theories (7.5 credits)

- Explain major theories pertaining to normative ethics and apply normative principles to ethical dilemmas in public health research and practice.

Collecting and Organizing Epidemiological Data (7.5 credits)

- Apply the normative principles prevailing in research on human subjects to different types of methodologies and contexts in public health research.
- Explain and demonstrate elements needed for informed consent.

Qualitative Methods (7.5 credits)

- Content (not objectives) - Specific ethical aspects of different phases in qualitative research in health are discussed throughout the course (NB. Content, not objective).

Project Management (3 credits)

- Describe and apply the ethics principles throughout the planning.

Applied Health Promotion and Prevention (10 credits)

- Reflect on potential ethical considerations for various health interventions.

Degree Project in Public Health Sciences (30 credits)

- Adopting a research-ethics approach, including the application of general ethical principles in his/her own thesis work.
- Assessing and critically scrutinising other students' work using relevant scientific and ethical aspects.

Course leaders have, however, described some students' inability to recognize and apply ethical principles in practical examples until they begin their thesis work, at which time they are required to relate ethics to their project's research question and methods, and to the implications of their study findings. We aim to map the practical examples that students are exposed to before this point, and we are considering implementing study protocol exercises earlier in the programme.

One challenge that we have identified in relation to judgement and approach is that students have different perspectives on various issues, and this can sometimes result in strong personal opinions and sometimes hurt feelings in the classroom environment. Decolonization, Covid 19 policy and practice, vaccine hesitance and the hierarchy in medicine have been seen to require particular sensitivity in their teaching.

Assessment panel's evaluation

Instruction
<p>For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:</p> <p>Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.</p> <p>Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.</p> <p>Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: <i>Meets/Meets to a large extent/Meets to some extent/Does not meet</i>.</p>
<p>Strengths:</p> <ul style="list-style-type: none"> • It is a strength that the program has a specific course in theory of science and also discusses ethics in the first course in the program. • Ethics seem to be explicit in several courses, particularly for the students in the health promotion track. • It is positive that the first course comprises a more comprehensive approach to ethics in public health. In other subsequent courses, focus seems to be on research ethics, particularly for the epidemiology strand. <p>Areas for improvement:</p> <ul style="list-style-type: none"> • As highlighted in the strengths, research ethics is integrated into several courses, with a broader introduction to ethics in the first course. However, given that ethical perspectives beyond research ethics are crucial to many

public health challenges, we recommend clarifying the progression of these perspectives across the courses. Additionally, we recommend that the judgment and approach aspects also include areas such as social justice, equity, human rights and the right to health, political priorities and dimensions of sustainability.

The self-evaluation highlights that “Course leaders have described some students’ inability to recognize and apply ethical principles in practical examples.” Interviews also revealed an internal awareness of the lack of focus on ethics in relation to policy and prioritization, but also on societal and economic perspectives of sustainability. To address this, we suggest clarifying the progression in these topics, and particularly so in the epidemiology strand. It does not need to involve major changes but our recommendation is that aspects of these topics are considered explicitly within the ILOs under judgment and approach, in all courses. When initiating this work, it may be beneficial to seek advice from experts such as public health ethicists and public health lawyers with a focus on human rights and from educational developers at LIME at KI, to make sure that the progression in content is explicit within the ILOs and in alignment with the learning activities etc.

- In the mapping of ILOs (the Excel document), we noticed that Biostatistics 1 & 2 lack ILOs on judgment and approach. We recommend the course leadership consider adding this.
- Although the epidemiology courses clearly include a critical perspective from a methodological perspective (e.g., pros and cons of different study designs, forms of biases etc), several course plans (4FH086, 4FH089, 4FH094, 4FH095) lack an explicit critical approach from a social epidemiological perspective. This includes the relevance of theory in planning, conducting and interpreting epidemiological studies, but also in the understanding and operationalization of social processes/phenomena, and in the implementation of epidemiological results. If we missed something and these aspects are already covered in the actual teaching, consider making them more explicit in the ILOs to enhance students' critical approach to research and practice in public health.
- The self-evaluation notes, “One challenge we have identified in relation to judgment and approach is that students have different perspectives on various issues, which can sometimes result in strong personal opinions and hurt feelings in the classroom environment.” Interviews also revealed that some teachers avoid these topics. We acknowledge this challenge and understand that handling these issues can be difficult for teachers. However, these dilemmas and sensitive topics are central to public health science (e.g., Covid-19 response, conflicts like Gaza/Israel and Ukraine/Russia, sexism, racism, sexuality or other politically polarized topics). Therefore, we suggest viewing these diverse perspectives and controversies as valuable resources. To make this possible and constructive, staff should receive adequate training and engage in continuous dialogue on handling these discussions and sharing experiences. Nevertheless, finding time for this training might be challenging for teachers with limited teaching time. The program manager can contact student health at KI to coordinate tutoring for teachers about support and guidance in handling "difficult encounters" with students. It is possible to adjust the times for the tutorial so that most

teachers can attend. It is also recommended that the program management creates a more clear plan in terms of how to support teachers' pedagogical development. This is an important aspect of their careers and pedagogical portfolio.

Evaluation: Overall, it is the evaluation that the strand of the programme that focus on **health promotion meets the requirements** of the assessment criterion for Judgement and approach. The justification for this evaluation is that the complexities in public health practice and research is covered in several of the courses and not only ethics is discussed but also other relevant perspectives like prioritization/dilemmas and dimensions of sustainability. The strand focusing on **epidemiology meets the requirements to some extent**. The justification for this evaluation is that in the current outline of this strand ILOs within Judgement and approach only to some extent covers essential perspectives like public health ethics, human rights and the right to health, political ideology, equity, and various dimensions of sustainability. Consequently, students meet these perspectives to some extent in the first courses of the program but potentially not so much in subsequent courses within their strand. Related to this remark, we appreciate that the need for further alignment of dimensions of sustainability and equal opportunities is noted in the self-evaluation.

Assessment criterion for goal fulfilment, local outcome

Assessment criterion Goal fulfilment – local outcome

The education enables through design and implementation and ensures through assessment that the student, when the degree is issued, can achieve the selected local outcome.

Target

Master's Programme in Public Health Sciences

The student should demonstrate the ability to critically evaluate how public health problems should be prioritized, as well as to plan and implement preventive strategies.

Programme description:

There are ILOs for this local outcome in multiple courses:

Public health sciences - concepts and theories: Compare and contrast population health in different contexts over time from a global health perspective using data on health status, burden of disease and social determinants. Relate the changes in health and social determinants to the SDGs.

Methods for studying the distribution of health: Estimate and interpret measures of disease occurrence

Theory of science: Identify and discuss the Sustainable Development Goals in Agenda 2030 in relation to public health science theory

PHEPI -Applied epidemiology 1 - distribution of health: Assess the quality of various epidemiological surveillance systems/ Carry out and interpret statistical analyses of population based data to describe occurrence and distribution of health and health determinants

HPP - Introduction to planning and program development: Critically analyse and adequately justify the decisions made during the systematic development of the programme theory.

Epidemiological methods for studying determinants of health: Calculate and interpret measures on disease occurrence and relationships, and describe how a specific measure is influenced by the study design.

Qualitative methods: Discuss how qualitative data can contribute to the understanding of the global sustainable development goals and of the health effects of climate change

Project management: Describe and apply planning, costing and risk assessment of projects

Epidemiological methods for outcome evaluation of public health intervention: Motivate the proposal from the perspective of desired level of inference, validity of the results, decision-makers' need and costs/ Describe the scientific and policy implications of the evaluation results, and link this to the SDGs

PHEPI - Applied epidemiology 2 - determinants of health: Compile and critically review current scientific literature, with regard to determinants for public health problems, and be able to communicate knowledge of the determinants of diseases/ Carry out and interpret statistical analyses of population-based data to describe determinants for health.

HPP - Theories and methods for implementation and evaluation: -Apply knowledge in the design of a process and outcome evaluation of complex interventions and policies/ Demonstrate how implementation strategies are chosen based on barriers and facilitators/ Reflect on the strengths and limitations of an evidence-based approach to health promotion, and how this relates to the Sustainable Development Goals (SDGs)

HPP - Applied health promotion and prevention: Link relevant UN Sustainability Development Goals to a specific intervention and motivate such connection(s)/ Identify potential risks in the implementation of the identified public health intervention and outline risk mitigation strategies.

Degree Project in Public Health Sciences: Being able to critically and independently identify, formulate and handle complex issues relevant within public health sciences.

Upon scrutinizing the formulation of this local outcome, we realize that the students become strong at identifying and analyzing the magnitude of public health problems and their causes, as well as suggesting preventive strategies. However, we see that the students receive scant instruction about the political, social, and cultural perspectives involved in setting the agenda for public health prioritization. Prioritization of health challenges could be demonstrated by means of sharing practice examples.

Although both programs give students a strong foundation in evaluation of public health interventions at individual and structural levels, it is the focus of the Health Promotion and Prevention specialisation to equip students with the theoretical and practical skills necessary to develop, plan and implement preventive work.

Relevant course outcomes:

- HPP – Introduction to planning and program development: Critically analyse and adequately justify the decisions made during the systematic development of the programme theory.

- HPP - Theories and methods for implementation and evaluation: Demonstrate knowledge and understanding of theories, models and frameworks in implementation research: Ability to choose a suitable theory, model or framework for a given complex intervention and how to combine them to build a program theory.

Assessment panel's evaluation

Instruction
<p>For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:</p> <p>Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.</p> <p>Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.</p> <p>Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: <i>Meets/Meets to a large extent/Meets to some extent/Does not meet</i>.</p>
<p>Strengths:</p> <ul style="list-style-type: none"> • Students in the epidemiology strand become skilled in investigating disease distribution, defining risk groups, causal pathways and effect evaluation,, which are all highly relevant skills for the ability to “critically evaluate how public health problems should be prioritized and planning and implementing preventive strategies”. • Although not as skilled in epidemiology the students in the health promotion strand will get more prepared for the complex task of public health prioritization, planning and implementation. A critical approach and the relevance of theories is clearly stated in the ILOs in this strand. The students will also be equipped with knowledge on the relevance of dimensions of sustainability. <p>Areas for improvement:</p> <ul style="list-style-type: none"> • We acknowledge the self-evaluation's observation that students receive “scant instruction about the political, social, and cultural perspectives involved in setting the agenda for public health prioritization. Prioritization of health challenges could be demonstrated by sharing practice examples.” This view of this challenge was reinforced during our interviews with the program leadership. <p>We agree with this assessment. While it is crucial to display disease distribution, define high-risk groups, and identify causal pathways, experiences from the Covid-19 pandemic clearly exemplifies that these aspects are only one part of the complex task of prioritization, planning, and implementation of interventions and policies. While the epidemiology</p>

strand may not be able to encompass as much of this content as the health promotion strand, we believe that to earn a Master's in Public Health Science rather than a Master's in Epidemiology, these topics need to be addressed more thoroughly than they are currently (in the epi-strand).

We suggest that the program leadership consider whether it is possible to include these topics in the current courses of the Epidemiology strand or if a syllabus change is needed. As discussed in other points above, areas for consideration can include: more social epidemiology, public health ethics, social justice and equity, sustainability, human rights and the right to health, politics, and role of corporate actors. We recognize the challenge of selecting focal points for a two-year master's program in public health due to the breadth of the topic and, we do not expect the epidemiology strand to be as comprehensive as the health promotion strand in the matters described above. However, including more of these topics would better equip students to achieve the local goal of an ability to "...critically evaluating how public health problems should be prioritized and planning and implementing preventive strategies".

- We acknowledge that the need for "more training in the prioritization process" is noted in the self-evaluation. We see that this need is particularly strong for students in the epidemiology track. In addition, we note that, beyond epidemiology, the competence of prioritisation is closely connected judgement and approach as discussed above.

Evaluation: Overall, it is the evaluation that the strand of the programme that focus on **health promotion meets the requirements** of the assessment criterion for Judgement and approach. The justification for this evaluation is that the complexities in public health practice and research is covered in several of the courses and not only ethics is discussed but also other relevant perspectives like dimensions of sustainability. This is highly important to meet the local outcome. The strand focusing on **epidemiology meets the requirements to some extent**. The justification for this evaluation is that in the current outline of this strand, the ILOs does not sufficiently cover what the students need to meet this local outcome, neither for knowledge and understanding, nor skills and competence.

2.2 Assessment criterion Equal opportunities

Integrating equal opportunities into all levels of the education is a natural part of how KI should work in accordance with applicable laws and regulations. The goal of KI's courses and programmes is as expressed in Strategy 2030: "It must be ensured that the programmes provide the knowledge about gender, power and equal opportunities required to provide the conditions for equal health and social care".

Equal opportunities is an umbrella term for KI's work to promote equal rights, opportunities and obligations, and to counteract all forms of discrimination, harassment, sexual harassment, victimisation and exclusion. The Equal Opportunities area includes the seven grounds of discrimination established in the Discrimination Act (2008:567): sex, transgender identity or expression, ethnicity, disability, sexual orientation, religion or other belief, and age. In addition, the area of socio-economic background is also included in the equal opportunities work. Broadened participation, i.e. a student's opportunity to complete their studies regardless of their background and their circumstances, is also part of the equal opportunities work.

The integration of equal opportunities in KI's education will take place at three levels:

- Content – which means that equal opportunities is an area of knowledge that is taught and examined.
- Implementation – which means that equal opportunities characterise the pedagogy so that the teaching becomes inclusive and accessible.
- Design – which means that there is a structure for how and where equal opportunities are to be integrated, and that there is progression.

Assessment criterion Equal opportunities

An equal opportunities perspective is taken into account, communicated and anchored in the content, design and implementation of the education.

Programme description:

Addressing the social determinants of health (SDH) appropriately is fundamental to improving health and reducing longstanding inequalities in health. Our students learn about SDH and are equipped with tools necessary to address these across research and practice. The SDH are included in the ILOs of three of the courses:

- Public Health Sciences - Concepts and Theories: Reflect upon the importance of the social determinants of health in relation to equity in health.
- Applied Epidemiology 1 - Distribution of Health: Carry out and interpret statistical analyses of population-based data to describe occurrence and distribution of health and health determinants.
- Applied Epidemiology 2 - Determinants of Health: Identify and account for how determinants for public health problems are studied and be able to reflect and account for strengths and weaknesses in different study designs/ Compile and critically review current scientific literature, with regard to determinants for public health problems, and be able to communicate knowledge of the determinants of diseases.

Students learn that gender, age, and socioeconomic position are factors that affect and interact with almost all outcomes and exposures as well as the effectiveness of interventions. Equal opportunities in practice are also addressed in the context of psychiatric and ageing epidemiology (hard to reach groups) as well as methods for measurement and the ethical implications of consent. Furthermore, students learn about the relationship between study design and participant selection, the implications of ethnocentrism and how to avoid judging other groups from the perspective of our own culture, and the risk of paternalism in public health.

In the 2023 exit poll, students respond favourably (4-5 on a scale of 1-5) to whether they feel “well-prepared for my future role’s requirement to be able in my work to encourage”: Gender equality (73.9%) and Equal treatment based on ethnic background, religion, social class, age etc. (78.2%). We see that we need to increase their knowledge of Equal rights from LGBTQIA+ perspectives (62.5%); Equal treatment of people with functional variations (58.4%). We do not think the questions in the exit poll reflect the students’ ability to critically reflect on these issues. To feel “able to encourage e.g., gender equality, is not the same as being able to incorporate and justify gender perspectives in public health work. Hence, we will need to develop alternative questions or ways of measuring the equal opportunity perspective in the content and design of the programme. We plan to further map the incorporation of

the different equal opportunity perspectives across the courses to ensure that they are not only raised in relation to their impact on the methodological aspects, but that the students are also trained to analyse them appropriately from a public health perspective.

In addition to being integrated in the programme course materials, equal opportunities are incorporated in the programme's structure and implementation in a variety of ways:

1. Education & training on equal opportunities for staff and students
 - a. How to be sensitive to different cultural and generational experiences, values, and norms is continuously addressed during discussions in the program council and at faculty meetings, which take place on two occasions each semester.
 - b. We encourage faculty and students to take The Canvas course "Equal Opportunities at KI" (which is self-paced). The purpose of the course is to learn about the legislation that applies to every university in Sweden with regard to discrimination, harassment and discriminatory abuse, as well as KI's policies and case management.
 - c. We also recommend that course leaders take The Canvas course "Lika villkor i undervisningen – ett toolkit" (also self-paced), which gives teachers an introduction to norm-critical pedagogy; methods for developing and integrating equal opportunities in the content, execution and design of their course; methods to shape their teaching so that it becomes inclusive and accessible.
2. Provision of an accessible and inclusive study environment
 - a. Students are asked to read and sign a code of conduct and teachers enforce an environment free from discrimination (gender, transgender identity or expression, ethnicity or other belief, disability, sexual orientation or age) in the classroom.
 - b. Students are made aware that support is available from the departmental study counselor and the KI student wellbeing center (as well as from course leaders).
 - c. Tailored solutions are in place for students with special needs (i.e. customized examinations).
 - d. Support is available for students with English as a second language. Course leaders advise students to seek support as soon as possible if there are language barriers that hinder their learning or expression of what they have learnt in assessments/ examinations.
 - e. The Canvas structure is built on a universal design for learning and is used in all courses.
 - f. Students are randomly assigned for group work (where appropriate).
 - g. Students can choose the topic of their degree project. However, the supervision support differs depending on the available resources at hand in the supervisor's team. It has been mentioned that "not all students are provided with the same learning opportunity" in the degree project course. With individual student meetings on several occasions during the course, we try to counteract this by identifying

additional needs, but it is very difficult to make it equal since the needed learning and support for projects differ.

- h. Students receive feedback on course assignments and examinations so that they are aware of the areas they need to focus on.
- i. As far as possible, student assessment and examinations are graded anonymously. In some courses, this is not possible since the students work on individual assignments throughout the course focusing on e.g., an intervention of their choice (with the course leader following their progress and providing feedback). A student can submit a request for justification of grade in relation to the assessment criteria.

Students are given the opportunity to report their experiences and perspectives in course surveys and other course evaluations, and via their student representatives. All feedback is given serious consideration.

Occasionally, we face miscommunication, misunderstandings, and tensions in the classroom. We try to solve these at course leader level, but if necessary, the PD, GUA and study counselor are available for further support, as is a student ombudsperson.

With regard to equal opportunity in the admission process, eligibility is a central KI responsibility rather than one that rests on the programme. After eligibility, admission to the programme is based on the academic, professional and motivational strength of the applicant's CVs. The criteria for evaluation is transparent in the application system. The admission process is separately performed for the two specialisations. In total four evaluators (including the PD) independently assess the applications (two per specialization). In cases of uncertainty or disagreement the PD is approached. The PD is responsible for all the final merit evaluations. In case of conflict of interest, the evaluators hand over the evaluation to another member of the group.

Assessment panel's evaluation

Instruction
<p>For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:</p> <p>Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.</p> <p>Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.</p> <p>Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: <i>Meets/Meets to a large extent/Meets to some extent/Does not meet</i>.</p>
<p>Strengths:</p> <ul style="list-style-type: none"> ● Dimensions of equal opportunity are considered in the content, and implemented in pedagogy and in the design of the education. ● As mentioned in the self-evaluation, equal opportunities is a fundamental part of public health and, accordingly, social determinants of health are covered, as well as different methodological aspects of relevance to equal

opportunity. The exit poll also supports that the students experience that several relevant dimensions are covered, e.g., ethnicity, class, gender etc.

- The program seems to provide an accessible and inclusive study environment.
- Teachers have access to specific courses and other resources to enhance their competence within the area of equal opportunities in teaching.
- There seem to be both individual resources and systems in place to support students with special needs and to handle situations where students might have perceived unequal or discriminatory treatment.

Areas for improvement:

- Although several relevant dimensions of equal opportunities are covered in the content of the courses, we suggest that the program considers if improvements can be made. In line with the suggestion of improvements under Judgment & approach and the local outcome, above, we suggest that the program consider if these perspectives can be enhanced and made more explicit in the ILOs, e.g., equity, human rights and the right to health, theories of power, politics, and additional dimensions of ethics. A more explicit focus within the ILOs might also make it easier to work with progression for equal opportunities (in the content). We appreciate that a clearer progression of equal opportunities is also noted in the self-evaluation. In this process, we also suggest the program consider including an intersectional perspective in their approach and handling of equal opportunities (if not already considered).
- The exit poll indicates that aspects such as LBTQI+ and functional variations may need additional consideration. In the self-evaluation the questions in the poll are identified as a potential reason and the validity of the results are put into questions. This might of course be a correct interpretation but we suggest the program also consider if potential improvements in some dimensions of equal opportunity need additional focus in any of the three levels.
- We note that teacher training on these topics exist and that teachers are urged to take them. However, there is no information about the share of the teachers that have taken these courses. Due to time constraints, we see a risk that these topics might be down-prioritized and suggest that the leadership evaluate if all teachers should not have these courses. If too time constraining, maybe shorter workshops on these topics can be arranged for all teachers.
- According to the assessment criteria there should be a “progression” in how equal opportunities are integrated. It was not clear to us what is meant by this and therefore we leave it to the program to consider if this criteria is met.

Evaluation: Overall, it is the evaluation that the programme meets the requirements of the assessment criterion. The justification for that evaluation is that equal opportunities are covered to some extent in the content, and clearly in the pedagogical approach. In addition, KI seems to have a strong system to support students with special needs and to handle situations where students might have perceived unequal or discriminatory treatment. If anything, the program may consider if a more explicit approach to equal opportunities can be added in the ILOs of Judgment & approach, particularly for the epidemiological strand. A clearer alignment in the area of equal opportunities is also noted in the self-evaluation.

2.3 Assessment criterion Sustainable development

In their activities, higher education institutions must promote sustainable development, which means that present and future generations are ensured a healthy and good environment, economic and social well-being and justice.

Education conducted at KI should aim to contribute to improved health for all, which is an important prerequisite for sustainable social development. It is of particular importance that educational activities highlight the link between health, socio-economic factors and human environmental impact. In accordance with KI's climate strategy, by 2024 there will be intended learning outcomes in courses in all programmes at first and second cycle, which means that students will gain knowledge and skills about climate and sustainable development.

Students who graduate from KI must have worked with issues related to sustainable development and the UN's global goals during their education. It requires that the teachers have good knowledge in the area. Teachers need to teach about the goals and the underlying challenges. Students should also be challenged to develop an ability to create visions, use critical thinking, reflect on their own role in the development of society, apply systems thinking, create partnerships and be prepared to act.

Assessment criterion Sustainable development

Through design and implementation, the programme enables the student to have worked with issues related to sustainable development and the UN's Sustainable Development Goals (SDGs).

Programme description:

Sustainable development represents a cross-cutting issue in the programme that is underpinned by progression of student knowledge from discussing the sustainable development goals (SDGs) in relation to public health science theory, to understanding how they relate to changes in health and social determinants, and finally to using them to formulate and evaluate interventions.

The SDGs are included in the specific objectives of 6 of the 14 courses.

- Public Health Sciences - Concepts and Theories (7.5 credits) - Compare and contrast population health in different contexts over time from a global health perspective using data on health status, burden of disease and social determinants. Relate the changes in health and social determinants to the SDGs.
- Theory of Science (2.5 credits) - Identify and discuss the Sustainable Development Goals in Agenda 2030 in relation to public health science theory.
- Qualitative methods - Discuss how qualitative data can contribute to the understanding of the global sustainable development goals and of the health effects of climate change.
- Epidemiological Methods for Outcome Evaluation of Public Health Interventions (10 credits) – Multiple ILOs (Overarched goal of the course is to provide the students with theoretical knowledge and practical skills for the

evaluation of complex public health interventions related to the sustainable development goals (SDGs)).

- Theories and Methods for Implementation and Evaluation (7 credits) - Reflect on the strengths and limitations of an evidence-based approach to health promotion, and how this relates to the Sustainable Development Goals (SDGs)
- Applied Health Promotion and Prevention (10 credits) - Link relevant UN Sustainability Development Goals to a specific intervention and motivate such connection(s).

Although not specified in their ILOs, other courses also incorporate aspects related to sustainable development in their learning activities.

- Applied epidemiology 2 – determinants of health: Joint seminar with Applied Health Promotion: In mixed groups, students develop and present a study targeting climate change for which they apply knowledge and skills gained in previous courses.
- Collecting and organizing epidemiological data: Providing examples from various contexts in LMICs for challenges in data collection in relation to SDGs.
- Epidemiological methods for studying determinants of health: Use of examples from different contexts and talk about environmental risk factors (climate related, socioeconomic related and more) as well as equality in health.

Identified areas of improvement include:

In the latest exit poll (2023), when asked if they feel prepared to promote sustainable development, just over 1/2 of students strongly agreed (5-6 on a scale of 1-6). Although this proportion has increased over the past 2 years (31.8% in 2021 and 46.2% in 2022), there is work to be done in ensuring that students feel more confident in this important area. We recommend course leaders to take the Canvas course “How to teach the SDGs”, which provides useful references, examples and tools.

It has been pointed out that when course leaders feel obliged to incorporate the SDGs in their learning activities, there is a risk that they are not always properly integrated. We are therefore considering incorporating peer evaluation of the different learning activities addressing the SDGs (at program council meetings). Furthermore, as we have done for ethics, we aim to assign a person to work with the course leaders to map and develop ILOs, learning activities and examinations associated with sustainable development, to ensure both alignment and progression.

Another challenge to the teaching of SDGs is the varying levels of student interest and therefore motivation. Across student cohorts, the specific interest in different SDGs has varied. In recent years, student focus has been on equity and climate change.

Some students have pointed out that it is not clear how SDGs are applied in some courses. When we tried to address this issue by e.g., arranging specific a non-mandatory 2-day workshop, few students attended, so it remains to be elucidated how to arrange the teaching as to be more student motivating.

Assessment panel's evaluation

Instruction

For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:

Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.

Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.

Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: *Meets/Meets to a large extent/Meets to some extent/Does not meet*.

Strengths:

- In accordance with KI's climate strategy, sustainable development is already included as specific ILOs in several (6/14) courses, or as specific learning activities in some courses.
- Training in the topic is offered for the teachers, and there are ideas for enhancing this work, e.g. peer evaluation and assigning a person to work together with the course leaders.

Areas for improvement:

- According to the exit polls, the proportion of students feeling prepared to promote sustainable development has increased but could be higher. The self-evaluation mentions as challenges that the course leaders may feel obliged to incorporate the SDGs in their learning activities, and that the student interest and motivation varies. In addition, according to point 2.4 of the self-evaluation, a need for further alignment across the program in the area of Sustainable development (SDG) was identified in the curriculum mapping. The ideas presented in the present section (2.3) for enhancing the integration of sustainable development to the programme sound good. In addition, maybe more systematic and innovative work on the integration of the topic to the courses at the level of design and implementation is needed, aiming at a paradigm shift (attitude change) in the course leaders and in the students.
- At least one of the specific ILOs is about Agenda2030. Could be more useful to talk about *governing documents* in the syllabi than about a specific document, as specific documents will get outdated with time.

Evaluation: Overall, it is the evaluation that the programme meets the requirements of the assessment criterion. The justification for that evaluation is that according to the self-evaluation, sustainable development is included as specific ILOs and learning activities in several courses, thus enabling the students to work with related issues. Also, there are plans for further enhancement of the integration of the topic to the courses.

2.4 Assessment criterion Follow-up, measures and feedback

In order to ensure that an education is of high quality in both the short and long term, follow-up of the education's design, implementation and results is required. It concerns how follow-up, action and feedback routines in the systematic quality work at the educational level contribute in a systematic way to ensuring and developing the

quality of the programme. The self-evaluation must describe how the various parts of the programme are continuously followed up and how the results are taken care of. An important part of taking care of results from follow-ups is to inform interested parties such as teachers, supervisors and students about any measures and changes to strengthen the quality and the continuous learning.

The assessment criterion for follow-up, measures and feedback also includes how those responsible for the programme work with student completion. The programme should therefore describe its analysis of student completion of the programme and the drop-outs that occur. The programme must also describe the measures taken and the support provided, if necessary, to create the conditions for students to complete the education within the planned study time.

Assessment criterion Follow-up, measures and feedback

The content, design, implementation and examination of the programme are systematically monitored. The results of the follow-up are translated into quality development measures as necessary, and feedback is given to relevant stakeholders.

The programme works to ensure that the student completes the education within the planned study time.

Describe, analyse, and evaluate. Outline the strengths and challenges, as well as how these are addressed to ensure high quality in the programme. Illustrate with examples. The description should be between 1-3 pages, using font size 11 and single line spacing.

Please note that the assessment criterion has two parts, quality work and student completion, and both must be included in the programme's report.

Presentation of Quality Assurance of first and second cycle education at KI – central level

The quality assurance system for first and second cycle education at KI runs in annual cycles, with some components included each year while others are implemented at longer intervals. The system thus also allows for flexibility in question formulations, themes and priorities between years. Overall, the system's components for quality assurance routines, regulations, follow-ups, reviews, feedback and improvement, ensure continuous improvement of the education. In order to improve and develop the programmes, the education assignment at the departments is followed up annually. The feedback forms the basis for development and ensures that KI's educational activities are of high quality. The feedback consists of a number of questions within a strategic selection of the areas that the Committee for Higher Education identifies as important for the quality of education. The questions vary from year to year and over time new areas may be added. The purpose of the questions is to stimulate the quality development process locally and to provide KI's management with a basis for following up, developing and assuring KI's educational activities.

The reporting of the education assignment is supplemented by quality plans at department level and programme level according to established templates, which is a tool for quality development at each level.

In order to clarify what the committee responsible for the programme expects from the department responsible for the course in terms of implementation and quality development of courses, course assignments within programmes must be established. After each course occasion, the department responsible for the course must carry out a final course evaluation. Based on the results of the course evaluation, the course coordinator must carry out a course analysis.

Perceived quality – Recurring surveys

1. **A survey** is conducted every two years among students who are just starting their studies on one of KI's programmes
2. **Course evaluations** consists of five mandatory questions, which provides an opportunity to follow the quality development over time and make comparisons between different courses and programmes. It is also possible to add programme- and department-specific questions.
3. **Practical placement (VFU) survey**, measures student experience of the learning environment, supervision and work with patients (clients in clinical education) in health care.
4. **The student barometer** is conducted every four years through focus panel interviews. The aim is to provide strategic guidance to build student' engagement in studies and for KI.
5. **A graduate questionnaire (exit poll)** is sent to all programme students in connection with the completion of their education.
6. **Alumni survey** is conducted every four years among alumni who graduated three years earlier.
7. **Stakeholder survey**, conducted by the programmes every four years. The purpose is to investigate whether KI's educational programmes correspond to the needs of the labour market, i.e. whether recent graduates have developed useful skills.
8. **The "Equal Opportunities" survey** is planned to be carried out every four years from 2022, the aim is to measure student experience of risks of discrimination, harassment, sexual harassment, reprisals and victimisation in order to obtain a basis for following up and evaluating KI's work to prevent discrimination and work for an inclusive and good work environment for students.

Peer review and learning

1. In addition to our own analyses, peer review and learning is an important component of improvement and development work. Peer review and learning concerning quality plans is carried out every spring.

Programme description:

The order of courses has been determined based on knowledge required by students at each stage and therefore allows for knowledge progression in the ILOs of the most important knowledge areas. The implementation then integrates students' educational and professional experiences.

The number of courses and the content of each course has been limited to ensure that students can complete mandatory assignments and examinations within the allocated time. Students are provided with schedules before the start of each course to ensure that they can plan their time. Formative assessments are carried out before final assessment, so that any challenges that students might encounter can be addressed. An example of this is weekly meetings with the course leader in the biostatistics

courses, called “muddy moments”. Students self-evaluate and review the material from the previous week and identify topics/concepts/interpretations that they have had trouble understanding, which is then presented to the course leader and the material revisited. This is an excellent way to informally assess learning progression, both from the students’ and teacher’s perspective. Currently, we are also exploring how we can involve second-year or doctoral students in study groups and Q&A sessions. This has already been seen to be useful in the biostatistics courses, which many students find particularly challenging, where students in the second year have provided weekly “biostat booster” sessions organised in a Q&A format.

Student completion is strengthened by means of:

- Clear organization and communication channels between students, student representatives, course leaders and the programme director.
- Offering the support of a departmental student counsellor.
- Providing tailored solutions for students with special needs.
- Coordinating library support for study habits and techniques.
- Creating an environment of interaction between students. We do, however, believe that peer learning can be utilized to a greater extent.

In exit polls, the majority of students (91.3%) indicate that there is a clear common thread from learning outcomes to examination in the education; that the structure of the education encouraged independence in their learning (75%) and that they received guidance and support from teachers or supervisors in their learning (75%). A considerable (but smaller) proportion also indicate that the education was structured with clear progression (66.7%) and that a variety of teaching methods were used during the education in a way which encouraged students to be active in their learning (58.3%).

After completion of each course, students are given the opportunity to convey their experiences and views in an anonymized course evaluation in the form of an online survey, which consists of 5 mandatory KI questions, program specific questions and additional questions set by course leaders. The last question is open-ended and addresses suggestions for improvement. Based on the results of the course evaluation, other evaluations and feedback from students and teachers, as well as their own experiences and examination results, the course leaders are required to reflect on and analyse the course and submit a written course reflection. The course reflection is a critical assessment of the implementation of the course in terms of what worked well and less well in the set-up, administration, teaching activities, achieved learning outcomes etc. In discussion with the program director, the course leader then decides whether there is a need to revise the course syllabus. The formal decision is made by the UN-GPH. Changes are then presented and discussed in the program council, to ensure continued course alignment.

The course survey is an important quality assessment instrument. However, we struggle with the response rates. They are often high at the beginning of the programme, but drop to around 50% in the later courses. We have tried information campaigns, we have asked the students to reflect on why they do not reply, and we have requested that the course leader of the following course provides time for the students to fill out the course evaluation for the previous course, but with limited success. It is difficult to know why response rates are low. However, since course leaders use additional ways to gain feedback on their courses (such as mid-course evaluations), and student representatives also ask for feedback to share at UN-GPH

and program council meetings, we think this might make students less inclined to reply to the course survey. However, we do not want to stop these alternative modes of course evaluation. From the students, we have received feedback that the course survey questions are not highly relevant or specific to the courses. We therefore believe that there is a need to reduce the number of questions and revise them to be more specific to each course. Furthermore, we need to address questions about the progression in the programme. We will consider developing a set of in-depth questions after the last course of each semester, to gain more information about the alignment and progression between courses covering the same topics (e.g., the three epidemiological methods courses or the HPP-specific courses). We also welcome any initiative seeking to revise and reformulate the course survey questions.

In order to improve and develop the programme, the education is followed up on a regular basis (Återrapportering av utbildningsuppdraget). This takes the form of a report and a quality plan, which is an analysis of the feedback from students, course leader reflections and input from other stakeholders (e.g., supervisors, colleagues that have hired previous students). It is used to set an action plan for the coming year. The quality plan is handed over to UN-GPH, which summaries the educational work of the institution. The quality plan undergoes peer-review from teacher representatives and program directors. Examples of changes that have resulted from these assessments include the decision to revise the curriculum and to offer the HPP specialization; changing the statistical software offered to the students; creating a database for advertisement of potential master thesis projects and; creating a joint platform on Canvas for all Master's programmes to increase the visibility of extracurricular activities for the students (e.g., conferences, seminars, student jobs).

With the high number of applications to the programme, we are able to select from a very strong pool of applicants, both with regard to previous education and experience in the field. Furthermore, our students are highly motivated to complete their Master's degree, and the majority have the ambition to continue to PhD studies afterwards (to a somewhat larger extent among students in the Public Health Epidemiology specialization). This contributes to the high proportion of admitted students who complete their studies in the allocated time. In the Public Health Epidemiology track, of the 23 students admitted in 2020, 22 received their degree in the allocated time, and in the Health Promotion and Prevention track, 17 out of 24 did so. In order for the programme to break even financially, given the current budget, however, we will need to admit more students, and this might lead to a different composition of students, and hence potentially the level of student completion. We will monitor this carefully.

In terms of challenges, in light of the curriculum mapping, we have identified the need for further alignment across the program in the areas of Sustainable development (SDG) and Equal opportunities.

Since the implementation of the curriculum in 2019, we have identified some gaps that need be discussed and potentially revised in a future syllabus. We believe that there is a need for HPP students to also be offered the course in Systematic review and meta-analysis and perhaps both tracks require further knowledge and training in conducting qualitative studies. Both specialisations also need more training in the prioritization process (see local goal), with a focus on health systems.

Assessment panel's evaluation

Instruction

For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:

Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.

Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.

Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: *Meets/Meets to a large extent/Meets to some extent/Does not meet*.

Strengths:

- It seems that both KI, the department, and the specific program have a systematic way of continuously, and in dialogue with staff and students, particularly student representatives, evaluate the different courses and discuss potential drawbacks and improvements needed.
- Student completion is supported by several relevant means.

Areas for improvement:

- Related to Point 1.1 where limited time for teaching is discussed, we suggest reflecting on if and how the teachers can have the possibility to allocate enough time for developing the courses and their teaching according to the follow-up results.
- Low response rates to course evaluation surveys (and exit polls) seems to be a common problem for most (if not all) universities. It seems that you have tried to increase it by many different ways, and are considering revising and reformulating the course survey questions. Have you considered including questions that are specific to the two specializations (where applicable)? Potentially add an oral evaluation (brief evaluation workshop) in parallel to a mandatory session late in each course. Although it will not include all examinations of the course in question, it might contribute with a higher coverage of students.
- How the stakeholders are involved, apart from the stakeholder survey every four years, could be clarified.
- Further aspects to be considered in relation to supporting student completion: in the student interview, need for more individual feedback and need more time for reflection were raised. Consider if and how addressing these needs can be possible, even in the context of limited resources. The students also expressed that the education is very intensive and that they would be happy to study later in the spring/summer to have a short break around Christmas-New Year (also mentioned in 1.2).
- A proposal related to the content of the education: as suggested, offer HPP students the course in Systematic review and meta-analysis. It is also desirable that the course focuses on both qualitative and quantitative research (including policy research), if not already doing that. Knowledge

and skills in systematic reviews and meta-analyses are highly relevant in the working life, also for those with HPP education.

Evaluation: Overall, it is the evaluation that the programme meets the requirements of the assessment criterion. The justification for that evaluation is that there seems to be a good number of systematic monitoring systems in place, the monitoring results are conveyed to relevant stakeholders, and measures are taken to allow for completion of education in time.

3 Assessment area: Student perspective

3.1 Assessment criterion: Student perspective

The student perspective concerns the actual student influence in their education, both formally and informally. Formal influence means, amongst other things, student representation in various bodies and platforms. It is relevant how students participate in decision-making processes, including the preparation of issues related to the education, and what the information channels look like to reach out to students so that they can take an active role in the work of developing the education.

Student influence is also about individual influence, that which is more informal and that concerns the individual student, e.g. what the work looks like so that a student can take an active part in developing their education and their learning processes. The programme should describe a student's opportunities to participate in the quality work of the programme and in the development of the programme, as well as describe the information channels available to pick up and take student views into account.

Assessment criterion: Student perspective

The student is given the opportunity to take an active role in the work of developing the content and implementation of the education.

Presentation of the organisation of student influence at KI

The students are co-actors in the university's QA-activities and thus also have a shared responsibility in influencing and developing the education. In order for student influence to be realised, students are expected to take an active and committed role both as individuals and as a collective. A prerequisite for this is that the students' views, opinions and suggestions are asked for and met with respect. KI has a responsibility to facilitate and encourage the students' involvement in the development work.

KI's management meets regularly with the student unions for information exchange and consultation. At these meetings, it is discussed how student influence and collaboration with the student union works formally and in practice. In order to create a good study environment, it is required that the students' views on the education and the study environment are taken into account. The Academic Vice President for first and second cycle education meets regularly with representatives of the student unions for information exchange and consultation on these issues.

To ensure that student influence is realised at all levels, an agreement is reached annually between KI and the student unions on how student influence is to be secured in the bodies that deal with issues relating to education or the students' situation. The student unions are responsible for allocating places between the unions, conducting elections/appointing student representatives and that a gender equality perspective is taken into account. The student representatives who are appointed represent all students regardless of level of education, programme affiliation or union membership.

Programme description:

All of the departments that contribute to the programme promote active and committed student participation. Students have a co-responsibility in influencing and developing the education. The students are represented wherever and whenever decisions are taken or preparations are made that are important for the education or the students' situation. Students from the programme are represented in the programme council (1 from each specialisation and year, selected by the class), and the UN-GPH educational committee (1 from each track, appointed by the student union). All meetings involving students are held in English. Student representatives are reimbursed for their time and course leaders are informed that the student representatives can be excused from class to participate in meetings. At UN-GPH meetings, student representatives are allocated a fixed time slot in the agenda. We have experienced that the student representatives at both the UN-GPH and the programme council have a high participation rate and are actively involved in discussions. Student representatives are also welcome to meet with the programme director to discuss issues and suggest student driven activities (e.g., study visits, retreats with aim of discussing specific contemporary public health issues, journal and book clubs).

Students are also able to exert influence through course evaluations. The course reflections based on the results of each course evaluation (see above) are made available to students on the course website, as are any decisions or actions that are consequently taken. The course leaders are also required to present any implemented changes to students in the next cohort, motivating why these changes have been made. In addition to course evaluations, additional evaluations are carried out (degree questionnaire, exit poll, alumni questionnaire) to gather students' experiences and views on the education with a view to implementing further improvements.

GPH promotes an “open environment”, whereby students are encouraged to approach course leaders with questions and concerns. In response to the Exit Poll question “What do you think was the best part of your study period at KI?”, students have expressed that they are happy with the accessibility of the course leaders, and that they are friendly and helpful. This is indicative of a psychologically safe learning environment.

*“From the MSc program to course leaders, they are serious, sincere, hardworking, welcoming, reliable about their work (teaching and other logistics/management).”
- 2023*

“The overall environment is very pleasant and friendly, this includes both inter-class and with KI faculty.” -2021

“The opportunities to engage with course leaders and the department.” - 2021

The department publishes a student newsletter on a regular basis, which includes departmental information and invitations. This newsletter provides a further platform

for students to share information e.g., about student driven activities (such as “Movement snacks”) and discussion points (journal clubs).

Assessment panel's evaluation

Instruction

For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:

Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.

Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.

Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: *Meets/Meets to a large extent/Meets to some extent/Does not meet*.

Strengths:

- Several relevant systems and policies are in place to support student engagement in the development of the content and implementation of the education.
- It is an important strength that students from each specialization and year are represented in the programme council, and that they are selected by the class (and that the UN-GPH educational committee also has one student representative from each specialization).

Areas for improvement:

- Looking at the exit polls, the mean values for questions ‘07’ (received information on my opportunities to influence the programme’s courses) and ‘08’ (encouraged by the teachers to participate in the development of the courses in the programme) have decreased somewhat over the years (from 5.5 in VT2020 to 4.7 in VT2023, and from 5.2 to 4.3, respectively. The latest values are still good and not sticking out in any way when compared to other programs, but further monitoring is important and it may be worth reflecting on if any actions can/should be taken. An experience of one of the committee members is that students may feel that their participation only benefits the next cohorts; it might be worth considering if anything should/can be done in this respect?

Evaluation: Overall, it is the evaluation that the programme meets the requirements of the assessment criterion. The justification for that evaluation is that several relevant systems and policies are in place to support the student perspective. We acknowledge that low response rates to course evaluations are a joint problem at all universities, and we encourage further work to find ways to increase the response rate. In the meanwhile, we recommend being careful in how to interpret data from surveys with low participation.

4 Assessment area: Working life and collaboration

4.1 Assessment criterion Working life and collaboration

Working life and collaboration concerns whether the education is useful in the labour market and in what way the education prepares the student for a changing working life. This means that after graduation, a student should be able to use the knowledge and skills that the student has gained through their education and develop them throughout their professional life and in different work contexts. This requires that the student acquires both subject-specific knowledge and general skills and abilities during the education. Within this assessment area, the programme shall describe the way in which the education is updated and adapted to working life, and in what way information is obtained that is relevant to the quality assurance and development of the education regarding the education's usability and preparation for working life. The programme should also describe how collaboration with the surrounding society takes place in order to ensure high quality in the education. This assessment area also includes how the programme works to utilise alumni's experiences in the development of the programme.

Assessment criterion Working life and collaboration

The programme is designed and implemented in such a way that it is useful and develops the student's preparedness to meet changes in working life. Relevant collaboration takes place with the surrounding community.

Programme description:

Students receive a comprehensive knowledge- and skills-based public health sciences education, which prepares them for a career as a researcher or public health expert in a variety of domestic and international organizations or NGOs: Epidemiologist, biostatistician, public policy analyst, public health adviser, health director, health educator etc. In addition to acquiring the theoretical and methodological foundations in public health sciences and insight into evolving public health challenges, students are also equipped with a generic skillset sought after by employers including:

- Project management and teamwork
- Communication skills: Discussing and presenting viewpoints, debating strengths and limitations, presentation of scientific findings (writing articles for scientific journals/ popular science/ oral presentation)
- Time management
- Self-learning and independence
- Interprofessional collaboration

In the most recent exit poll, in response to the question about whether they feel well-prepared to work within the area they have studied at KI. 75% of the students strongly agree that they do (5-6 on a scale of 1-6). This has increased considerably over the past couple of years (54.6% in 2021 and 64% in 2022).

Preparation for further research

At least 1/3 of the students continue within academia after graduation, some as research assistants, but the majority as PhD students at KI. Students also become PhD students at other universities, both in Sweden and internationally. We are continuously working towards ensuring that students are informed about and well-prepared for doctoral studies. Students have close contact with doctoral students at

the department, who are involved in the programme through teaching and co-supervision. In response to student demand, we are looking into organizing departmental seminars which set out the path to becoming a PhD (or research assistant as a first step), run by PhD students. Graduates of the programme already fulfill some of the methodology course requirements of the PhD programme in Epidemiology at KI. However, we are currently planning on organizing workshops with thesis supervisors to identify any gaps in the knowledge and skills necessary to continue the academic journey.

Preparation for public health practice

Through the programme, students are exposed to different areas of public health practice. Some of the faculty concomitantly work for organisations such as the Swedish Public Health Agency and the Center for Epidemiology and Community Medicine in Region Stockholm. The programme also collaborates with external public health organisations in a variety of ways. Guest lecturers are regularly invited (i.e. from the Swedish Medical Products Agency, the quit smoking helpline “Sluta-röka-linjen” at Region Stockholm and the Swedish Public Health Agency). Furthermore, study visits (e.g. to ECDC, CES Sluta-röka-linjen) give students an insight into how public health is practiced and generate ideas about potential career paths (such as internships).

Tapping into the labour market

The programme has previously administered a survey in which potential employers in Sweden were asked about their employment positions for public health expertise. This information is outdated in light of the new curriculum implemented in 2019, and we now need to find a way to comprehensively map public health employers in Sweden and the skills that they require of their future employees, particularly regarding early career pathways. We also need to acquire more insight into the international labour market. We would like to involve our students, as they are experts on their “home country” labor markets. This could potentially be carried out as a student driven activity, by means of setting an assignment for students to map the public health sector landscape of their countries and sharing these with their peers.

KI organizes career events, such as careers fairs. However, feedback from our students suggests that the participating organisations are not relevant for those hoping to work for public health focused organisations (since fairs tend to include medtech/pharmaceutical companies and market research consultancies). That public health agency jobs are in demand translates into these not having to market themselves in the same way. Therefore, we are looking into strengthening existing partnerships, initially through existing faculty collaborations, to provide alternate routes into that particular labour market (such as internship opportunities). Students have also enquired about working with public health organisations in connection with their thesis project, as a potential way of gaining experience and building networks, and we will be looking into ways of putting this into practice (finding appropriate external co-supervisors and formulating guidance on how internal and external supervisors can work together in helping the student achieve the required learning outcomes).

Tapping into alumnae

In 2021, KI alumnae were sent a survey with questions about their professional experiences post-graduation. In relation to the skills required by their employers, the general response was that the education had imparted less than necessary in all

aspects except research. However, the response rate was low for the Master's Programme in Public Health Sciences and no firm conclusions could be drawn.

As previously mentioned, GPH publishes a regular newsletter for students of its global master programmes. Each edition of this newsletter includes an alumnus profile. We have also organized events at which previous students talk to the current students about their experiences since graduation. However, we need to further tap into the benefits of closer contacts with our graduates. In particular, there is a need to map the early careers of programme graduates, to gain a better understanding of the career pathways and opportunities that can be taken and identify any gaps between learning outcomes and labour market demands. The programme has itself tried to stay in touch with its graduates, but this has been a challenge, since 95% are international students. Through our networks at authorities and other universities, we have partial information about our graduates who remain in Sweden. Therefore, we are looking into strengthening existing partnerships, initially through existing faculty collaborations, to provide alternate routes into that particular labour market (such as internship opportunities). Students have also enquired about working with public health organisations in connection with their thesis project, as a potential way of gaining experience and building networks, and we will be looking into ways of putting this into practice (finding appropriate external co-supervisors and formulating guidance on how internal and external supervisors can work together in helping the student achieve the required learning outcomes).

Assessment panel's evaluation

Instruction
<p>For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:</p> <p>Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.</p> <p>Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.</p> <p>Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: <i>Meets/Meets to a large extent/Meets to some extent/Does not meet</i>. The following wording below can be used:</p>
<p>Strengths:</p> <ul style="list-style-type: none"> ● Students receive a comprehensive knowledge and skills-based public health sciences education. The students are exposed to different areas of public health practice during the programme, e.g., some of the faculty work for organizations outside KI and guest lecturers are regularly invited and study visits are provided. ● There seems to be a strong connection with ongoing collaboration with research at KI and many students continue within academia after graduation.

Areas for improvement:

- We agree with the analysis made in the self-evaluation that strengthening contacts with the labor market, both Swedish and international employers, should be considered. This was also confirmed during the student interview.
- We support suggestions for improvement such as mapping the early careers of programme graduates, to gain a better understanding of the career pathways and opportunities that can be taken and identify any gaps between learning outcomes and labor market demands.
- We also support suggestions such as strengthening existing faculty collaborations, exploring internship opportunities and working with public health organizations in connection with the degree project (thesis).
- Although the alumni poll had a low response rate, we find it advisable to dig deeper into if the program has a skewness between how it prepares for research and other public health practice.
- Additional aspects to consider are how to include practice-relevant elements in all courses. Alumni contacts could also be improved e.g. through searches on LinkedIn and starting up a LinkedIn Alumni group.
- Overall, the measures need to be continuous. And there is also a need to follow up so that measures taken ensure that the students can also meet preparedness to meet changes in working life.

Evaluation: Overall, it is the evaluation that the programme meets to a large extent the requirements of the assessment criterion. The justification for that evaluation is that the students receive a comprehensive knowledge- and skills-based public health sciences education and are exposed to different areas of public health practice during the programme. Students seem well prepared for a career within academia as up to a third of the students continue in research. However, increasing collaboration with the labor market, both Swedish and international employers, should be considered. The measures need to be continuous. And there is also a need to follow up so that measures taken ensure that the students can also meet preparedness to meet changes in working life. It is also advisable to consider if the program has a skewness between how it prepares for research and other public health practice.

4.2 Assessment criterion Internationalisation

According to Chapter 1 § 5 of the Higher Education Act, the overall international activities at each university shall contribute to strengthening the quality of education and research, as well as promoting sustainable development both nationally and globally in the areas of higher education. The challenges of the future are global and must be solved in collaboration across national borders. Working in healthcare, in business or in academia requires intercultural competences. KI therefore has a responsibility to prepare all students for global citizenship, i.e. a global social responsibility and an ability and willingness to contribute. This requires a well-integrated education in global health and training in intercultural competences.

Internationalisation at home (IaH), which involves integrating intercultural and global perspectives into education, provides good conditions for sustainable and integrated internationalisation that reaches everyone. This can be done, for example, by utilising and sharing the experiences of students and teaching staff from different international contexts. The environment at KI is international and this in itself can be used as a resource. The rapid development of digitalisation offers great opportunities for international teaching without physical travel, for example through guest lectures digitally or group work online with students from partner universities. However, mobility remains an important part of internationalisation and programmes should actively create opportunities for this. Teaching in English provides an opportunity to receive and integrate exchange students and local students, but above all it strengthens students in their profession, prepares them for research, a global job market and a professional life in a multicultural society.

Assessment criterion: Internationalisation

The programme is designed and implemented in such a way that it develops the student's intercultural competence and the student's readiness to work in a global labour market.

Programme description:

GPH, in which the programme, is nested, is an innately international environment. Staff comprises employees and affiliates from and with research experience in a wide variety of countries and contexts. Research groups are engaged in wide international research collaborations, societies, networks and conferences. Current PhD students represent a multitude of countries with research being undertaken in collaboration with numerous universities globally. Furthermore, the Master's programme attracts a diversity of students from different countries as well as educational backgrounds. In the current cohort, students have bachelor's degrees from 21 different countries in six continents: Africa (2), Asia (13), Australia (2) Europe (13), North America (7) and South America (2). Karolinska Institutet offers a handful of tuition fee scholarships to excellent students who have been admitted to one of its Global Master's Programmes starting each Autumn semester. Normally around 10 scholarships are awarded per year, spread across all the Global Master's Programmes. Scholarship opportunities make it possible for students with lesser means from around the world to pursue their education at KI. Applicants from low-income countries, also have the option to apply for scholarships from the Swedish Institute.

The high level of internationalization of the programme is beneficial, not only for students, but also for teachers. Teaching and learning is multi-directional, with students learning from teachers, teachers learning from students and students learning from each other through discussions, presentations and group work. Furthermore, the diversity of the group provides students with the opportunity to build an international network, which they can benefit from in their future careers.

The courses in the programme are pervaded by an international perspective that develops the students' understanding of and reflection around public health problems and strategies for preventive actions in different contexts with different health-related challenges. Furthermore, learning activities are integrated into the courses that promote the readiness of students to work in a global labour market. Examples include:

- Theories and Methods for implementation and Evaluation: Lecture “Experience from working with implementation/health promotion in practice and globally”.
- Applied Health Promotion and Prevention: Health promotion and disease prevention at UNFPA and life as a public health professional.
- Epidemiological methods for studying determinants of health: During the course, epidemiological research questions and studies are actively collected from a wide range of global settings to shed light on diverse health settings and challenges.
- The master’s thesis project also promotes internationalization since it can be carried out in any country or context and allows students to be involved in the data collection process.

In exit polls, students have consistently described feeling prepared to cooperate in diverse cultural environments (91.7% in 2023). However, we continue to explore new ways of promoting internationalization in the programme content. For example, we are currently considering a suggestion to integrate an internationalization perspective in an ethics lecture concerning public health research projects in the Collecting and organizing epidemiological data course. After the covid pandemic, we have seen fewer students going abroad in connection with their degree project (for the purposes of data collection). We strive to increase this by expanding the network of potential supervisors and tapping into alumnae with PhDs.

In terms of programme structure, all teaching is in English, with language support provided to students where needed. Online teaching allows for more lectures to be held by teachers from institutions outside Sweden, who contribute with valuable insights and experiences of carrying out public health work in other contexts, thereby imparting important knowledge to the students, preparing them for work in a global context.

Teachers are encouraged to take pedagogic courses to strengthen their ability to promote internationalisation:

- Teaching in the Glocal University is an introduction to the main issues surrounding teaching and learning at an international university. Having completed the course, participants are expected, among other things, to be able to: Define the concept of internationalisation of education at university and its impact on teaching and learning, reflecting upon the specific context of KI; Revise own course materials and teaching practices in order to use their students as resources from an intercultural perspective.
- Two2Tango, tandems for teaching in the glocal classroom is a course intended for teachers who wish to develop their teaching skills and their intercultural awareness for teaching the international classroom in English.

GPH is a member of the Nordic Network on Global Health, which was initiated in 2017, and currently includes 12 universities from 5 Nordic countries. Although the network is oriented towards the Master’s Programme in Global Health at the department, its collaborative activities, including the organization of seminars, also benefit our students. The network is currently building on its experiences, with the aim of ensuring that the next generation of health professionals is well prepared to successfully tackle global health challenges in an increasingly evolving global setting with significant health inequities.

Assessment panel's evaluation

Instruction

For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:

Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.

Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.

Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: Meets/Meets to a large extent/Meets to some extent/Does not meet.

Strengths:

- The program is truly international in several dimensions, particularly the background of the staff and the students. The teaching is also multi-directional, teachers learning from students and students learning from teaching. The student interviews also confirm that the students feel that they have many possibilities to interact with other students, teachers and others from different countries and cultures. Thus, taking use of the students' diverse backgrounds in teaching is a great resource.
- The diversity of the group provides students with the opportunity to build an international network, which they can benefit from in their future careers.
- The courses in the programme also have an international perspective and some learning activities are integrated into the courses that might promote the readiness of students to work in a global labor market. The teachers are also encouraged to take courses that strengthen their ability to promote internationalization.
- Language support is provided when needed.
- In exit polls, students have also consistently described feeling prepared to cooperate in diverse cultural environments (91.7% in 2023).

Areas for improvement:

- We support the suggestions to provide new ways to promote internationalization in the programme content, both in the courses and to provide better opportunities for students going abroad for their degree project e.g by expanding the network of potential supervisors from different countries and strengthening the collaboration with alumni in different countries and settings globally.
- It might be a good idea to include more examples in the teaching from settings beyond the immediate surroundings in Stockholm. Students and/or alumni could contribute in this matter (also see 1.2. Learning environment).

Evaluation: Overall, it is the evaluation that the programme meets the requirements of the assessment criterion. The justification for that evaluation is that

the program is truly international in several dimensions considering the background of the staff and the students as well as the courses themselves. This is confirmed by the student interviews. Taking use of the students' diverse backgrounds is a strength but also a place for improvement. The self-evaluation mentions several promising suggestions on how to improve the education in such a way that it develops the student's intercultural competence and also the student's readiness to work in a global labor market.

4.3 Assessment criterion: Interprofessional competence

Interprofessional competence is part of the generic competence that is necessary for employees, not only in current and future health and medical care, but also in other areas of employment relevant to KI's education. KI's vision is that the education is designed and implemented in such a way that the student, after completing the education, has the best possible conditions to work within and continuously develop an activity in close collaboration with other professions and disciplines. Intended learning outcomes and educational activities to achieve interprofessional knowledge, competence and approach must therefore be included and assessed within KI's programmes at first and second cycle.

Interprofessional competencies include: Communication, collaboration, teamwork, roles and responsibilities, conflict resolution, patient safety and patient/client centeredness.

Assessment criterion: Interprofessional competence

The programme is designed and carried out in such a way that it develops the student's competence to work within and continuously develop an activity in close collaboration with other professions and disciplines.

Programme description:

The programme focuses on an interdisciplinary understanding of complex issues in Public Health and is taught by teachers from a variety of disciplinary backgrounds including medicine, statistics, public health, epidemiology, economics, sociology, psychology, and anthropology. Students gain insight into the contribution and value of different perspectives. The student group is comprised of individuals with diverse educational and professional backgrounds. The academic backgrounds of students of the current cohort include: Public health/preventive medicine/nutrition; medical and caring sciences (medicine, nursing, pharmacy, dentistry, physiotherapy), natural sciences/engineering (neuroscience, bioengineering), and social sciences (social studies/work, psychology, anthropology, law, economics politics, business). This lends to an environment which is conducive to promoting interprofessional collaboration through classroom discussions and group work.

There are a number of course learning outcomes that specifically address interprofessional knowledge, skills and approaches. For example, in Qualitative methods, students learn how to make informed decisions about *which types of research questions are best answered using qualitative methods* and how to *contrast qualitative and quantitative approaches and understand when these are best used*; and in Project management, students *describe and apply interprofessional learning*.

In the most recent exit poll, the great majority (96%) of students (5-6 on a scale from 1-6) described feeling prepared to cooperate in interprofessional teams, a very considerable increase from previous years (76.2% in 2021 and 69.3% in 2022).

In most cases, the interdisciplinary connections in the programme structure work well to create a cohesive whole. However, there are some areas in which this needs strengthening. For example, students in public health epidemiology have had a tendency to value the contribution of quantitative methods more than that of qualitative and participatory methods. With the evolution of these applications in the research landscape, we are actively looking into how they can be better incorporated into the programme as a whole. This could potentially be done by incorporating a case study that runs across all courses, which helps students to visualize the importance of qualitative methods in public health reporting and implementation.

Since interprofessional collaboration is an innate attribute of public health sciences, there may have been a tendency to consider it unnecessary to systematically formulate ILOs throughout the courses. We will organise a faculty workshop to discuss KI's IPL guide in order to see if we find gaps that might need filling.

Assessment panel's evaluation

Instruction
<p>For each assessment criterion, the assessment panel should describe their evaluation under the following three headings below:</p> <p>Under the heading Strengths: The assessment panel should highlight the programme's strengths within the assessment criterion and briefly describe them, preferably in bullet points.</p> <p>Under the heading Areas for improvement: The assessment panel should identify areas that are assessed to need improvement and briefly describe them, preferably in bullet points.</p> <p>Under the heading Evaluation: The assessment panel should explain their assessment and motivate their conclusion. The evaluation should be specified in one of four levels of fulfilment: <i>Meets/Meets to a large extent/Meets to some extent/Does not meet</i>.</p>
<p>Strengths:</p> <ul style="list-style-type: none"> ● The programme is inherently interprofessional, both regarding staff and students. In the most recent exit poll, the great majority (96%) of students (5-6 on a scale from 1-6) described feeling prepared to cooperate in interprofessional teams. ● The staff represent several different educational backgrounds. Although the focus is on medical disciplines and statistics, staff with a background in social sciences are also represented. <p>Areas for improvement:</p> <ul style="list-style-type: none"> ● The self-evaluation mentions the challenge with e.g. epi-students not valuing qualitative methodology. We support the suggestions to actively look into how qualitative perspectives and methods could be incorporated into the programme as a whole.

- Could be more learning activities outside the health silos, e.g. not only the ministry of health, but also the ministry of agriculture, city planning, economics etc. to promote interprofessional competence, complex system thinking and a thorough health in all policies perspective.
- The programme could also consider the possibility of joint teaching sessions when relevant with other international master programmes at KI, e.g., biomedicine, innovation, toxicology, health economics.

Evaluation: Overall, it is the evaluation that the programme meets the requirements of the assessment criterion. The justification for that evaluation is that the programme is inherently interprofessional, both regarding staff and students. The great majority of students describe feeling prepared to cooperate in interprofessional teams. A few measures could be done to promote interprofessional competence, complex system thinking and a thorough health in all policies perspective.

Other aspects

The programme can describe areas that are relevant to highlight but are not included in any of the assessment criterion, such as other generic competencies and forward-looking development work to increase the quality of the programme. Scope 1-3 pages with font size 11 points and single line spacing.

Programme description of other aspects:

No other aspects described to assess.

The assessment panel's reflection

Under the heading *Reflection*, the assessment panel shall present the assessment panel's reflections on the programme's description of other aspects.

Summary of the assessment panel

Instruction

The assessment panel's summary should begin with a reflection on the conditions provided by the self-evaluation to assess the quality of the programme, i.e. whether the self-evaluation was easy to read, well-structured, provided answers to the questions asked and followed the instructions. The summary should also briefly summarize the program's key strengths and areas for improvement. The assessment panel can also add other points of view that the assessment panel wishes to present.

Conditions provided by the self-evaluation to assess the quality of the programme: the self-evaluation was mostly easy to read, well-structured, provided answers to the questions asked, and followed the instructions. In some parts, the self-evaluation could have been clearer about if and/or how a described item works in practice. However, the self-evaluation also demonstrates self-criticism and suggestions for how to improve. The differences between the two strands sometimes make it difficult to assess the program as a whole. Generalizing assessments means that the accuracy of the evaluation for each strand may be limited. Therefore, we have chosen in some places to give specific evaluations for each strand. We suggest that it may be worth considering evaluating the strands separately in the future.

Overall, the evaluation committee finds that the program's content, learning environment, and structure are of high quality, and students appear to be satisfied. However, even in a high-quality program, there is always room for improvement. The committee hopes that the program leaders and staff view our suggestions as constructive feedback aimed at further enhancing the quality of the program. Our evaluation and suggestions for improvement are based on the extensive information available to us. However, we recognize that this material might not cover everything and that the students' classroom experiences may not always be fully captured in course plans and other documentation. Below is a summary of key strengths and areas for improvements.

Key strengths:

- The strong connection between teaching and ongoing research at KI is a significant advantage.
- A notable strength is that the program is truly international in several dimensions.
- The program has two strands where one is very strong in epidemiological methods, while the other one has an evident strength in competencies related to public health practice.
- Student-centered and activating teaching according to KI's policy with support when needed.

Key areas for improvement:

- For the Epidemiology strand, we recommend that the program develop ILOs related to Judgement and Approach for courses where they are currently missing. Additionally, we suggest that the ILOs adopt a more comprehensive approach to critical perspectives relevant to public health under Judgement and Approach.
- For the Epidemiology strand, we also recommend that the ILOs related to the Local outcome selected for the evaluation are expanded to better include public health practice, such as prioritisation, planning and implementation of preventive strategies.
- For the whole programme, we recommend carefully reflecting on if and how the (experienced) balance between teaching (including taking courses in pedagogics, innovating, planning and implementing teaching) vs. research can be improved, without sacrificing quality or work environment.
- For the whole programme, we recommend extending collaboration with the labour market, both Swedish and international employers, and contacts with alumni.

In the assessment above, we also make suggestions regarding the other assessment criteria.

An additional point that was not raised in the self-evaluation materials, but clearly raised in the student interview is that, from the student perspective, the education is very intensive. The students expressed that they would be happy to study later in the spring/summer to have a short break around Christmas-New Year (mentioned in 1.2. in relation to Learning environment and in 2.4. in relation to study completion).