

NORWEGIAN INSTITUTE OF PUBLIC HEALTH

strategy

2011–2013



Norwegian Institute of Public Health

Norwegian Institute of Public Health

The Norwegian Institute of Public Health (NIPH) will be a national competence institution for governmental authorities, the health service, the judiciary, prosecuting authorities, politicians, the mass media and the general public on issues related to forensic toxicology, physical and mental health, prevention of communicable diseases and prevention of harmful environmental influences. The NIPH will be a driving force in improving the population's health and quality of life and preventing illness and injury. The NIPH will also assist the prosecuting authorities and the judiciary in resolving criminal and civil cases. The institute is placed directly under the Ministry of Health and Care Services, alongside the Norwegian Directorate of Health, the Norwegian Board of Health Supervision and the Norwegian Medicines Agency.

The vision is **a healthier population**. The aim is to prevent disease.

The main goals are to:

- be prepared for acute health threats
- advise and provide services that improve public health
- have an overview of the health of the population and factors influencing public health
- gain knowledge of what causes common diseases and what gives people better health

The NIPH bases its advice and services on research and health surveillance. The work is based on these core values; *professionally sound, reliable, innovative, open and respectful*.

The NIPH's work process

The institute elucidates, researches, provides research-based advice and disseminates knowledge about how society can create good and healthy living conditions, how the authorities and the health service can prevent illness and damage to health, and how individuals can take care of their own health. In addition, the institute assists prosecutors and the courts with expert analysis and interpretation.

The NIPH is primarily a knowledge and competence institution. As a non-regulatory public institution, the NIPH must achieve its goals by assisting other institutions that are responsible for operational activity. Since a large part of prevention efforts take part in other sectors than health, the institute works closely with governmental and competence institutions both within and outside the health sector.

Research at the NIPH aims to find causes of diseases and to develop effective measures against them. However, present and future public health challenges cannot be resolved by one country alone. Therefore, the institute is working closely with leading research and specialist environments in other countries, key international organisations such as the World Health Organisation and the EU institutions within infectious disease control, chemical management, pharmaceutical drug approval, public health and food safety.

The institute aims to ensure that everyone in Norway can achieve good health, regardless of factors such as gender, age, country of origin, place of residence, occupation and education. Therefore, the institute has a general aim to contribute to reducing inequalities in health. For the same reasons, the institute wants to help reduce global inequalities in health by working with low-income countries to develop better systems to solve their health problems.





Special ambitions and actions

Over the next three years, the institute will carry out the following specific measures to achieve its main goals:

Goal 1: Preparedness for acute health threats

Action:

Strengthen the emergency preparedness function so that the NIPH is able to provide assistance and advice much faster than today; concerning outbreak of communicable diseases, possible health hazards caused by chemical spills or drug consumption, clusters of non-communicable diseases, urgent tasks for the police and judiciary and events that can cause mental health damage. The goal is that the institute will become an effective emergency response organisation for all of its areas of responsibility.

Goal 2: Advice and services that improve public health

Action:

Improve advisory and two-way communication so that decision-makers, health personnel, the judiciary, the police, the media and researchers can benefit more from the NIPH's expertise, services and products. The institute will also help the public gain more direct benefit from its work by giving an individual access to their own health data stored in the institute's records, and by making the information understandable to all. The goal is that the NIPH will be the information channel and discussion partner of choice for all the institute's user groups when they need information about public health or other areas that the institute has expertise in.

Develop health profiles for municipalities, counties and regions so that the institute can assist health authorities and municipalities and counties in the work required by the new Public Health Act. The goal is to ensure that the municipalities and counties can obtain an overview of all the issues that affect public health in their area - such as infectious agents, pollutants in air, soil, water and food, physical activity, diet, smoking, drugs and psychosocial factors - and thus make it possible to implement effective prevention measures locally.





Goal 3: Summary of the population's health and contributory factors

Action:

Modernise the health registries so that all the institute's national health registries will be continuously updated with high quality data. The aim is that during this period the registries will become an indispensable resource for those working to manage and ensure the quality of health care, for those who conduct research, and for those engaged in health monitoring at national and municipal levels.

Improve the methods for collecting health data to provide a more certain and detailed picture. One aim is to ensure higher participation rate in health studies than in recent years - the second is to expand the data foundation to provide a better picture of both mental and physical health conditions.

Goal 4: Knowledge of what causes common diseases and what gives people better health

Action:

Building strong support functions for biobanks and health data so that Norwegian and international researchers can take full advantage of the valuable material managed by the NIPH. The goal is that research based on the institute's biobanks and health registries will give the world answers to important public health issues. To achieve this, the institute wants to strengthen research on the interaction between genes and the environment and become a world leader in the field of biobanks / health data.

Strengthen the NIPH's own research on selected public health problems such as diabetes, heart disease, Alzheimer's disease, substance abuse, anxiety and depression. In addition, the institute wishes to strengthen research on topical issues. Otherwise, the institute aims to be an international leader in high-priority fields, and to conduct research into important common diseases and health problems in Norway at a high international level.

Strengthen research that can answer how effective and profitable various preventive measures are, how big the health burden of different diseases poses to those affected, and the consequences of illness and impaired health for the community. To achieve this, the institute wishes to acquire expertise in so-called burden of disease analysis. The goal is to provide health policymakers with a better basis to prioritise between different health and prevention measures.

General measures for all goals

Action:

Develop quality assurance and enhance personal data protection

so our users and the public will have services of even higher quality, and that personal data are even better protected throughout the institute. All users will have even greater assurance that errors will not arise in the institute's work processes. The goal is that personal data protection is of world-class quality, and that the institute will continually improve the quality of its services.

Optimal use of resources so that society will gain even more benefit from the funds spent on public health work. The aim is that the institute, through better organisation, rationalisation and improved efficiency, will be among the most resource-efficient in the governmental institutions. One of the measures will be to develop its own IT strategy and focus on the targeted use of IT to improve the population's health status - so-called e-health.

Expand collaboration with other partners in the government so that the NIPH can take maximum advantage of the benefits from better co-ordination across responsibility and work areas. The goal is that the institute will have good alliances with all relevant partners nationally and internationally, and that it will be a desirable collaboration partner for others.

Maintain recruitment and leadership development so that the NIPH has good managers and skilled personnel at all times. The goal is to cover the skills and managerial needs that the NIPH will have through a future-oriented personnel and recruitment policy.





General ambitions

The challenges in public health are still large. Therefore, the NIPH is planning for continued growth.

In recent years the NIPH has had a steady growth in grants from research councils in Norway and abroad. This increase will probably continue for several more years because the institute has established valuable sources of data and good research methods.

The NIPH's overall ambition is to continue at the same level or strengthen the work that needs to be performed. This includes advice, laboratory-based services and other services provided by the NIPH.

The goals are to:

- Be the best advisory body in the country within the NIPH's area of responsibility
- Offer services that are among the best in the public service
- Provide laboratory functions that meet the quality requirements for Norwegian accreditation or equivalent standards
- Provide forensic toxicological analyses and interpretations that contribute to high legal protection

In order to maintain such a high level on all the tasks that the NIPH will continue to do, it will be necessary to identify tasks that the institute does not need to do - or that others can perform better. In the coming three-year period, the NIPH will therefore place great emphasis on identifying activities that can be discontinued, scaled-down or transferred to other institutions.

In the coming three years, the NIPH will focus its efforts on the public health problems that are expected to have the greatest importance for the population during the next decade.

Common diseases

Cardiovascular diseases will remain the major cause of morbidity and mortality in the population even though most of the deaths will occur in old age. More knowledge is needed about why some people get these diseases, while others remain healthy. The NIPH will establish a national registry of cardiovascular disease to monitor progress and measure the effectiveness of different treatment and prevention measures.

Cancer is the second most common cause of death in Norway. In future there will be more cancer cases; the population is ageing and the incidence of most cancers increases with age, and also because the incidence of certain cancers is increasing, regardless of age. The NIPH will strengthen collaboration with the Cancer Registry and conduct research to identify factors associated with lifestyle and environment that increase or reduce the risk of cancer.

Anxiety and depression are among the country's biggest public health challenges and cause the most loss of healthy years of life in the population in the western world. The NIPH will strengthen research to learn more about how widespread these disorders are, their impact and what can be done to prevent them. The NIPH will also determine the economic impact of mental illness and continue research on the burden to the families.

Alzheimer's disease, dementia and other diseases associated with the breakdown of neural tissue, such as Parkinson's disease and ALS (amyotrophic lateral sclerosis), will increase sharply in coming years as the population ages. These diseases will pose a great personal and societal burden. The NIPH wants to find out what causes these diseases.

Diabetes is one of the major diseases in the Western world. Type 2 diabetes incidence is increasing, probably due to changes in lifestyle. The incidence of type 1 diabetes is inexplicably higher in Norway than in most other countries. The NIPH wants to find out more about the causes.

Chronic lung diseases such as COPD (chronic obstructive pulmonary disease) and asthma constitute a growing health problem, partly because of the delayed effects of tobacco smoking and partly because of circumstances we are uncertain of. The institute will look for the causes of why disease incidence is increasing.

Infectious diseases are still a major threat to public health. Although the burden of these diseases is low in Norway, the incidence of imported diseases and antibiotic-resistant microbes is increasing. The favourable low level in Norway is due to the comprehensive prevention efforts that have been adopted in recent decades. The NIPH will continue these efforts and develop even more effective methods to detect and stop outbreaks of infectious diseases.

Osteoporosis and musculoskeletal disorders are a major cause of disability. Norway has the world's highest incidence of osteoporosis as measured by hip fractures. The NIPH aims to determine the cause of this.





Important risk factors

Obesity and physical inactivity seem to be the next decade's biggest health challenges. Obesity and physical inactivity increase the risk of several diseases such as diabetes, cardiovascular disease, cancer and stress disorders. The NIPH will monitor developments and look for better ways to prevent conditions caused by obesity and inactivity.

Tobacco smoking is still a major cause of cardiovascular disease, lung disease and cancer. The NIPH will strengthen its advisory expertise in the area.

Substance abuse is a major cause of death and disability and reduced quality of life. Substance abuse often occurs concurrently with mental health problems, and this is becoming a public health problem that affects the relatives and friends of those with such problems. Driving under the influence is a major cause of traffic accidents, deaths and injuries in traffic. The NIPH will strengthen drug research and look for new ways to prevent and treat health problems and psychological distress caused by intoxicants.

Harmful substances in air, water, food and consumer products can trigger illness and injury in humans. Such environmental factors are important for cardiovascular disease, chronic lung diseases, cancer and diabetes. The NIPH will intensify efforts to find out how particulate matter, radiation, diet, physical activity and other environmental factors affect health, and what steps local authorities should take.

Other major health challenges

Chronic pain affects about 30 per cent of Norwegian adults and is a major cause of sick leave, disability, drug addiction and impaired mental health. The incidence of chronic pain is higher in Norway than in most other European countries. The NIPH will strengthen research to gain more knowledge about what can be done to prevent such conditions.

Eating disorders in the form of anorexia, bulimia, binge-eating and eating disorders not otherwise specified (EDNOS) affect 5 – 10 per cent of the population at some time in their lives. The institute will monitor developments, strengthen research into disease mechanisms and continue to collaborate nationally and internationally.

Behavioural disorders, ADHD, language and learning difficulties and autism spectrum disorders are important groups of diseases among children and adolescents. The NIPH will provide more knowledge about the factors that increase risk, which factors reduce the risk and the disease mechanisms that are involved. The NIPH will also examine the impact of centre-based childcare on child development and will advise on effective measures early in life.

Health in pregnancy, at birth and in infancy is fundamental for good health throughout life. Many of the major diseases are established in the womb and in infancy. Therefore, the NIPH will continue its efforts to raise the quality of maternity and post-natal care and look for causes of diseases with a foundation from early in life.

Drug consumption is important for public health. Correct use may reduce morbidity and mortality, but misuse can threaten both health and quality of life. The NIPH will strengthen research and reporting to highlight positive and negative effects of drug use in the population.

Accidents and injuries - especially in traffic - take many lives, causing both disability and lost quality of life. Although the incidence of workplace accidents has decreased, the incidence of leisure, communication and domestic accidents has increased. The NIPH has no dedicated research in this area, but will follow future developments.

Suicide and attempted suicide is a major, unresolved public health problem. Every year approximately 500 people commit suicide, and almost ten times as many people attempt it. Suicidal behaviour may be due to a mental disorder, but may also occur in people with good mental health. The NIPH will continue to research and monitor developments in this area.



PUBLISHED BY NORWEGIAN INSTITUTE OF PUBLIC HEALTH
JANUARY 2011

P. O. BOX 4404 NYDALEN

NO-0403 OSLO

TEL: (+47) 21 07 70 00

WWW.FHI.NO

PHOTO CREDIT: COLOURBOX, RUBBER BALL P. 7 (2ND FROM TOP)

NUMBER PRINTED: 1 000

DESIGN: PER KRISTIAN SVENDSEN

PRINTHOUSE: NORDBERG TRYKK AS

ORDERING:

PUBLIKASJON@FHI.NO

TEL: (+47) 21 07 82 00

FAX: (+47) 21 07 81 05