

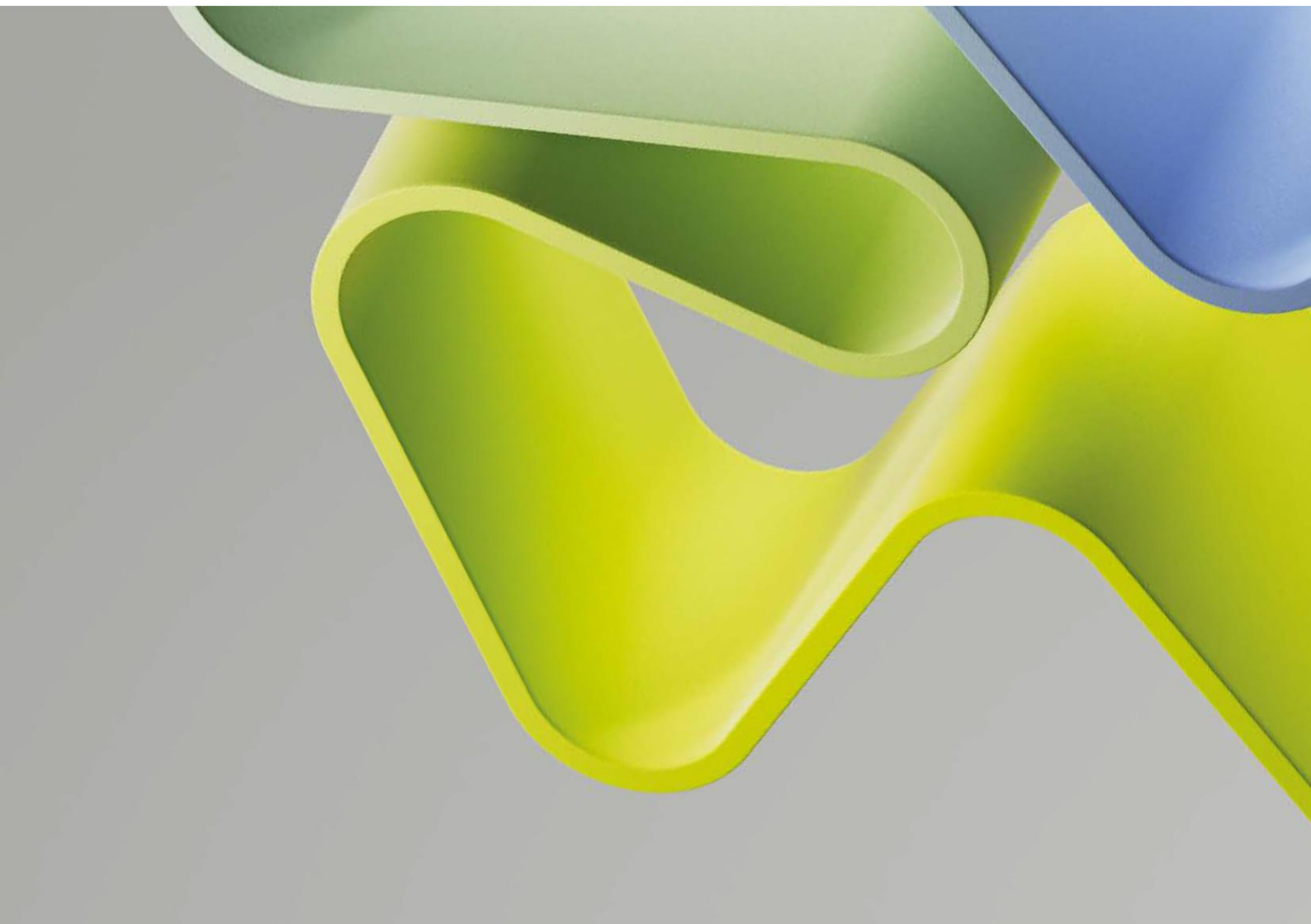
Evaluation of Medicine and Health 2023-2024

Evaluation report – Panel 4d

Research Group: Centre for Epidemic Interventions Research
(CEIR)

Administrative Unit: Division of Health Services

Institution: Norwegian institute of Public Health



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Preface

The Research Council of Norway (RCN) is given the task by the Ministry of Education and Research to perform subject-specific evaluations. The primary aim of the evaluation of medicine and health (EVALMEDHELSE) 2023-2024 is to reveal and confirm the quality and relevance of research performed at Norwegian Higher Education institutions, research institutions (the institute sector) and the health trusts, in an international perspective. Such knowledge is useful for the institutions that participate in the evaluation, for the Research Council who advice the authorities on how research should be developed further, and for the authorities, who set targets and frameworks for research and higher education. Research groups submitted by their administrative unit will be assessed by 18 expert panels organised by research subjects or themes. The expert panels will assess research groups across institutions and sectors based on research group's self-assessments and examples of scholarly output. These research reports will be part of the evaluation of their belonging administrative units.

Abstract

The Centre for Epidemic Interventions Research (CEIR), established within the Norwegian Institute of Public Health (NIPH) in 2021, aims to enhance the evidence base for informed decision-making and public health response on infection control measures. It also aims to develop and evaluate tools to support evidence-based decision-making in health crises and to improve the population's health literacy. CEIR is led by a director and governed by a steering group and an advisory board composed of multiple stakeholders. CEIR is a relatively small multidisciplinary group of 12 members. CEIR's activities are funded through NIPH's core funding, and it has demonstrated some capability to generate external resources.

CEIR collaborates globally with academic institutions and research networks. The research team also actively engages with local and national policymakers through policy dialogue and research dissemination activities, particularly in developing and evaluating education and infection control interventions. CEIR's strengths lie in its interdisciplinary approach, global collaborations, and significant contributions to health literacy and critical evaluation of health claims. Through the development of educational tools and decision-making frameworks, CEIR aims to empower individuals and healthcare professionals to make informed health choices.

Overall assessment

CEIR's strong alignment with NIPH's strategies ensures its relevance and operational efficiency. Its governance structure facilitates effective decision-making and resource allocation. The steering group and an advisory board ensure strategic alignment and oversight from diverse perspectives. CEIR's diversity of expertise supports multidisciplinary research to address complex public health challenges. However, its reliance on core funding and its focus on health crises threatens its existence. Becoming a WHO Collaborating Centre, as mandated by the government, could be a strategy to ensure its continuing relevance and existence. Despite its size, members of CEIR actively engage with academic institutions and participate in various working groups and collaborative efforts. CEIR has good scientific productivity and research collaboration but needs to build its capacity to secure external funding to ensure its sustainability.

CEIR engages actively with policymakers, although conducting more studies with findings that directly inform decision-making and lead to actionable policies is desirable. CEIR has contributed to promoting informed health decision-making by developing educational tools targeting school students and healthcare professionals, although the effectiveness of these tools, and the education that they deliver, in real-world implementation is yet to be established. CEIR's involvement in public discussions on uncertainties surrounding public health measures is valuable. There is evidence of user involvement and engagement, but this could be strengthened.

Grading:

Dimensions		Score
Organisational dimension	How adequate the organisational environment is in supporting the production of excellent research	4
Quality dimension	Research and publication quality	4
	Research group's contribution	4
Societal impact dimension	Research group's societal contribution	4
	User involvement	3

Recommendations

Given that the group is relatively small, CEIR has made important contributions with regard to research in its chosen area. The group is generally performing at a level that is of national quality, although there are some aspects of their performance that are of international quality. However, CEIR needs to continue to enhance its importance, visibility, and relevance through collaboration and participation of similar institutions in the Nordic countries or globally. For example, CEIR could consider developing training materials on epidemic preparedness to build a critical mass of researchers in this area and improve population health literacy as mandated by the government. CEIR's strategy to develop a study protocol for future pandemic preparedness and a systematic priority-setting exercise with the involvement of decision-makers and key stakeholders is important in ensuring its relevance to the NIPH.

CEIR should consider strategies to ensure that its areas of core expertise are sustainable and are not affected by staff turnover. Its active collaboration across different groups should be geared toward securing external funds that could mitigate the potential priority change and reallocation of core funding. The group could consider developing medium- and long-term strategic plans on organisational development, resourcing, and future research areas, and begin to take steps towards becoming a WHO Collaborating Centre.

Despite its availability, the effectiveness of health education resources in diverse cultural contexts and the adoption and impact of decision-making tools in clinical settings may require further evaluation. CEIR should consider incorporating feedback mechanisms from healthcare professionals to evaluate the effectiveness of the decision-making tool in a clinical setting. CEIR could build its communication and outreach efforts through other media/channels including social media or hosting webinars and conferences.

1. Strategy, resources and organisation

1.1 Research group's organisation and strategy

The Centre for Epidemic Interventions Research (CEIR) was established in 2021 as a successor to the Centre for Informed Health Choices (CIHC) at the Norwegian Institute of Public Health (NIPH). CEIR aims to enhance the evidence base for informed decision-making and public health response on infection control measures, both in response to the COVID-19 pandemic and in anticipation of future health crises. It also aims to develop and evaluate tools to support evidence-based decision-making in health crises and to improve the population's health literacy.

CEIR is led by a director and governed by a steering group and an advisory board composed of multiple stakeholders representing various sectors such as education, health services, business, and labour organisations. CEIR members include full-time and part-time researchers, mainly financed by core funding and supplemented by external funding. CEIR's researchers contribute to teaching courses at academic institutions and to the supervision of PhD students. The group (and its precursor) have supervised 7 PhDs to date.

CEIR aims to become a WHO Collaborating Centre, to stimulate more international collaboration, to increase the use of real-world data, be proactive in studies relating to upcoming major epidemics, and to focus more on public participation in infection control. The NIPH provides administrative support to CEIR on general matters (economic, legal, communication, IT) and specific tasks relating to funding applications, finances, and project management.

- CEIR's mission and activities are highly dependent on health crises, such as a pandemic, and their absence could threaten its sustainability and its existence.
- Being a WHO Collaborating Centre, as mandated by the government, could be an essential strategy to ensure its continuing relevance and existence.
- CEIR's governance structure facilitates effective decision-making and resource allocation within CEIR. The steering group and an advisory board ensure strategic alignment and oversight from diverse perspectives.
- CEIR engages actively with policymakers, although it is desirable to conduct more studies with findings that directly inform decision-making and lead to actionable policies.

Recommendations to the research group

CEIR's strategy to develop a study protocol for future pandemic preparedness and a systematic priority-setting exercise with the involvement of decision-makers and key stakeholders are important in ensuring its relevance to the NIPH. CEIR could consider developing training materials on epidemic preparedness both to build a critical mass of researchers in this area and to improve population health literacy as mandated by the government.

1.2 Research group's resources

CEIR is a small but diverse research group with 9 researchers, 1 research fellow, 1 advisor, and 1 leader; 2 of this staffing base hold temporary positions. Team members have expertise in infectious epidemiology, clinical epidemiology, biology, statistics, political science, and communication design. CEIR primarily relies on core funding supplemented by external project-based funding, including NOK 1.3M from RCN in 2020, NOK 4M from RCN, NOK 35M from essential funding during 2021-2022, and NOK 1.4M from international funders, demonstrating substantial financial support relative to its size. CEIR has multidisciplinary team members with expertise in randomised trials, quasi-experimental evaluation, qualitative research, user design, and systematic reviews. CEIR's researchers are engaged globally with academic institutions, as well as the Informed Health Choices Networks, the GRADE working group for evidence-to-decision framework development, the BESSI collaboration for infection control measures evaluation, and the Cochrane systematic review collaboration. The research team also actively engages with local and national policymakers through policy dialogue and research dissemination activities, particularly on developing and evaluating education and infection control interventions.

- The diversity of expertise at CEIR supports multidisciplinary research to address complex public health challenges.
- CEIR primarily relies on core funding supplemented by external project-based funding, demonstrating substantial financial support relative to the group's size.
- Despite the small group size, CEIR team members are actively engaged with academic institutions and various key working groups and collaborative efforts.
- CEIR needs to build its capacity to continue to secure external funding to ensure its sustainability.

Recommendations to the research group

Despite the small size of this group, its members have made good progress. However, CEIR should consider strategies to ensure core expertise areas are sustainable and not affected by staff turnover. Its active collaboration across different groups should be geared toward securing external funds that could be used to mitigate any potential priority change and reallocation of core funding. The group could consider developing medium- and longer-term strategic plans for organisational development and resourcing, and future research plans, and begin to take steps towards becoming a WHO Collaborating Centre.

1.3 Relevance to the institution

CEIR's predecessor, the Centre for Informed Health Choices (2017-21), contributed to the NIPH's strategic goals by developing and evaluating interventions to improve the population's health literacy and evaluation of health claims. CIHC led a series of large-scale randomised trials conducted in schools to assess educational resources to improve student's skills in appraising health claims. The educational materials are now available in 14 languages via the Informed Health Choices website. With the establishment of CEIR in 2021, NIPH intensified its efforts to generate evidence on the efficacy of public health and social measures for infection control, aligning with its current strategy's goal of implementing evidence-based effective interventions. CEIR will collaborate with public administrations and healthcare services to evaluate municipality-level interventions in response to public health challenges, including the pandemic.

- A close alignment with NIPH's strategic plan ensures CEIR's activities are relevant to the institute.
- CEIR's predecessor's solid track record in improving population health literacy lays a good foundation for the group to continue along the same research track.
- The availability of intervention materials in multiple languages extends the group's reach towards a broader audience and will potentially reveal a greater impact.

Recommendations to the research group

There are no specific recommendations on this item.

2. Research quality

2.1 Research group's scientific quality

CEIR is coordinating two projects funded by the Research Council of Norway on sustainable public engagement in improving health and health equity (CHOICE) and inclusive and accountable health systems decisions in Ghana and Kenya for Universal Health Coverage (SUPPORT-SYSTEMS). It is a partner of one EU-funded project on the WHO-PEN@scale led by the University of Heidelberg. CEIR is also coordinating a several smaller-scale research projects that are funded internally by the NIPH. In the self-assessment, 10 projects are listed, five peer-reviewed journal papers are cited (published in Nature, Trials, Implementation Science and Health Research Policy and Systems), and one monograph is given, on teaching young people to think about health claims and choices. CEIR envisions being a WHO Collaborating Centre (though it is not clear in which field).

- Considering its size and age, CEIR is productive in leading research collaborations and producing high-quality research outputs.
- CEIR's ambition to become a WHO Collaborating Centre reflects its intention to broaden its international collaboration and gain further recognition within the global health community.
- The research group needs to bring in more resources for intervention research on epidemics, for research in Norway and in other settings.

Recommendations to the research group

CEIR may need to consider aligning its scope/topic more carefully with its name. It could also consider prioritising research and initiatives to improve epidemic preparedness and response strategies in collaboration with institutions in Norway or other settings where epidemics occur more frequently. In the absence of an epidemic, CEIR could consider conducting scenario-based simulations and develop decision-making frameworks for rapid response to emerging health threats. A key area of potential development for CEIR could be to strengthen its focus on translational research to bridge the gap between scientific evidence and real-world implementation, and to identify implementation challenges of the decision-making frameworks in real life.

2.2 Research group's societal contribution

CEIR (or its predecessor) has developed tools for informed health decision-making that are available in multiple languages and have been used to teach critical assessment of health claims to primary and secondary school students. CEIR has also contributed to the development of decision-making tools for healthcare professionals, such as the Evidence-to-decision framework used by organisations like WHO. The group has also developed resources for presenting systematic review findings and has actively contributed to public discussions on the uncertainties surrounding public health measures.

- CEIR has contributed to promoting informed health decision-making by developing educational tools targeting school students and healthcare professionals.
- CEIR is proactive in addressing health literacy at different educational levels.
- CEIR's involvement in public discussions on uncertainties surrounding public health measures is valuable.

Recommendations to the research group

Despite its availability, the effectiveness of health education resources in diverse cultural contexts, and the adoption and impact of decision-making tools in clinical settings, may require further evaluation, not least to better understand their impact. CEIR could also incorporate feedback mechanisms from healthcare professionals to evaluate the effectiveness of its decision-making tool in a clinical setting. CEIR could build its communication and outreach efforts through other media/channels including social media or by hosting webinars and conferences. Although there is evidence of user involvement in CEIR's portfolio, this could be developed further and articulated more concretely.

Appendices

(to be added by RCN / Panel Secretary)

- Mandate for expert panels
- Expert panel description and list of experts
- Template research group self-assessment
- Scales for research group's assessment

Evaluation of Life Sciences in Norway 2022-2024

Evaluation of Medicine and Health 2023-2024

Mandate Expert panels

The Research Council of Norway (RCN) is given the task by the Ministry of Education and Research to perform subject-specific evaluations. The Portfolio board for Life Sciences in the Research Council of Norway has decided to carry out an evaluation of medicine and health in 2023-2024 as the second of two evaluations within Life Sciences. The evaluation of biosciences takes place in 2022-2023.

1. The objective of the evaluation

The primary aim of the evaluation of Life Sciences is to reveal and confirm the quality and the relevance of research performed at Norwegian Higher Education Institutions (HEIs), by the institute sector and by health trusts.

The results of the evaluation will be used as recommendations to the institutions, the Research Council, and the ministries.

2. Tasks of the expert panels

The panels are requested to:

- evaluate the strategy, resources and organisation of/for the research groups.
- evaluate research production and quality of the research groups.
- grade and write a short evaluation text to the evaluated research groups.

Each of the expert panels will write a brief report with evaluations of the different research groups as well as specific recommendations.

3. Time schedule

Digital panel meetings will take place in the period March 15. - June 15. 2024.

Deadline for submitting panel report to the Research Council: June 15. 2024.

4. Miscellaneous

Other important aspects of Norwegian life sciences research that ought to be given consideration.

EVALMEDHELSE 2023-2024 – Panel group description – January 2024

Panel group	Description	Panel no.
Group 1 PHYSIOLOGY Physiology-related disciplines (human physiology), including corresponding translational research	Anatomy, physiology, embryology, nutritional physiology, pathology, basic odontological research, exercise physiology, neurobiology, toxicology, pharmacology, medicinal chemistry, chemistry, biology, pathology.	Panel 1a Panel 1b
Group 2 MOLECULAR BIOLOGY Molecular Biology, including corresponding translational research	Microbiology, bacteriology, inflammation and infection disease research, forensic medicine, genetics, immunology, vaccine development, microbiological diagnostics, pharmaceutical microbiology, cell biology, molecular medicine and -biophysics, medical biochemistry, omics, organoids, imaging, toxicology, pathology, drug development, cancer research, translational research, systems biology, personalized medicine, biomarkers, oncology, genetics, genomics, epigenetics, proteomics, bioinformatics-/statistics, computational science, AI, biology, virology, radiology, ionisation, molecular biology, microbiology, pharmacology, pharmacogenomics, regenerative medicine and related subjects.	Panel 2a Panel 2b Panel 2c
Group 3a CLINICAL RESEARCH	Clinical Research, including surgery and translational research within: paediatrics, women's health, gynaecology, otorhinolaryngology, head and neck surgery, oncology, haematology, radiology and medical imaging.	Panel 3a_1 Panel 3b_2
Group 3b CLINICAL RESEARCH	Clinical Research, including surgery and translational research within: general medicine, emergency medicine, anaesthesiology, neurology, geriatric medicine, rehabilitation medicine, cardiology, nephrology/urology, endocrinology, pulmonary medicine, orthopaedics, rheumatology, Infection, gastroenterology.	Panel 3b_1 Panel 3b_2 Panel 3b_3
Group 4 PUBLIC HEALTH Public Health and Health-related Research	Public health, community research, epidemiology, preventive medicine, mental health, behavioural research and ethics, medical statistics, environment, nutrition, preventive medicine, physiotherapy, sports medicine, implementation research, public health, health care services research, global health, nursing	Panel 4a Panel 4b Panel 4c

	sciences, rehabilitation sciences, public health systems, digital health care services, ICT, HTA, health competence, genetic and epigenetic epidemiology, non-communicable diseases, pharmacology, nursing research, professional research, occupational medicine.	Panel 4d Panel 4e Panel 4f
Group 5 PSYCHOLOGY Psychology and Psychiatry	Clinical psychology, personality psychology, developmental psychology, cognitive psychology, biological psychology and forensic psychology, psychiatry, including geriatric psychiatry, child and adolescent psychiatry and biological psychiatry, social-, community- and workplace psychology, organizational psychology, developmental psychology, behavioural and health psychology, health promotion and well-being.	Panel 5a Panel 5b

Panel group 4 PUBLIC HEALTH

Expert panel 4d

Name	Title	Institution
Nick Hardiker (chair)	Professor	University of Huddersfield
Nawi Ng	Professor	Gøteborg university
Marja Kaunonen	Professor	Tampere University
Avril Dummond	Professor	University of Nottingham
Per Nilsen	Professor	Linkøpig university



Evaluation of Medicine and Health (EVALMEDHELSE) 2023-2024

Self-assessment for research groups

Date of dispatch: **15. September 2023**
Deadline for submission: **31. January 2024**

Updated: **13. October 2023**

Institution (name and short name): _____

Administrative unit (name and short name): _____

Research group (name and short name): _____

Date: _____

Contact person: _____

Contact details (email): _____

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Introduction

The primary aim of the evaluation is to reveal and confirm the quality and the relevance of research performed at Norwegian Higher Education Institutions (HEIs), the institute sector and the health trusts. These institutions will henceforth be collectively referred to as research performing organisations (RPOs). The evaluation report(s) will provide a set of recommendations to the RPOs, the Research Council of Norway (RCN) and the responsible and concerned ministries. The results of the evaluation will also be disseminated for the benefit of potential students, users of research and society at large.

You have been invited to complete this self-assessment as a research group. The self-assessment contains questions regarding the group's research- and innovation related activities and developments over the years 2012-2022. All submitted data will be evaluated by expert panels.

Deadline for submitting the self- assessment to your administrative unit – 26 January 2024

The administrative unit will submit the research groups' completed self-assessments and the administrative unit's own completed self-assessment to the Research Council within 31 January 2024. Please submit completed self- assessment to the administrative unit no later than 26 January 2024.

Please use the following format when naming your document: [short name of the institution]_[short name of the administrative unit]_[short name of the research group], e.g. *UiT_DepPsy_Short name of the research group*.

For questions concerning the self-assessment or EVALMEDHELSE in general, please contact RCN at evalmedhelse@forskningsradet.no.

Thank you!

Guidelines for completing the self-assessment

- Please read the entire self-assessment document before answering.
- The evaluation language is English.
- Please link to websites/documents in the self-assessment where relevant.
- Please be sure that all documents linked to in the self- assessment are written in English and are accessible.
- The page format must be A4 with 2 cm margins, single spacing and Calibri and 11-point font.
- The self-assessment follows the same structure as the [evaluation protocol](#). In order to be evaluated on the two evaluation criteria described in the evaluation protocol, the research group must answer all questions.
 - ⇒ Provide information – provide documents and other relevant data or figures about the research group, for example strategy and other planning documents, as well as data on R&D expenditure, sources of income and results and outcomes of research
 - ⇒ Describe – explain and present using contextual information about the research group and inform the reader about the research group.
 - ⇒ Reflect – comment in a reflective and evaluative manner how the research group operates.
- Data on personnel should refer to data reported to DBH on 1 October 2022 for HEIs and to the yearly reporting for 2022 for the institute sector and the health authorities. Other data should refer to 31 December 2022 if not specified otherwise.
- It is possible to extend the textboxes when filling in the form. **NB!** A completed self- assessment form cannot exceed 25 pages (pdf file). Expert panels are not requested to read more than the maximum of 25 pages. Pages exceeding maximum limit of 25 pages **might not** be evaluated.
- Submit the self- assessment as a pdf (max 25 pages) to the administrative unit within **26 January 2024**. Before submission, please be sure that all text are readable after the conversion of the document to pdf. The self- assessment should be sent from the administrative unit to evalmedhelse@forskningsradet.no within **31 January 2024**.

Please note that information you write in the self assessment and the links to documents/websites in the self-assessment are the only available information for the expert panel.

In exceptional cases, documents/publications that are not openly available must be submitted as attachment(s) to the self- assessment (pdf file(s)).

1. Organisation and strategy

1.1 Research group's organisation

Describe the establishment and the development of the research group, including its leadership (e.g. centralised or distributed etc.), researcher roles (e.g. technical staff, PhD, post docs, junior positions, senior positions or other researcher positions), the group's role in researcher training, mobility and how research is organised (e.g. core funding organisation versus project based organisation etc.).

Table 1. List of number of personnel by categories

Instructions: Please provide number of your personnel by categories.

For institutions in the higher education sector, please use the categories used in DBH, <https://dbh.hkdir.no/datainnhold/kodeverk/stillingskoder>. Please add new lines or delete lines which are not in use.

	Position by category	No. of researcher per category	Share of women per category (%)	No. of researchers who are part of multiple (other) research groups at the admin unit	No. of temporary positions
No. of Personnel by position	Position A (Fill in)				
	Position B (Fill in)				
	Position C (Fill in)				
	Position D (Fill in)				

1.2 Research group's strategy

a) Describe the research group's main goals, objectives and strategies to obtain these (e.g. funding, plans for recruitment, internationalization etc.) within the period 2012-2022.

b) Please describe the benchmark of the research group. The benchmark for the research group should be written by the administrative unit in collaboration with the research group. The benchmark can be a reference to an academic level of performance (national or international) or to the group's contributions to other institutional or sectoral purposes.

Example: A benchmark for a research group is related to the research groups' aim which again is included in the strategy for the administrative unit. A guidance for the administrative unit to set a benchmark for the research group(s) can e.g. be: What do the administrative unit expect from the research group(s)?

c) Describe the research group's contribution to education (master's degree and/or PhD).

d) Describe the support the host institution provides to the research group (i.e., research infrastructure, access to databases, administrative support etc.).

1.3 Relevance to the institutions

Describe the role of the research group within the administrative unit. Consider the research group's contribution towards the institutional strategies and objectives, and relate the research group's benchmark to these.

1.4 Research group's resources

Describe the funding portfolio of the research group for the last five years (2018-2022).

Table 2. Describe the sources of R&D funding for the research group in the period 2018-2022.

	2018 (NOK)	2019 (NOK)	2020 (NOK)	2021 (NOK)	2022 (NOK)
Basic funding					
Funding from industry and other private sector sources					
Commissioned research for public sector					
Research Council of Norway					
Grant funding from other national sources					
International funding e.g. NIH, NSF, EU framework programmes					
Other					

1.5 Research group's infrastructures

Research infrastructures are facilities that provide resources and services for the research communities to conduct research and foster innovation in their fields. [These](#) include major equipment or sets of instruments, knowledge-related facilities such as collections, archives or scientific data infrastructures, computing systems communication networks. Include both internal and external infrastructures.

- Describe which national infrastructures the research group manages or co-manages.
- Describe the most important research infrastructures used by the research group.

1.6 Research group's cooperations

Table 3. Reflect on the current interactions of the research group with other disciplines, non-academic stakeholders and the potential importance of these for the research (e.g. informing research questions, access to competence, data and infrastructure, broadening the perspectives, short/long-term relations).

Interdisciplinary (within and beyond the group)	About 1/3 page
Collaboration with other research sectors e.g. higher education, research institutes, health trusts and industry.	About 1/3 page
<u>Transdisciplinary</u> (including non academic stakeholders) <i>Transdisciplinary research involves the integration of knowledge from different science disciplines and (non-academic) stakeholder communities with the aim to help address complex societal challenges.</i>	About 1/3 page

2. Research quality

2.1 Research group's scientific quality

Describe the research profile of the research group and the activities that contribute to the research group's scientific quality. Consider how the research group's work contributes to the wider research within the research group's field nationally and internationally.

Please add a link to the research group's website:

Short version

Table 4. List of projects

Instructions: Please select 5-10 projects you consider to be representative/the best of the work in the period 1 January 2012 – 31 December 2022. The list may include projects lead by other institutions nationally or internationally. Please delete tables that are not used.

Project 1 -10: <i>Project title/Project period (year from – year to)</i>	Project owner(s) (project leaders organisation)	
	Total budget and share allocated to research group	
	Objectives and outcomes (planned or actual) and link to website	

Table 5. Research group's contribution to publications

Instructions: Please select 5-15 publications from the last 5 years (2018-2022) with emphasis on recent publications where group members have a significant role. **If the publication is not openly available, it should be submitted as a pdf file attached to the self-assessment.** We invite you to refer to the Contributor Roles Taxonomy in your description: <https://credit.niso.org/>.

Cf. Table 1. List of personell by categories: Research groups up to 15 group members: 5 publications. Research groups up to 30 group members: 10 publications. Research groups above 30 group members: 15 publications.

Please delete tables that are not used.

Publication 1 -15: <i>Project title/Journal/Year/DOI/URL</i>	Authors (Please highlight group members)	
	Short description	
	Research group's contribution	

Table 6. Please add a list with the research group's monographs/scientific books.

Please delete lines which are not used.

1	Title - Authors (Please highlight group members)- link to webpage (if possible)
2	

2.2 Research group's societal contribution

Describe the societal impact of the research group's research. Consider contribution to education, economic, societal and cultural development in Norway and internationally.

Table 7. The research group's societal contribution, including user-oriented publications, products (including patents, software or process innovations

Instructions: Please select 5–10 of your most important user-oriented publications or other products from the last 5–10 years with emphasis on recent publications/products. For each item, please use the following formatting. Please delete lines which are not used.

3. Challenges and opportunities

Information about the strengths and weaknesses of the research group is obtained through the questions above. In this chapter, please reflect on what might be the challenges and opportunities for developing and strengthening the research and the position of the research group.

Short version

Scales for research group assessment

Organisational dimension

Score	Organisational environment
5	An organisational environment that is outstanding for supporting the production of excellent research.
4	An organisational environment that is very strong for supporting the production of excellent research.
3	An organisational environment that is adequate for supporting the production of excellent research.
2	An organisational environment that is modest for supporting the production of excellent research.
1	An organisational environment that is not supportive for the production of excellent research.

Quality dimension

Score	Research and publication quality	Score	Research group's contribution Groups were invited to refer to the Contributor Roles Taxonomy in their description https://credit.niso.org/
5	Quality that is outstanding in terms of originality, significance and rigour.	5	The group has played an outstanding role in the research process from the formulation of overarching research goals and aims via research activities to the preparation of the publication.
4	Quality that is internationally excellent in terms of originality, significance and rigour but which falls short of the highest standards of excellence.	4	The group has played a very considerable role in the research process from the formulation of overarching research goals and aims via research activities to the preparation of the publication.
3	Quality that is recognised internationally in terms of originality, significance and rigour.	3	The group has a considerable role in the research process from the formulation of overarching research goals and aims via research activities to the preparation of the publication.
2	Quality that meets the published definition of research for the purposes of this assessment.	2	The group has modest contributions to the research process from the formulation of overarching research goals and aims via research activities to the preparation of the publication.
1	Quality that falls below the published definition of research for the purposes of this assessment.	1	The group or a group member is credited in the publication, but there is little or no evidence of contributions to the research process from the formulation of overarching research goals and aims via research activities to the preparation of the publication.

Societal impact dimension

Score	Research group's societal contribution, taking into consideration the resources available to the group	Score	User involvement
5	The group has contributed extensively to economic, societal and/or cultural development in Norway and/or internationally.	5	Societal partner involvement is outstanding – partners have had an important role in all parts of the research process, from problem formulation to the publication and/or process or product innovation.
4	The group's contribution to economic, societal and/or cultural development in Norway and/or internationally is very considerable given what is expected from groups in the same research field.	4	Societal partners have very considerable involvement in all parts of the research process, from problem formulation to the publication and/or process or product innovation.
3	The group's contribution to economic, societal and/or cultural development in Norway and/or internationally is on par with what is expected from groups in the same research field.	3	Societal partners have considerable involvement in the research process, from problem formulation to the publication and/or process or product innovation.
2	The group's contribution to economic, societal and/or cultural development in Norway and/or internationally is modest given what is expected from groups in the same research field.	2	Societal partners have a modest part in the research process, from problem formulation to the publication and/or process or product innovation.
1	There is little documentation of contributions from the group to economic, societal and/or cultural development in Norway and/or internationally.	1	There is little documentation of societal partners' participation in the research process, from problem formulation to the publication and/or process or product innovation.

Norges forskningsråd

Besøksadresse: Drammensveien 288
Postboks 564
1327 Lysaker

Telefon: 22 03 70 00

Telefaks: 22 03 70 01

post@forskningsradet.no

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