

COMMUNITY HEALTH & EPIDEMIOLOGY

Departmental Strategic Plan

Academic Years 2026-2031





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Message from the Department Head

Mark Asbridge, PhD

PROFESSOR, COMMUNITY HEALTH & EPIDEMIOLOGY | EMERGENCY MEDICINE

As part of Dalhousie's Faculty of Medicine, our department is a dynamic and research-intensive community committed to improving health outcomes and advancing health equity. We're proud to be part of a leading academic and research institution in Atlantic Canada, and even prouder of the impact our faculty, students, and partners are making locally and globally.

Our team includes 21 faculty (full-time, part-time, and joint appointed), including three funded Research Chairs, and over 50 cross-appointed and adjunct faculty, many of whom are supported by national and provincial funding agencies, including the Canadian Institutes of Health Research (CIHR), the Natural Sciences and Engineering Research Council of Canada (NSERC), and the Social Sciences and Humanities Research Council (SSHRC).

Together, we offer MSc and PhD training in Epidemiology and Applied Health Research and contribute to a range of interdisciplinary programs from Health Informatics and the Master of Physician Assistant Studies at the graduate level, to the BSc in Medical Sciences and undergraduate medical education (UGME).

At the heart of our work is a commitment to advancing health equity and improving outcomes through evidence-based policy and practice. Our



faculty and students are passionate about tackling real-world health challenges through interdisciplinary collaboration and community and health systems engagement.

As we enter a new era, we do so with a strong sense of momentum, renewal, and shared purpose. This strategic plan outlines a five-year framework for action — one that builds on our strengths while positioning us to respond thoughtfully and creatively to the opportunities ahead. It reflects our collective ambitions and acknowledges the many successes that have brought us to this point, reaffirming our commitment to the collaborative spirit that has long defined our academic community.





Our department's identity is grounded in a culture of innovation, leadership, and equity that guides how we shaped by the insights and engagement of faculty, staff and academic, health system, and community partners, ensuring that it reflects both our shared priorities and our diverse perspectives. Together, we will focus our efforts across four core Streams: Excellence in Education, Impactful Research, Serving & Engaging Society, and Valuing People. With this plan as our guide, we look forward with optimism to the next chapter of our department's growth and contribution.

I invite you to explore our strategy, connect with our people, and discover how we're working together to build a healthier, more equitable future.

Warm regards,



Mark Asbridge, PhD

Head, Department of Community Health & Epidemiology



Our Mission, Vision, & Values



Mission

To improve health outcomes, and advance health systems effectiveness and sustainability through epidemiology and applied health research.

Vision

Leadership in research that transforms care, strengthens policy, and improves people's lives.

What we Value

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- **Excellence with Impact** -We pursue rigorous research and education that deliver meaningful, measurable improvements in populations and health systems.
 - **Interdisciplinarity** -We advance epidemiology and population health through integration, bringing together diverse perspectives and methods to address complex health challenges.
 - **Partnership** -We collaborate with government, clinical, and community partners to strengthen evidence and impact.
 - **Health Equity** -We utilize epidemiology and applied health research to improve outcomes for historically excluded patients and populations.
 - **Student Success** -We place student learning, mentorship, and well-being at the centre of our academic mission.



Our Strategic Streams and Priorities

HIGH-IMPACT RESEARCH

We aim to address important health issues through expertise that is nationally and internationally recognized. Our expertise and foci below are integrated through shared approaches including epidemiology, applied health research, implementation science, patient-and community-engaged research, and data-informed decision-making.

The Focus Areas and Priority Initiatives which follow are intended to support CH&E research expertise and focus to build on our strengths.

Our Research Expertise & Focus

- Optimizing health across the life course
- Chronic disease prevention and management
- Health equity and the social determinants of health
- Health data science
- Health services and health policy research
- Clinical epidemiology and patient engagement

Focus Area 1: Deepen inter-sectoral collaboration through strategic engagement with regional & cross-institutional partners

We will achieve this by:

1. Fostering co-led, collaborative, and embedded research.
2. Developing and sustaining shared research agendas through formalized partnerships with regional institutions.
3. Establishing CH&E's unique value as a strong link in the health research ecosystem.
4. Establish a dual-track engagement model that recognizes our roles as consultants and research leaders.

Focus Area 2: Identify & mobilize research potential

We will achieve this by:

1. Growing engagement with government, health authority, and community partners and decision-makers.
2. Growing engagement and collaboration with industry.
3. Growing research funding and support that generates evidence to inform science, policy, and practice.





Focus Area 3: Enhance the visibility of our contributions & impact

We will achieve this by:

1. Establishing a clear, compelling and realistic communications plan that educates, informs and advises decision-makers within government and the community.

The following barriers will need to be addressed through collaboration with other departments and organizations:

- Funding challenges as funding agencies and government budgets shrink and tighten.

When the strategic intentions behind these three focus areas are fully realized:

- ✓ Faculty and trainees will be seen as **embedded partners and trusted advisors** responding to defined system needs and shaping shared research agendas from the outset, with expectations, contributions, and value exchange made explicit.
- ✓ CH&E's engagement with health systems will feel more **intentional, reciprocal, and consequential**.
- ✓ The department will be present at the **right decision-making tables**, influencing priorities that matter regionally while maintaining **strong academic outputs**.
- ✓ Collaborations will generate **tangible returns** such as authored work, funded students, cross-appointments, job opportunities for trainees, evidence-based policy and practice, and CIHR successes, with improved access to diverse funding pathways.
- ✓ Our contributions and impact will be more recognizable to government, industry, and community partners, reinforcing the department's role as a critical expert for research, policy, and practice. We will be viewed as a **distinctive collaborator** that strengthens the overall health research ecosystem.



EXCELLENCE IN EDUCATION

The Department of Community Health and Epidemiology is an integral part of the Faculty of Medicine. Our faculty engages with a diverse set of learners from undergraduate students, to master's and PhD students, medical students and trainees in pre-clerkship, clerkship, and residency.

We provide learners with high-quality training in epidemiologic research methods, health services research, and data science. We also provide them with opportunities to engage directly with clinical departments, public health professionals, policy makers and community stakeholders.

We offer:

- A thesis-based Master's in Epidemiology & Applied Health Research
- A PhD in Epidemiology & Applied Health Research

The Focus Areas and Priority Initiatives which follow are intended to continuously improve and expand CH&E pedagogical expertise and foci.

Focus Area 1: Pursue excellence in educational program delivery

We will achieve this by:

1. Introducing a systematic, multi-year framework for reviewing and updating educational programming.
2. Fostering faculty development as educators and mentors.





Focus Area 2: Align education with career/workforce needs and opportunities

We will achieve this by:

1. Refreshing and reinforcing the PhD Program.
2. Developing alternative educational programs.
3. Defining program structure, boundaries, competencies, intersections, and pathways.

Focus Area 3: Shape conditions that enable a healthy, inclusive and transformative educational culture

We will achieve this by:

1. Prioritizing the creation of positive and impactful learning environment for students.

When the strategic intentions behind these three focus areas are fully realized:

√ The approach to our educational mandate will be **more coherent, purposeful, and future-oriented**, with **clear structures** that support continuous improvement and evidence-informed decision-making.

√ **Programs will be well aligned with defined outcomes and workforce needs**, offering students transparent pathways, consistent learning experiences, and stronger preparation for diverse careers and independent research.

√ Faculty will experience **clearer expectations, innovative teaching tools, and reduced crisis-driven workload**, enabling greater confidence and innovation in teaching.

√ Overall, students will perceive a **more supportive, inclusive learning environment**, reflected in improved achievement, timely completion, stronger graduate outcomes, and a growing reputation that attracts high-quality applicants and partnerships.



SERVING AND ENGAGING SOCIETY

We aim to improve health in the Maritimes beyond traditional roles in education and research.

In tandem with the Faculty of Medicine, we will examine and redefine CH&E's engagement with marginalized communities and collaborate with government, community partners, and external stakeholders to catalyze system change grounded in equity, diversity, inclusion, and accessibility (EDIA) principles.

Focus Area 1: Enhance public & community engagement, and research translation

We will achieve this by:

1. Adopting principles & guidelines to facilitate our shift to enhanced engagement.
2. Creating support structures, processes and frameworks for broader levels of patient/ community engagement.
3. Establishing incentives & supports for faculty who lead or contribute to public engagement initiatives.

Focus Area 2: Integrate Equity, Diversity, Inclusion, Reconciliation & Anti-Oppression (EDIRA) across departmental activities

We will achieve this by:

1. Embedding EDIRA principles in all processes, including teaching, research, hiring, and evaluation.
2. Providing faculty and staff with training on anti-oppression, trauma-informed practice, as well as cultural sensitivity and safety.

When the strategic intentions behind these two focus areas are fully realized:

√ CH&E will engage with the public and communities in more **intentional, trustworthy, and mutually beneficial ways**, resulting in research and teaching that are more responsive, inclusive, and impactful.

√ Clear principles, supports, and incentives will **normalize meaningful community and public involvement**, leading to stronger relationships, shared understanding of system challenges, and innovations that are visible and valued by those whom they are meant to benefit.

√ At the same time, EDIRA will be embedded across departmental culture and practice, **improving day-to-day experiences for faculty, staff, students, and partners** through greater awareness, skill, and confidence in inclusive approaches.

√ Overall, the department will function with **higher trust, well-being, and alignment**, while reducing unintended harm and strengthening its social relevance and public impact.

VALUING PEOPLE

The strides we make as a department would not be possible without the extraordinary actions and varied expertise of the people who comprise our faculty, staff and students. We will strive to sustain a culture of appreciation, trust, and continuous development that supports people to thrive in their roles.

Focus Area 1: Support faculty, highly qualified personnel (HQP) and staff mentorship & development

We will achieve this by:

1. Establishing an onboarding and mentorship program for early career faculty.
2. Establishing a development program to support mid and late-career faculty.
3. Ensuring continuous training opportunities for staff to ensure we stay current as practices evolve.
4. Developing equitable workload models considering work-life balance.

Focus Area 2: Recognize faculty & staff

We will achieve this by:

1. Celebrating, valuing, and validating faculty and staff contributions.

Focus Area 3: Support work-life integration/balance & wellness

We will achieve this by:

1. Normalizing practices that support healthy work life for faculty staff and trainees.

Focus Area 4: Recruit strategically

We will achieve this by:

1. Developing a multi-year succession plan
2. Using recruitment and hiring as an opportunity to build capacity in strategic or under-represented areas.

When the strategic intentions behind these four focus areas are fully realized:

√ CH&E will be experienced as a **supportive, equitable, and sustainable place to work** and build a career, where people at all stages feel genuinely valued for the full range of their contributions.

√ Clear mentorship, development pathways, and fair workload models will **strengthen confidence, well-being, and productivity** while reducing burnout and turnover.

√ Recognition practices will more visibly affirm both traditional and non-traditional successes, reinforcing a **culture of respect and psychological safety**.

√ At the same time, intentional succession planning and strategic recruitment will ensure **continuity, resilience, and growing capacity**, positioning the department for long-term stability, inclusive excellence, and strong loyalty from faculty, staff, and trainees.



Strategic Enabler

ENHANCE EXTERNAL PARTNERSHIPS & SYSTEM ALIGNMENT

A common theme throughout the development of this plan, beginning with our external consultations, was the opportunity for CH&E to serve as a bridge between academic work and the evolving needs of the regional health system. By strengthening this role, CH&E can help guide improvements in population health and contribute meaningfully to ongoing regional health system transformation.

This enabler is intended to support all four streams of CH&E's strategic work: High-Impact Research, Excellence in Education, Serving & Engaging Society, and Valuing People. It focuses on building durable, trust-based relationships and establishing structures that support sustained alignment between CH&E priorities and the needs of the health system. In doing so, it will help coordinate and integrate our efforts across the streams while strengthening the impact of our collective work

We will achieve this by:

- 1. Building strategic partnerships and collaborative infrastructure.** Establish the governance structures, roles, and relationships that position CH&E as a trusted and embedded partner in regional health system improvement.
- 2. Operationalizing cross-sector collaboration.** Develop the processes, engagement mechanisms, and tools needed to coordinate ongoing collaboration between CH&E and health system partners.
- 3. Evaluating and strengthening collaborative impact.** Monitor progress, assess effectiveness, and continuously improve the structures and processes that support CH&E's collaborative work.



When this strategic enabler is fully realized:

√ CH&E will function as a **deliberately connected and system-aligned partner**, with collaboration no longer dependent on individual relationships but supported by clear structures, shared processes, and sustained relational infrastructure.

√ External **partnerships will be more diverse, intentional, and durable**, enabling faculty to work as embedded contributors to health system learning and change rather than episodic consultants.

√ Regular, well-managed engagement will **improve alignment around emerging priorities, strengthen pathways for research to inform policy and practice**, and make previously invisible, collaborative work visible and valued.

√ Overall, the department will be **better positioned to co-create impact at scale**, continuously improve how it collaborates, and support faculty in building partnerships that deliver lasting public benefit.





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