



Sahlgrenska International Care

Annual and Sustainability Report 2024



SAHLGRENKA
UNIVERSITETSSJUKHUSET
VGR

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About the Annual and Sustainability report

This is Sahlgrenska International Care's second integrated annual and sustainability report. The previous one was published in 2023. Our ambition has been to present a fair and inspiring description of our work and to provide a comprehensive picture of our opportunities and challenges, what we have achieved so far and where we are going.



We have prioritized **4 of the 17 global goals** that Sahlgrenska International Care (SIC) can contribute most to. The sustainability goals are integrated into our business plan and will be a guiding tool for Sahlgrenska International Care's operations – where sustainability is a natural part. See our sustainability report on pages 28-39.

Sahlgrenska International Care

Sahlgrenska International Care is Sahlgrenska University Hospital's center for international collaborations contributing to the development of healthcare – both locally and globally.



Highly specialized care for international patients



Exchange programs for healthcare professionals



Specialist training programs for international doctors and dentists



Development cooperation for global health



Medical equipment aid



International partnerships



Vision

Sahlgrenska International Care's vision is for more people around the world to have access to care, the opportunity for good health and a good life.



International partnerships to improve healthcare for patients and staff in Västra Götaland, Sweden and the countries we work with.

Sahlgrenska University Hospital

– expanding our internationalization efforts

Sahlgrenska University Hospital is focusing more on internationalization to become one of Europe's leading university hospitals by 2032.

The hospital aims to improve healthcare and promote sustainability in multiple ways. These include strengthening partnerships with hospitals around the world, increasing international patient and staff exchanges, and participating in global research projects. Our goal is to offer highly specialized care and to help build a healthier world by sharing expertise and driving innovation.

- Europe's most modern children's hospital
- The most comprehensive transplant hospital in the Nordic region
- Best in Sweden for clinical research
- Provides national highly specialized care in 43 areas
- Members of 13 European reference networks
- AI Center and collaboration with Chalmers University of Technology
- ATMP Center
- Precision Medicine Center
- Innovation department
- Specialist training (ST) in innovation and technology
- International program director



“ We aim to become Europe's leading university hospital by focusing on patients, staff and our ways of working. Sustainability, research and internationalization are important keys to success. Our goal is to create a modern and patient-centered healthcare in line with the UN's global sustainability goals, Agenda 2030.

Boubou Hallberg, Hospital Director

2024 – innovation in international partnerships

SIC supports international development projects that aim to promote sustainable development in healthcare and improve global health. Since 2023, all initiatives that are granted funds from SIC's investment budget have been evaluated according to the same checklist, criteria and sustainability assessment. In 2024, 15 initiatives were granted. Sahlgrenska University Hospital's internationalization is our everyday life.

As part of our training for international doctors and dentists, we've helped make human rights a key part of the introduction year. The task of coordinating Region Västra Götaland's international material aid and cooperation with Swedish aid organizations continues to be an important point. By working with partners who understand both global development and the challenges faced in vulnerable communities, we're helping expand access to healthcare where it's most needed.

Singapore

In November, Sahlgrenska University Hospital participated in a state visit to Singapore led by the Swedish royal couple. The visit resulted in the signing of a new memorandum of understanding between the countries' health ministries on innovation cooperation in healthcare. For Sahlgrenska University Hospital, the participation provided an opportunity to evaluate future collaborations with relevant actors in Singapore, including those in AI and precision medicine. It was also an opportunity to build relations with Sweden's Minister for Foreign Affairs and the Minister

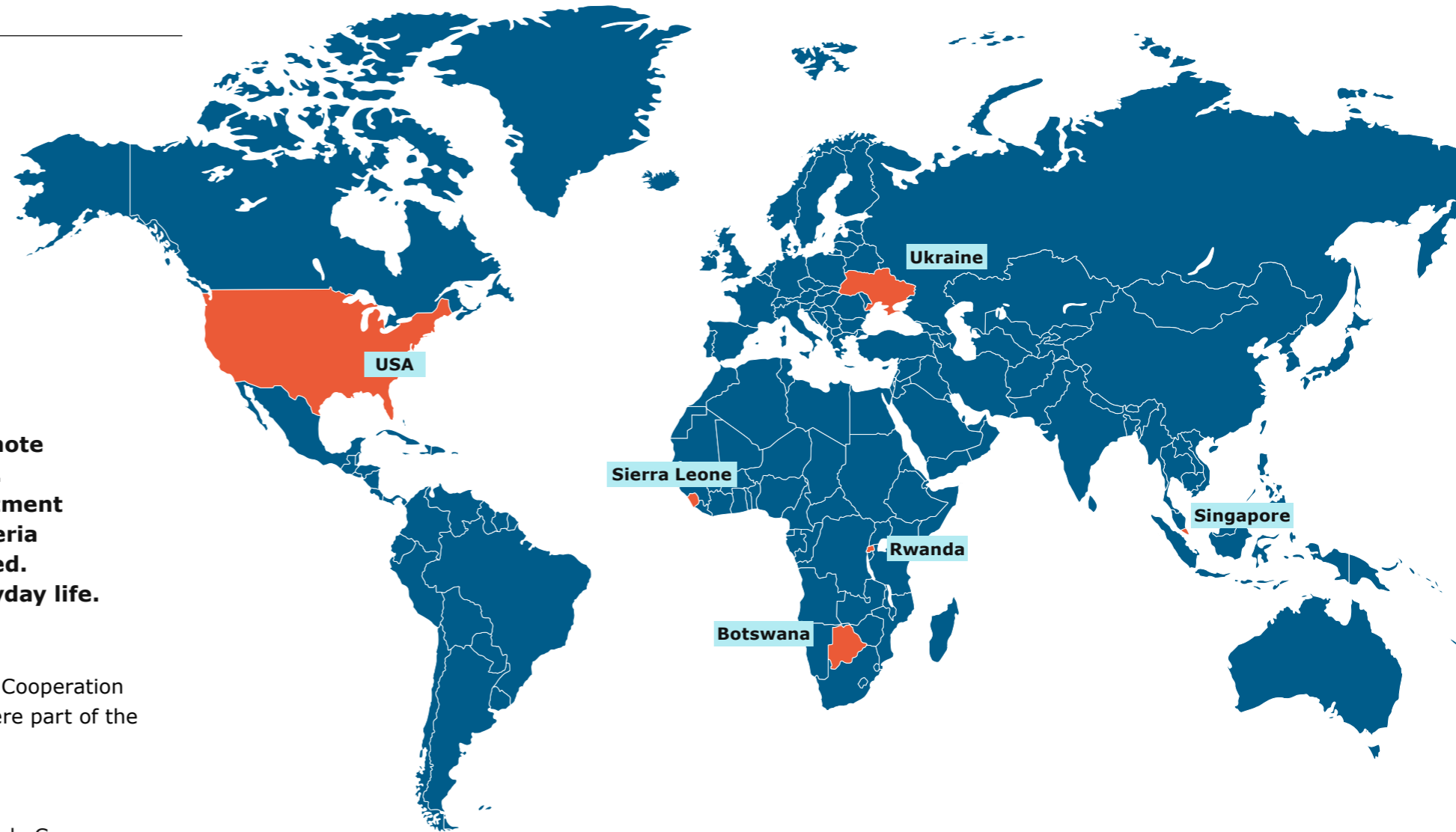
for International Development Cooperation and Foreign Trade who also were part of the state visit.

Rwanda

Our cooperation with the Rwanda Cancer Center at Kigali Military Hospital has made good progress. In the past year, a resident doctor from the Oncology Department at Sahlgrenska University Hospital carried out clinical shadowing on site. Experiencing oncology work in Rwanda sheds light on how scarce resources can create complex ethical dilemmas when access to essential care is limited.

Ukraine

Our commitment to Ukraine continues, so does our support to Swedish aid organizations helping the Ukrainian people. In the past year, Region Västra Götaland and Sahlgrenska University Hospital have donated significant amounts of medical equipment and expendables to hospitals and healthcare facilities in Ukraine. Read more about one of our partner organizations; Help Ukraine Gothenburg (HUG) on pages 20–23.



Sierra Leone

The past year has seen SIC carry out a training program in Sierra Leone with the aim of advancing preoperative neurosurgery there. In partnership with SANC, a non-profit co-founded in 2018 by Sahlgrenska neurosurgeon Magnus Tisell, two Swedish neurosurgeons visited Sierra Leone to provide hands-on training to local doctors. Read more on pages 14–17.

Botswana

At Botswana's Princess Marina Hospital, professionals came together in an initiative to share experiences and transfer essential skills. It involved clinical work as well as participation in the development of a residency program in radiology.

All in all, the experience gave the employee valuable insights from a different healthcare setting, which can now be brought back and

shared at Sahlgrenska University Hospital. These types of efforts help create an attractive working environment and develop the skills of radiologists, which are in short supply in Sweden.

USA

A delegation trip to Washington was organized in connection with the signing of a new cooperation agreement in cancer research and cancer care between the US and Sweden. There was later also a reunion in Stockholm.

Sahlgrenska Comprehensive Cancer Center, SCCC, participated in a roundtable discussion on the cancer agreement between Sweden and the US during Almedalen Week.

Two Vinnova applications for North America were submitted together with Grant Office, AI Center and Chalmers.

Care

Highly specialized planned care in the Nordic region leads to increased cooperation between hospitals

2024 saw an increased cooperation between partners in Nordic countries and the Intestinal Failure Center and the Epilepsy Center at Sahlgrenska. Work is now underway to make the referral process easier.

Hospitals in Norway regularly turn to Sahlgrenska's Intestinal Failure Center for both individual examinations and more extensive investigations, but also for lifelong care.

At the Epilepsy Center, we instead see a demand from both Finland and Denmark for

more targeted care interventions, after their own investigations. Patients are referred to Sahlgrenska for a second opinion in more severe cases, such as neurosurgery.

The collaboration means that patients are offered follow-ups at Sahlgrenska over time.

Thanks to their unique expertise, the multidisciplinary teams at Sahlgrenska's centers receive patients with complex medical conditions from both Sweden and other countries around the world.



Photo: Paul Björkman

Digital solutions – a prerequisite for driving stronger international healthcare partnerships

Sensitive information must be handled carefully and in line with current legislation. Information sharing in healthcare remains a major challenge.

Sahlgrenska International Care remains committed to improving and ensuring international patients can continue to access planned medical care at Sahlgrenska.

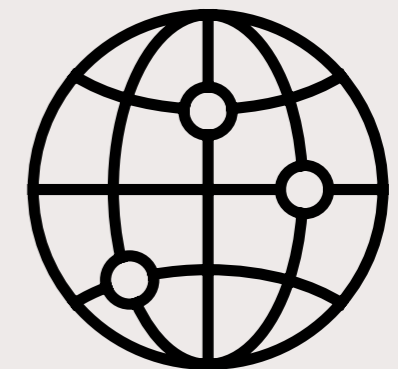
In cooperation with Iceland, several steps in the referral process have been digitized for a simpler administrative process and shorter processing time.

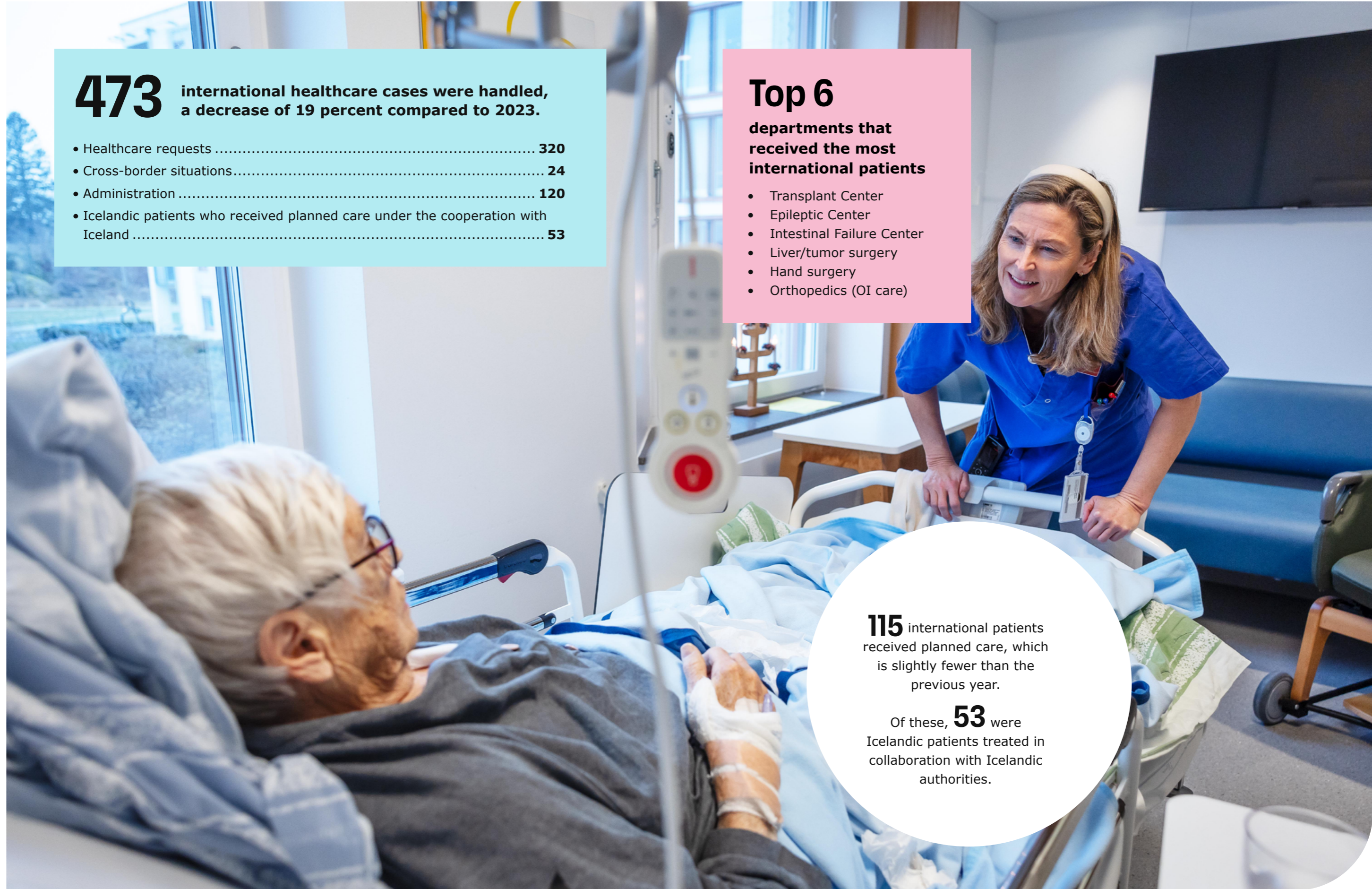
We are not quite there yet, and work with the digitalization project remains high on the agenda.

Increased demand and interest in the highly specialized care at Sahlgrenska University Hospital

In 2024, Sahlgrenska University Hospital was consulted in more second opinions than before. Several of these were about a particular type of surgical treatment for cancer.

When Sahlgrenska provides highly specialized care to patients from abroad, it fuels innovation and improves access to advanced treatment options for people in the Västra Götaland region as well.





473 international healthcare cases were handled, a decrease of 19 percent compared to 2023.

- Healthcare requests 320
- Cross-border situations 24
- Administration 120
- Icelandic patients who received planned care under the cooperation with Iceland 53

Top 6 departments that received the most international patients

- Transplant Center
- Epileptic Center
- Intestinal Failure Center
- Liver/tumor surgery
- Hand surgery
- Orthopedics (OI care)

115 international patients received planned care, which is slightly fewer than the previous year.

Of these, **53** were Icelandic patients treated in collaboration with Icelandic authorities.

Education

Yasser dreams of opening a center for NPDs in Saudi Arabia

Yasser Khalil from Jeddah in Saudi Arabia chose to do his specialist training at Sahlgrenska University Hospital. In 2024 he became a specialist in the field of affective disorders. Now he is adding a subspecialization with another year in child and adolescent psychiatry. The dream is to open his own center in Saudi Arabia for children with neuropsychiatric diagnoses.

Why did you choose Sahlgrenska for your specialist training?

– I choosed Sahlgrenska because it's a university hospital with a strong global reputation. I have also heard very positive things about the healthcare system in Sweden. I have two brothers and a sister who trained at Sahlgrenska University Hospital for their specialties. They were very satisfied, and when they came back to Saudi Arabia they made changes based on their experience in Sweden. I want to follow in their footsteps.

Tell us about your training!

– I was a resident in the affective disorders ward and learned a lot during my time there. I'm very satisfied, both with my specialist training from Sahlgrenska

University Hospital and with my experience during my stay in Sweden.

I would not change anything in the training program, and I would recommend my colleagues to come to Sweden and do their training here.

What are you doing today?

– I have chosen to continue my subspecialty in child psychiatry at Sahlgrenska University Hospital, which I have a great interest in.

What do you wish for in your future?

– The program has lived up to my expectations. My dream is to open a center in Saudi Arabia that can provide the best possible support for children and teens with neuropsychiatric conditions.



Training neurosurgeons in Sierra Leone is making a difference

Sierra Leone, with its population of more than 7 million, has a shortage of neurosurgeons – the first ones will graduate in a few years. Magnus Tisell, a neurosurgeon at Sahlgrenska University Hospital spent a week there in the spring of 2024, performing several complex operations together with local colleagues and a colleague from Karolinska University Hospital.



Magnus Tisell, neurosurgeon at Sahlgrenska University Hospital, together with the mother of a child who had surgery for a complex meningeal hernia.

Few resources. Constant problems with access to medical examinations. A lack of specially trained staff and functioning instruments and equipment makes it difficult to carry out certain operations independently. A reality that is all too common in many sub-Saharan countries.

Sierra Leone is one of the biggest countries in the world that lack neurosurgeons. Magnus Tisell spent a week in Freetown, Sierra Leone, leading a training program together with Ulrika Sandvik, a pediatric neurosurgeon from Karolinska. The local healthcare services selected a number of patients in need of advanced neurosurgery to be operated on during the week, with the help of local health professionals.

– They make a selection and we have the final say on whether an intervention is feasible. The assessment should be based on whether a reasonable result can truly be expected, said Magnus Tisell when he was in Freetown.

Magnus is also chairman of the non-profit organization Swedish African Neurosurgery Collaboration (SANC).

Smaller safety margins

The first ever keyhole surgery in Sierra Leone, two meningeal hernias and five spinal



Magnus Tisell, neurosurgeon at Sahlgrenska University Hospital, Ulrika Sandvik, pediatric neurosurgeon at Karolinska University Hospital and professor Enoch Uche from Enugu Teaching Hospital in Nigeria.

Photo: Private

cord malformations were scheduled.

– The biggest difference in my everyday life as a doctor in Sweden is that these patients are in much worse condition by the time they are operated on. This in turn means a greater risk during the procedure itself. All safety margins are smaller.

– Power cuts are common, as are infections and blood shortages. So I have to be extremely flexible. Although we select patients for surgery before arrival, things change all the time on the ground.

Direct impact on peoples lives

In a few years, Sierra Leone's first neurosurgeons will graduate. Swedish

neurosurgeons want to help reach the primary goal of building a clinic where local healthcare providers can perform neurosurgical procedures independently.

Augustus Caulker will graduate as a neurosurgeon in 2027. He believes that working with SANC has a direct impact on people's lives in Sierra Leone. Before the arrival of the team from Sweden, the hospital went on national radio to search for people in need of medical care. As a result, several previously unknown cases were identified. Unfortunately, several of them were so advanced that they could not be operated on.

Operating alongside experienced neurosurgeons also inspires doctors in

Sierra Leone to further their training.

– Just interacting with the Swedish neurosurgeons allows us to better understand how to make a neurosurgical diagnosis, how to read CT scans properly and to determine which cases should be operated on and why. It also lets us know when surgery is not recommended, says Augustus Caulker.

When asked how he sees neurosurgical care developing in Sierra Leone in the next 5–10 years, Augustus replies: I have no bigger dreams than to help relieve pain and help train more people. Because there are so many cases, I will still be in need of partners with more experience.

Employer support is important

For Magnus Tisell, it is important that Sahlgrenska University Hospital as an employer encourages its employees to get involved internationally. He cites Oslo as an inspiration, which has a long history of leading projects with healthcare services in

low- and middle-income countries.

– What do you want to do with your life? You want to make a difference. To see how your knowledge is spread. It's inspiring to teach a new technique and see it passed on, helping even more people down the line.

– It's also a learning experience. While training is important, the insights and experiences you gain are just as valuable to your own clinical work in Sweden.

– You are not only exposed to a different healthcare environment, you also encounter and treat conditions that are uncommon in Sweden. These are often powerful experiences – for better or worse – but they develop you both medically and personally, Magnus concludes.

Text: Paulina Sarbinowska

This article was published in Sahlgrenska University Hospital's digital magazine Sahlgrenskaliv in March 2024 – <https://sahlgrenskaliv.se/utbildning-av-neurokirurger-gor-skillnad-i-sierra-leone/>

Facts about SANC

The non-profit organization Swedish African Neurosurgery Collaboration (SANC) was founded in 2018 by, among others, Magnus Tisell, neurosurgeon at Sahlgrenska University Hospital.

Through collaborative training efforts, healthcare professionals from Sahlgrenska and other Swedish hospitals are helping to build advanced neurosurgery programs in Africa. Measuring and monitoring the impact of local healthcare efforts is an important part of this.

In 2024, the neurosurgery project was awarded funding from Sahlgrenska International Care. It aims to make it easier for healthcare professionals at Sahlgrenska to go abroad, and for international staff to receive training here.

For more information, contact Sahlgrenska International Care.

[Read more about SANC \(Sanc.se\)](https://sanc.se)

Magnus and Ulrika in Freetown: "It feels extremely important"



Watch the video where Magnus Tisell and Ulrika Sandvik are interviewed about the training initiative.

[Swedish doctors train healthcare professionals in Sierra Leone \(TV4play.se\)](https://www.tv4play.se)

Observership with SU

In 2024, Sahlgrenska University Hospital has had an increased focus on providing support to organizations and employees in connection with various types of exchanges and fellowships. These include the hospital's aim of having incoming and outgoing fellowships with countries such as Rwanda, South Africa and Thailand.



Aid

Operating tables from Södra Älvsborg Hospital get a new lease on life in Ethiopia

In May 2024, medical technician Urban Tapper moved his workshop from Södra Älvsborg Hospital in Borås to Arba Minch in Ethiopia

– For two weeks we were on site installing operating tables in their newly built hospital, says Urban.

The trip was made possible through a collaboration between Sahlgrenska International Care, SIC, and Human Bridge, an aid organization that works with Södra Älvsborg Hospital and others to reuse healthcare equipment.

Urban traveled with his colleague Gunnar Nestor, a medical technician at Örebro Hospital. During their time in Arba Minch, they installed seven operating tables and trained other healthcare workers.

– We held a training session for a number of doctors where we demonstrated the accessories for the operating tables, and how to assemble and use them. They said that it is so valuable for them to have well-functioning equipment, says Urban.

He started as a medical technician at Södra Älvsborg Hospital in 1988 and has been

involved in aid work for the past 25 years.

– I have been on several aid missions to West and East Africa. This has mainly involved assembling and installing operating equipment, tables and lights in hospitals. But also simpler equipment in health



Urban is a medical technician at Södra Älvsborg Hospital and takes care of used surgical equipment.

Photo: Pernilla Lundgren

centers and maternity centers, says Urban.

Today he is responsible for the storage room where surgical equipment end up when they expire.

– Swedish hospitals tend to upgrade surgical tools every 8 to 10 years to keep up with innovation. But in many cases, the older equipment is still in great shape and can continue to serve its purpose for many more years. In the hospitals I've visited in Africa, they've had no equipment or they've bought cheap stuff from China, so this makes a big difference, says Urban.

"You often have to be a bit creative"

Conditions differ in several ways compared to Sweden. It can be everything from access to trained staff to technology and equipment.

– For example, in Arba Minch, there were

no pallet trucks for the operating tables, so six porters instead had to lift the 250-kilo table column with the help of logs, says Urban and continues:

– Another example was the floor, which had been poured quite roughly and was not flat enough to support the operating tables. We had to put spacers, small pieces of sheet metal, under the tables to make them level. You often have to be a bit creative, says Urban.

He advises others interested in working in aid to get in touch with Human Bridge, the Red Cross or any of the other aid organizations.

– There is a great need for expertise and I always feel a joy when I have been away and delivered. I know it is appreciated and that it will make a difference, says Urban.

Text: Ebba Strömqvist



As there were no pallet trucks available, six people had to take turns carrying the 250-kilo operating table column.

Photo: Urban Tapper

Three years since the invasion – she helps Ukrainians on the move and on the ground

When Russia invaded Ukraine three years ago, Katja Blagodyr, a doctor in Gothenburg, took immediate action. She gathered volunteers and organized buses carrying food and clothes down to the border, and to help evacuate people from there. Today, the organization HUG, Help Ukraine Gothenburg, has 17 employees and the need for help has changed.

Katja Blagodyr had a feeling that something was about to happen. When she turned on the news on 24 February, 2022, she understood what was going on: Russia had launched a full-scale invasion of Ukraine.

– I had had a sense of unease, that we are heading somewhere that will be felt. I'm an intuitive person and my intuition was very strong in the days leading up to it, she says.

Katja Blagodyr acted immediately. She had been involved in the care of refugees in 2015 and knew how to organize, she also knew that the church often has available facilities and can open its doors to people in need.

– The first thing I did was to contact churches where I lived, in Masthugget. I had my hands full with a baby and a toddler, so being close to home was the only option that made sense logistically.

Volunteers began gathering

Two days later, hundreds of volunteers flocked to the Sjömanskyrkan church and got to work collecting food, prams and warm clothes and more.

Soon after Katja Blagodyr founded

the aid organization HUG, Help Ukraine Gothenburg, together with six other Ukrainian women.

– In the first few weeks, it was all about evacuation, millions of people were at the border and needed to move. We evacuated people with seven buses, before Sweden officially accepted refugees from Ukraine.

From the very beginning, HUG has worked in two areas: helping Ukrainians in the Gothenburg area and supporting Ukrainians who remain in their home country.

Sahlgrenska supports

Every week, a bus travels from Gothenburg to Ukraine filled with everything from medical supplies, clothes, food, hygiene items, survival kits and medicines to power banks and dog food.

– Perhaps it's because we are women, but we chose very early on not to focus on the military, but only on humanitarian aid. It's equally important, and the suffering has been enormous.

Today, HUG has 17 employees and a number of partners, including Sahlgrenska University Hospital, which provides



It's important to stay informed about what's happening in the world today, says Katja Blagodyr – and to be part of it. The time we have ahead of us is crucial. You can find your own ways to be part of this journey. No matter how tired you are, you need to find your way. We are moving forward, period.

Photo: José Lagunas Vargas

medical supplies and equipment such as defibrillators and dialysis machines.

– Sahlgrenska International Care has supported healthcare in Ukraine at all levels – from frontline stabilization points to rural health centers, says Katja Blagodyr.

Dealing with trauma

In Gothenburg, HUG now has a wide range of activities in three different locations, including activities for young children, language courses, music activities for young people and support programs for people looking for work.

In the three years that the aid organization has been running, the needs of

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Sahlgrenska International Care has supported healthcare in Ukraine at all levels – from frontline stabilization points to rural health centers.

the Ukrainians in Gothenburg have changed, says Katja Blagodyr.

What started as a response to basic needs like food, clothing, housing and jobs has evolved – now, the biggest need is support for those dealing with trauma.

– This problem is starting to catch up now. This sense of unpredictability in their lives can make it tough to adjust and fully integrate.

The uncertainty has taken its toll, and now the traumatic experiences they have brought here are becoming more apparent. We hear many sad stories.

A heavy reality

HUG is currently running a project where over 300 participants will meet with Ukrainian-speaking psychologists.

– One in three participants has had thoughts about suicide. It is a heavy reality. Much more is needed from the whole community, we need more commitment and greater efforts. Support is now needed at a much deeper level.

Katja Blagodyr was born in Ukraine and

lived there until she was 12 years old. She remembers the strong sense of community – but also how her father, an engineer, was paid for six months' work in the form of a sofa.

Ukraine is a country of contrasts, she says. There are both highs and lows, it's a country full of culture – but also of suffering.

– Not knowing whether you will have food on the table or pay the bills has made us very united. We had to live close to each other to survive.

A part of change

Katja Blagodyr became a doctor just like her mother, and today she works part-time in healthcare and part-time with HUG. Her driving force is that she wants to be involved in shaping the future.

– I think it's our common responsibility to be part of the change. It's easy to fall into a darkness, to sink into it. But I believe that we are all part of the change that needs to happen to prevent history from repeating itself. We have seen this in every generation

that has survived a war. I want to be part of that change, and I truly believe in it. That is what keeps me going.

Small glimmers of hope

There have also been some signs of hope in last three years. One of these is the fact that she has never seen so many Swedes get this engaged in anything before. She has noticed how companies are joining forces and that there is a strong desire for cooperation between civil society, politics and industry.

Despite everything, Katja Blagodyr is hopeful about the Ukraine of tomorrow. She

believes that what is happening now could be the start of something new.

– It is the generation that is currently living through war – and realizing what a huge tragedy and disaster it is – that can come up with solutions to ensure that we never have to go through this again.

Text: Elin Widfeldt

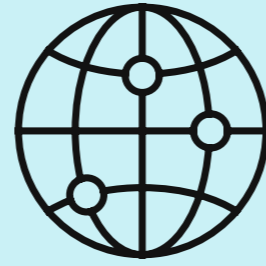
The article has previously been published in VGR Fokus <https://vgrfokus.se/2025/02/tre-ar-sedan-invasionen-hon-hjalper-ukrainare-pa-flykt-och-plats/>

Ukraine and Help Ukraine Gothenburg

- Region Västra Götaland is one of Help Ukraine Gothenburg's partners, along with several other major players such as Volvo and the Church of Sweden. VGR contributes mainly via Sahlgrenska International Care, which provides equipment and expendables.
- Help Ukraine Gothenburg (HUG) has 17 employees with the help of EU grants and contributions from the City of Gothenburg and various foundations. 7 of the staff are psychologists.
- HUG runs settlement programs to get people into work, provides psychological support for children, young people and adults, arranges language classes and organizes various activities.
- Around 3,000 Ukrainians participate in HUG activities in Gothenburg.
- HUG accepts grants and donations from private individuals, public organizations and businesses. This has helped the organization to donate materials such as 120 emergency vehicles – mainly ambulances – to Ukraine. These are usually bought at auction.
- Katja Blagodyr works at Varberg Hospital as a senior surgeon. She previously worked at Sahlgrenska University Hospital.



Increased international cooperation



Sahlgrenska University Hospital has a strong international commitment. Many activities are underway to increase and coordinate the hospital's internationalization, under the leadership of the steering group for internationalization. In this section you can follow some of our employees around the world.

Sharing radiology expertise in Botswana

Anna-Karin Bruno, a radiology specialist at Sahlgrenska University Hospital, who spent a month last autumn at Princess Marina Hospital in Botswana's capital, Gaborone.

How did you end up going to Botswana?

– I have always been interested in international affairs and to work abroad. When I heard a Swedish pediatrician talk about her year in Gaborone, I got in touch with her, who then put me in touch with an American radiologist working there. He helped me with all the paperwork and when he was going to be away from the hospital for a few weeks, I was able to fill in for him.

What did you do at Princess Marina Hospital?

– I was a supervisor for a group of resident doctors. We looked together at both plain X-rays and CT scans, and afterwards I signed and approved the report.

What is your experience of working in the hospital, what are the similarities and differences to Sweden?

– There was a lot that was similar but also a lot that was different. In the hospital in Botswana, for example, they don't have an image storage system like we have in Sweden. Instead, the images are stored on CDs and given to the patient. Having an image storage system is a major cost.

What is your main takeaway from your stay in Botswana?

– It was great and exciting to work with the residents there and to gain experience of a different disease panorama. It felt good to be able to contribute to their education, to make a difference. Botswana is an exciting country to discover. My family came along and also enjoyed themselves very much.



Picture from the work in Gaborone, with Anna-Karin Bruno and two of the residents, Dr. Molaodi (left) and Dr. Kahuma (right).

Photo: Private

Do you have any tips for anyone thinking of doing something similar?

– Get in touch with Sahlgrenska International Care (SIC) as early as possible.

Sahlgrenska University Hospital has long-standing collaborations with countries like Thailand and Rwanda, which helps simplify the process if you want to go there.

If you want to go elsewhere, you can

still get tips and advice from SIC. Among other things, they organize international evenings where employees who have been on exchanges talk about their experiences.

Remember to plan ahead, as the process takes time. And don't give up, it can be tricky to make contact at first but it's worth it, if you're interested you should definitely go!

Text: Ingrid Fredriksson

Cooperation greements on cancer research in Washington

Annika Baan, Development Manager of the Sahlgrenska Comprehensive Cancer Centre, represented Sahlgrenska University Hospital in Washington when cooperation agreements on cancer research and care were signed.

Annika attended the US-Sweden Cancer Summit in Washington in March 2024, where Sweden and the United States renewed a bilateral cooperation agreement on cancer research and care. In connection with the signing, Annika participated in a panel on "Implementing Research and Innovation in Health Care Practice".

What was your role in the delegation?

– The Ministry of Health and Social Affairs and the Swedish Embassy in Washington DC invited Sahlgrenska University Hospital to send an oncology nurse to highlight advances in cancer research, prevention, diagnosis and treatment.

– I got to be this representative in the expert group, which was a lot of fun. It was a mix of me as a representative from the healthcare sector, as head of clinical trials in oncology and as development manager at Sahlgrenska CCC, where the focus right now is, among other things, collaboration within the EU. This includes research and innovation in cancer prevention, diagnosis and treatment. Being part of the delegation also provided an opportunity to network for future national and international cooperations.

What does the agreement mean?

– Cancer is one of the deadliest diseases in the world, but great progress is made every day thanks to advances in research. As a university hospital, we have a key role in developing cancer care and collaborating nationally to strengthen healthcare exchange.

What topics did you raise during the panel discussions?

– We need new platforms and partnerships to develop and improve healthcare, and patient involvement is incredibly important in this regard. One challenge is the sharing of health data between countries, and how we can and should use the data. Another challenge



Annika Baan participated in a panel discussion on the implementation of research and innovation in healthcare.



Annika Baan together with Minister for Health Acko Ankarberg Johansson and representatives of ANA – American Nurses Association.

Photo: Kate Boston, American Nurses Association

is that in the future we will need new skills to interpret new information and work towards developments in precision medicine and precision health.

It's about reaching out and making it

possible for patients to participate in clinical trials, no matter where they live. Not being able to effectively reach minority groups is a challenge that is often discussed in the US.

Anything else you will take away from the trip?

– I got the opportunity to meet with the Minister for Health Acko Ankarberg Johansson at the American Nurses Association, where I talked about the role of contact nurses in cancer care in Sweden.

Text: Karin Markhede

More about the agreement

The agreement was signed by the minister for health and the US Deputy Secretary of Health and Human Services Andrea Palm at the US-Sweden Cancer Summit 2024, held at the Swedish Embassy in Washington DC in March 2024.

This article was published in Sahlgrenska University Hospital's digital magazine Sahlgrenskaliv in March 2024 <https://sahlgrenskaliv.se/halla-dar-annika-baan/>

Sustainability report

Our focus area: Development of care – locally and globally

Sahlgrenska International Care contributes to a more sustainable healthcare – on both a local and a global level. Through international collaborations, responsible resource management and investments in projects that promote global health, Sahlgrenska International Care strives to improve care in various ways for patients and employees in Västra Götaland, Sweden and in our collaborating countries.











Goals and result





This table shows what Sahlgrenska International Care has accomplished with our partners in the past year and how they contribute to our own sustainability goals, which in turn are linked to VGR's sustainability goals and selected global goals.




- Green – This year's goal achieved
- Yellow – This year's goal partially achieved
- Red – This year's goal not achieved

Goal	Results year 2024 (2023)	Status	What we have done	Contributes to VGR's goals	Contributes to global goals
Contributing to specialist healthcare expertise in other countries	<p>Number of SMTP/SDTP participants who work in their specialty in their home country after having completed training No aggregate statistics available</p> <p>Number of doctors and dentists per specialist area An/Op/ICA SU/S: 1 Urology: 1 Medicine, Geriatrics och Emergency Department (MGAÖ): 1 Plastic surgery: 1 Eye care: 1 Neuromedical care: 1 Child psychiatry: 1 st Psychiatry for affective disorders: 1 Orthodontics: 7 Periodontics: 1 Endodontics: 1</p>	●	<p>Graduates of our specialist training programs often continue their training in their home country, or in a country other than Sweden. We are working on developing a systematic follow-up to this. Currently, exit interviews are carried out at the end of training.</p> <p>Through our SMTP/SDTP training programs, SU helps increase the number of specialists globally. It also sparks innovation and fosters greater cultural understanding by showcasing new ways of providing care.</p>	Good health and well-being	<p>SDG 3.8</p>

Goal	Results year 2024 (2023)	Status	What we have done	Contributes to VGR's goals	Contributes to global goals
<p>An education that attracts candidates from more countries</p>	<p>Number of applicants per country 75% Saudi Arabia 25% The Nordic countries</p>		<p>The Specialist Dental Training Program (SDTP) continues to see an influx of candidates from a large number of countries, mostly from Europe.</p> <p>The Specialist Medical Training Program (SMTP) has only applicants and admissions from Saudi Arabia. The limiting factors here are the facts that the training is in Swedish, which may affect SU's international competitiveness, and that the market for specialist training programs is limited. Therefore, SIC continues to invest in developing offers such as fellowships. These are shorter-term commitments that are expected to attract candidates from more countries.</p>	<p>Equality and human rights</p>	<p>SDG 3</p> 
<p>An SDTP/SMTP training that promotes awareness of equality and human rights</p>	<p>Number of those who have completed their training who feel that it increased their knowledge of equality and human rights in healthcare. Statistics not available</p>		<p>Gender equality and human rights are part of the SMTP and STDP programs. To further strengthen the program, an MRI workshop has also been launched with the help of researchers and experts at VGR. The MRI workshop is mandatory for dentists and the aim is that it will eventually be mandatory for doctors as well.</p>	<p>Equality and human rights</p>	<p>SDG 4.8</p> 

Goal	Results year 2024 (2023)	Status	What we have done	Contributes to VGR's goals	Contributes to global goals
<p>Increase accessibility for international patients</p>	<p>Number of patients by area of care (top 6) Transplant Center: 20 Second opinion: 18 Transplant-related care: 15 CARE/Hand Surgery: 10 Skandion: 9 Women's health services: 8</p> <p>Number of patients by country Iceland: 53 (69) Norway: 27 (28) Denmark: 6 (10) Finland: 5 (6) Spain: 3 (5) USA: 3 (4) Other countries: 14 (13)</p> <p>Number of international care cases per processing category 464 (582) Se total list on p. 10.</p>		<p>Transplantation has been the most requested area in the past year.</p> <p>There has been a slight decline in demand for specialist care. The distribution of concentrated specialist care in the North continues to be even, which contributes to a more sustainable healthcare.</p> <p>Care cases; in 2024, SIC care coordinators handled 464 cases, which is 20.3% fewer cases than the previous year.</p>	<p>Equality and human rights</p>	<p>SDG 3</p> 
<p>Contribute to the strengthening of health systems in low- and middle-income countries</p>	<p>Breakdown by country/continent 58% Africa 30% Ukraine 12% Other countries</p>		<p>Aid to Ukraine remains high. Much like the previous year, our partners continue to focus on Ukraine.</p> <p>VGR's aid is further channeled to sub-Saharan Africa, where most of our long-term partnerships are located. In 2024, VGR organized an effort in Ethiopia that included material aid and training.</p> <p>Other countries that received aid were Romania and Turkey.</p>	<p>Good health and well-being</p>	<p>SDG 3.8, 3.C</p> 

Goal	Results year 2024 (2023)	Status	What we have done	Contributes to VGR's goals	Contributes to global goals
<p>Develop new collaborations with healthcare systems in other countries that promote global health.</p>	<p>Number of completed projects 4 (4)</p> <p>Number of new agreements containing wording on equal rights and non-discrimination 1 (1)</p> <p>Number of new collaborations per healthcare area 3</p> <p>Number of international development projects or initiatives funded by SIC's investment budget 15</p> <p>See the complete list in the statistics section</p>	<p>●</p>	<p>Example: In 2024, SIC carried out a training program in Sierra Leone with the aim of advancing preoperative neurosurgery there.</p> <p>In collaboration with SANC, two Swedish neurosurgeons trained participants on site.</p> <p>Continued cooperation with CHUK, the University Hospital of Rwanda.</p> <p>New partnerships: In-depth dialogue for expanded cross-border cooperation in the Nordic region. The aim is to strengthen specialist care for these patient groups.</p>	<p>Good health and well-being Equality and human rights</p>	<p>SDG 3.8, 3.C SDG 4</p>  
<p>Increased digitalization and secure information sharing</p>	<p>Number of referrals that are processed digitally 90 %*</p> <p>*Receiving referrals from external parties</p>	<p>●</p>	<p>The work to digitize the administrative process around referral management continues.</p> <p>The number of digital consultations has also increased.</p>	<p>Low climate impact</p>	<p>SDG 12.6</p> 
<p>Developing digital forms of training to reduce the carbon footprint</p>	<p>Number of completed digital trainings 0</p>	<p>●</p>	<p>Pending.</p>	<p>Low climate impact</p>	<p>SDG 12.6</p> 

Goal	Results year 2024 (2023)	Status	What we have done	Contributes to VGR's goals	Contributes to global goals
Contribute to a more responsible resource utilization through increased reuse of medical equipment	<p>Donated key products (beds, wheelchairs, ultrasound machines). Beds: 421 (383) Wheelchairs: 1009 (916) Ultrasound machines: 30 (10)</p> <p>Donated products by category (Basic equipment, advanced equipment, and aids) Basic equipment: 40 % Advanced equipment: 15 % Aids: 35 % Other: 10 %</p> <p>Number of follow-up trips with partner organizations 2 (Ethiopia, Turkey)</p> <p>Prominent donations or contributions 30 portabla defibrillatorer från SU</p>	●	<p>We have seen a steady and continuous flow. In 2024, the reuse of medical equipment increased compared to the previous year. The number of collected wheelchairs was particularly high, increasing by 10.1%. The number of hospital beds increased by 9.9%.</p> <p>Sahlgrenska University Hospital made one notable donation – 30 mobile defibrillators that went to Ukraine.</p> <p>Two follow-up missions have been carried out, one to Ethiopia and one to earthquake-affected south-east Turkey.</p>	Resource-efficient and toxin-free	SDG 12.6 
Enhance the monitoring of sustainability efforts	<p>Number of sustainability reports 3 (2)</p> <p>Impact of efforts on healthcare professionals/residents/healthcare locally and globally Statistics not available</p>	●	<p>2024 is the third year that SIC has reported its work with sustainability in an integrated annual and sustainability report.</p> <p>Two follow-up missions have been carried out and various sustainability aspects have been studied on the ground in Ethiopia and Turkey.</p>	Good health and well-being Equality and human rights Resource-efficient and toxin-free	SDG 12.6 
Sustainable travel	<p>Carbon offsetting for international flights 44 tkr</p> <p>Breakdown of transport modes for business trips within the Nordic region Train: 100 %</p>	●	<p>SIC carbon offsets all international air travel for its own staff, other SU employees and visitors from low- and middle-income countries in SIC-sponsored projects. All domestic trips were made by train.</p>	Low climate impact	SDG 12 
Develop partnerships that promote sustainable development of healthcare internationally	<p>Participation in national and international arenas 1</p>	●	<p>SIC represented SU at the workshop "Support to Ukraine" organized by Swecare/Sweco.</p>		SDG 17.6 

Sustainability analysis

SIC is committed to long-term sustainability. It is an ongoing journey with the aim of making healthcare even more sustainable. The concept of sustainability consists of three parts: economic, social and environmental. These three elements all have their challenges and need to be considered in our operations and activities.

An important aspect is to monitor and evaluate the impact of our actions on health professionals, people and the healthcare sector – both locally and globally. In 2024, the follow-up of VGR's aid programs in recipient countries has been realized through two follow-up trips with our partners. The trips ensured us that donations are used effectively, that partnerships on the ground are functioning well, and that local healthcare systems are part of the process.

To further increase transparency, SIC has also started to integrate the sustainability aspect into the reporting in 2024, when a new agreement was signed with Sweden's largest collection organization for textiles, Human Bridge. SIC and Human Bridge have been working together for 15 years.

In the coming years, SIC needs to continue to develop a better overall picture of how our training programs (SMTP/SDTP) help increase specialist healthcare skills in other countries. Improving data collection methods and capturing the deeper, qualitative aspects will be essential in taking this work further. For short-term efforts such as fellowships, exchanges and similar activities, a checklist has been in place since 2023 to analyze and assess different aspects of the operation's sustainability.

Changes in the world affect access to care. As an international player, we closely monitor developments in the world around us. The factors that have had a particular impact in 2024 are:

- Uncertainty in the world following the US presidential election.
- The Swedish government's aid reform agenda and Ukraine as the largest aid recipient.
- Regulatory changes.

We are the first point of contact for international patients who come for planned highly specialized medical care at Sahlgrenska University Hospital, and we ensure that patients are informed about their rights and obligations.

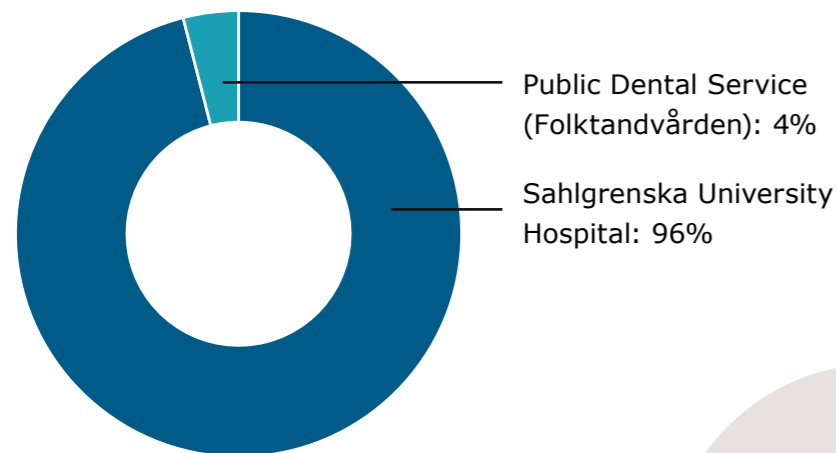
In the past year we have regularly updated and increased our knowledge of guidelines in order to provide the best information and guidance. By increasing the availability of certain care at SU for international patients, we help create a more equal care, based on what is possible under current regulations. The challenge is that there is sometimes room for interpretation in these matters, which is why it is particularly important to regularly stop and make ethical and legal considerations together with experts along the way.



Statistics

Total turnover: 62,4 million | Result: 5,9 million

Turnover – share of sales



Number of days of care:
469

Planned care

115 patients received planned care at **150** occasions through SIC. Out of these, **91** received care in collaboration with Island, Norway and/or Denmark.



SMTP/SDTP – women/men



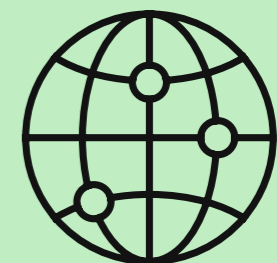
Climate compensation

Account of climate compensation for booked international air travels.

Destination	Amount (SEK)
Domestic	1 000
Nordic countries	1 000
Europe	2 000
Other	40 000
Totalt	44 000

International projects/activities that received SIC funding

- Scholarship Thailand (outgoing and incoming, residency exchange)
- Sponsorship A delegation trip to Washington was organized in connection with the signing of a new cooperation agreement in cancer research and cancer care
- Sponsorship participation in SCCC roundtables
- Sponsorship participation in the MIT program IDEA"2
- Scholarship Rwanda (outgoing and incoming)
- Scholarship Thailand outgoing resident doctor
- Scholarship Botswana outgoing specialist doctor
- Sponsorship marketing trip to Stellenbosch University/ Tygerberg Hospital in South Africa together with Sahlgremska Academy International Office
- Sponsorship eHealth delegation trip to Berlin
- Sponsorship group visit from Riga University Hospital to SCCC
- Sponsorship study visit of healthcare professionals from Ukraine together with ASFUDS
- Sponsorship of upcoming state visit to Singapore for hospital director and two experts
- Scholarship UK, two outgoing specialist doctors



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