

Thank you so much, Jennifer, for this great lecture about the Birmingham Well-being Center, a really inspiring example from abroad of how we can organize our university in an interdisciplinary way and work on urban challenges for well-being. Let's connect it to what we've done in Leiden so far and how we can collaborate on common targets.

But let me start from a personal perspective. My grandfather was a general practitioner who, in the middle of the last century, wrote scientific books about the role lifestyle played in our health. He started his own clinic where he conducted research about how a specific lifestyle and diet affected the disease course of his patients with multiple sclerosis - you can still find the 'Evers'-diet in some Dutch or German textbooks. Although he was definitely not always successful with this approach, he obviously was a pioneer who focused on prevention and the need for a healthy environment and society.

Today in many ways we live in an even more unhealthy society, where we are continuously exposed to unhealthy food, smoked air, and lack of exercise. What Jennifer already showed for Birmingham, is unfortunately also the case in the Netherlands: people with lower education and in more disadvantaged areas die 6 years earlier, and live on average 15 years in poorer health in the Netherlands in comparison to people with higher education and in less disadvantaged areas; but our societies are also challenged by increasing global inequality due to the climate crisis or loss of trust in public authorities, as seen in the debate on vaccination during the COVID-19 crises. These are all factors that have a huge impact on well-being for all of us, including our students and the younger generation (of whom almost 50% developed psychological problems during the Corona crisis) because they worry about their future and the world we are living in today. Very different from the world of my grandfather, but as you see, what he was talking about has become even more relevant.

In view of this urgency, the positions of the academic institutions are changing nowadays. They feel the need to contribute to a rapidly developing society where urgent health issues and societal problems have to be solved, assisted by opportunities of fast developing technologies. There is a strong intention to work more closely together and to learn from each other – between disciplines and universities and with partners outside the university.

Today at the opening of this academic year, I would like to share some examples about health and well-being at Leiden University. And I am very happy to introduce our new initiative of the *Healthy Society Program* with our LDE and Medical Delta partners Delft and Rotterdam, a great new step to organize our interdisciplinary programs and even more closely work together in the area of health and well-being.

Let's start with some local initiatives.

For example what we are doing for the wellbeing of our students and staff. In line with the international *Healthy and Caring University* networks, we launched the *Leiden Healthy University* initiative several years ago and now structurally pay attention to the physical and mental well-being of our students and staff members, such as by regular mental health screenings of our students or the organization of activities during the well-being weeks. Perhaps even more important, we were one of the initiators of the Dutch Healthy University network together with other university partners that have already joined or are planning to do so.

Of course, we want not only our students and staff have to benefit from our program, but also the citizens of Leiden. Over the last year, our city and municipality has formulated great ambitions in the *Leiden Prevention Agreement*, to work closely together with our university, medical and health centers and many other partners, to facilitate a healthy lifestyle for all citizens. And there are plans to intensify these local collaboration as part of the *Leiden Healthy Society Program*, where many successful initiatives are already ongoing. Let me give you an example:

In specific neighborhoods where social inequalities play a significant role, such as in the *Stevenshof* in Leiden, we are working together with our colleagues at the medical center in the *BOX* project. In this project, patients with heart disease or diabetes receive a free box with health tools (such as a blood pressure device or pedometer) to make it as easy as possible for them to start and maintain a healthy lifestyle.

Much of the knowledge applied in the *BOX* project was also the result of our national *BENEFIT* initiative. This is a large private-public network that focuses on a healthy lifestyle for patients with heart disease after their rehabilitation – a project where we strive to integrate all the behavior change knowledge that currently exists, for example that it is important to make a healthy lifestyle as easy, accessible and attractive as possible.

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Leiden university and its medical center are also very well-known for the unique interdisciplinary collaborations in the *Health Campus the Hague*. In specific stimulation areas, such as Population Health Management, various disciplines and hospitals work together in both research and teaching; such as how to solve social inequalities in healthcare; reach the vulnerable patients; or develop common health policy across domains. Issues that are for example currently studied in a lifestyle program for patients with diabetes type 2.

On a regional level, we are really happy to benefit of the long-term collaborations in our *Medical Delta and Leiden-Delft-Erasmus programs* where 5 universities and university medical centers closely work together. Many successful initiatives have been launched, let me mention an example.

In the *Health Check* program, a broad variety of data are collected in patients with heart diseases and diabetes, including genomics, metabolomics, and environmental and behavioral data. With support of artificial intelligence, a so-called Digital Twin is developed based on the participant's own personalized data, to help patients and citizens to optimize their own lifestyle program.

As part of these overarching programs, the various university centers involved also still have their own priorities. We see this, for example, in initiatives such as the *Healthy Start* or *Healthy Aging* that capture the challenges in question during the different lifestyle cycles; programs that can support each other in complementary knowledge.

Also at a national and international level, Leiden offers a great starting point for many scientific entrepreneurs of new initiatives.

Such as the *Lifestyle4Health* program or the *National eHealth Living Lab*, which coordinate all national lifestyle and eHealth developments, respectively.

Another example is the *Digital Society Health & Well-Being* program, in which we work together with about 10 universities on artificial intelligence developments for a healthy society.

Obviously, we are also very pleased to be part of the international network of the *EUNIWELL* Universities, where health and well-being are a global top priority. We look forward to tackle these challenges together with other international partners, such as Birmingham.

To make use of the complementary knowledge that has been built up by different universities and cities in our region, I am very pleased ...

... that both the Medical Delta and Leiden-Delft-Erasmus board have taken the decision to start and support the new *Healthy Society Program*.

The program allows us to organize and facilitate collaboration and networks between a large number of existing health projects, to coordinate and collaborate on all the successful initiatives out there, together with partners such as the province South Holland, universities of applied sciences, and many other public and private partners.

This will not only offer possibilities for upscaling successful initiatives in specific local and regional contexts - for a strong societal and economic impact. It will also lead - for our researchers - to use of common facilities and new funding opportunities, and - for our students - to the development of new teaching opportunities, such as innovative, interdisciplinary minors between Leiden, Delft and Rotterdam on Healthy Society topics, as well as - for our citizens - to hopefully a more healthy life, such as seen in the healthy living program in the Stevenshof neighborhood that have been shown to be able to even cure patients from diabetes type 2.

So, we are very much looking forward to the international launch of the Healthy Society Program next year, as part of the events celebrating *Leiden European City of Science*.

Students, staff members, and partners of our university: luckily, many of us feel the urge and necessity to work together to build a healthy society where our children feel safe and happy and have trust in their own future. However, in the end, it comes down that we all practice what we preach. I can imagine that you are particularly interested in asking some questions during the roundtable to our executive board members here in the room - Hester, Annetje and Martijn - for example about their healthy behavior, like the number of walks, work patterns or fitness hours. And I am sure that - although they might be motivated for a healthy lifestyle - they also suffer, like we do, from too many work hours or even enjoy some unhealthy habits.

So, let me close now by coming back to my grandfather's life: I must confess that in his personal life, he loved drinking wine and smoking cigars during lively discussions, alongside his healthy habits. He lived a happy life

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well into his 80s and always emphasized the quality and joyfulness of life – in the end, this might be the real secret to a truly healthy society.

Thank you for your attention.