UK Research and Innovation

Department of Health & Social Care

UKRI policy fellowships 2027

Fellowship position

Fellowship title:

DHSC less healthy commodities fellowship

Fellowship type:

Core policy fellowship

Host organisation:

Department of Health and Social Care

Host team:

Primary Prevention Strategy Team, Health Improvement Directorate.

The Primary Prevention Strategy Team, within the Health Improvement Directorate, leads work to prevent ill health before it occurs and support the government's ambition to shift the health system from treatment to prevention. The team works closely with the relevant policy teams and helps set strategic direction on the department's work to reduce the major drivers of preventable illness, including obesity, tobacco and vapes, alcohol harms, air pollution, gambling and other less healthy commodities, helping to improve population health and reduce health inequalities.

Academic discipline/s:

Public health, epidemiology, behavioural science, economics, statistics.

Summary:

An opportunity to generate high impact evidence on less healthy commodities (including smoking and vaping, less healthy food, gambling and harmful alcohol consumption) to shape and support the delivery of policies which improve health, reduce inequalities and contribute to the government's priority of shifting from a system which treats sickness to one which prioritises prevention.

Policy topic:

Support DHSC's prevention agenda by generating high-impact evidence on less healthy commodities, addressing critical evidence gaps on the case for change and potential policy interventions, helping to drive progress on the ambition in the 10-Year Health Plan to shift to a system that prioritises prevention.

Research career stage:

Open to early and mid-career researchers

Fellowship structure

The fellowship is scheduled to begin on 1 October 2027 subject to security clearance requirements. The fellowship will have three phases:

- inception: duration is 3 months at 0.4 FTE
- main placement: duration is 12 months at 0.6-1 FTE
- knowledge exchange: duration is 3 months at 0.4 FTE

Work arrangements

Location requirements:

The role can be based in London (39 Victoria Street, SW1H 0EU) or Leeds (Quarry House, LS2 7UE). The host team is primarily based in London, with some members in Leeds. There may be some requirement to travel between these locations to meet other team members and attend training and development sessions (approximately a handful of times a year).

Hybrid working:

DHSC has a 60% office working requirement (proportionate to FTE) in line with the rest of the UK Civil Service. We would be content to discuss more flexible office attendance if required, at any location listed above, during the main placement phase and the inception phase.

A laptop will be provided enabling work from home or other sites, providing access to host systems.

Security clearance and nationality eligibility criteria:

Basic Personnel Security Standard (BPSS) is required, which usually takes around six weeks. We would expect the successful applicant to start the security clearance application process, with support from the host team, as soon as their fellowship has been confirmed by UKRI. Inception phase can begin before the security clearance process is completed but will be required for the main placement phase. The civil service also has nationality requirements that candidates would need to meet in order to take up the post. Please see civil service recruitment nationality rules for further information. Candidates should check these requirements before applying to ensure they meet the eligibility criteria.

Fellowship position description

The fellow will be embedded in the Department of Health and Social Care's Primary Prevention Strategy Team and will co-design a programme of policy-relevant research on less healthy commodities, including tobacco and vapes, unhealthy food, alcohol and gambling. The fellowship will support delivery of ambitious prevention commitments and strengthen the department's evidence base for future policy action.

During the inception phase, the fellow will work with policy, analytical and research colleagues to agree a focused programme that reflects departmental priorities, the live strategic and policy context, and the fellow's expertise. This phase will identify a priority evidence gap and agree the scope to undertake original research and/or analysis to address it. The precise research question and methodology will therefore be co-designed rather than predetermined. This is expected to focus on one or more of the following areas:

- leading work to develop evidence for policies and interventions to reduce the harm of less healthy commodities, supporting ambitious policy development to improve health and reduce inequalities
- explore evidence for how interventions can be implemented at different levels of government, in line with the government's devolution agenda
- identifying gaps and strengthening the evidence on health, economic and social harms associated with less healthy commodities to build the case for change

- understanding inequalities and variation in implementation and impact between populations, place and delivery systems
- horizon scanning for risks and opportunities for prevention policy

These are indicative rather than requirements to cover the full range. The fellow will also have opportunities to provide timely evidence and analysis for live policy questions, including briefings and submissions for senior officials and ministers and cross-government or stakeholder engagement.

Research activities and data access

The precise research design will be determined by the agreed focus and the fellow's methodological expertise. The fellowship is intended to provide scope for a distinct piece of original research, which may include evidence synthesis, secondary data analysis, comparative policy analysis, implementation or place-based case studies, and/or the development of practical analytical or policy frameworks. The fellow will have the opportunity to engage with a wide range of stakeholders including local and regional delivery partners, the devolved administrations, academic experts and policy colleagues.

The fellow will have access to departmental systems and relevant internal policy, analytical and research material, subject to information-governance and security requirements. They will work with analysts to identify and use suitable published and, where access can be secured, internal or linked datasets. Data availability, access approvals and feasible analytical methods will be confirmed during the inception phase.

Where relevant, the research will examine how impacts vary across socioeconomic groups, marginalised populations and places.

Outputs and policy impact

The fellow and host team will agree a proportionate set of outputs during the inception phase. Depending on the research questions, methods and policy context, these may include:

- original research or analysis addressing an agreed priority evidence gap
- an evidence review, comparative policy study or place-based case study
- a practical framework or recommendations for future research, monitoring or evaluation
- concise policy briefings and presentations for relevant decision-makers
- knowledge-exchange activities connecting policy, analytical and academic communities
- an academic or other publishable output where appropriate and subject to departmental clearance

The work will be designed for use by policy and analytical teams across the Health Improvement Directorate and, where relevant, senior officials, Ministers and the Chief Medical Officer. Findings will have the potential to support policy development, implementation, spending and legislative decisions, and longer-term delivery of the shift from treatment to prevention.

Support and embedding

The fellow sit within the Primary Prevention Strategy team, with line manager support, and supported by policy, analytical and research colleagues. They will be fully embedded in the team, with appropriate information technology equipment, access to internal processes and opportunities to participate in senior policy discussions. The placement will offer direct insight into how evidence is commissioned, interpreted and used in government, alongside opportunities to build networks.

Person specification

Applications will be assessed by UKRI panel assessment against the following essential opportunity-specific requirements in addition to the generic eligibility and call criteria.

Essential criteria:

- a strong track record in a discipline relevant to public health, prevention or the social and commercial determinants of health
- expertise in quantitative, qualitative or mixed methods relevant to analysing complex policy questions
- experience of synthesising and communicating research to inform policy, practice or decision-making

Applicants shortlisted from the panel assessment will be invited to a host led interview. At this stage the host will also take into account the following desirable fellowship-specific requirements.

Desirable criteria:

- experience of analysing place-based, socioeconomic or health inequality impacts
- strong communication and stakeholder engagement skills, including the ability to influence and collaborate across organisational boundaries
- experience of synthesising complex evidence and translating findings into actionable recommendations

Processing personal data

If applicants are shortlisted by the UKRI assessment panel UKRI will need to share the application and any personal information that it contains with the host for the host led interview selection process.

Your personal data will be handled in line with UK data protection legislation and managed securely. If you would like to know more, including how to exercise your Rights, please see the UKRI privacy notice.

Please see the DHSC's privacy notice and they will delete your data at the end of the selection process unless you are successful, in which case we will retain your data as an independent data controller.