

**EG on Prison Health  
Second Meeting  
Oslo, Norway  
13-14 February 2007**

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| <b>Reference</b>        | PH 2/4/Info 3   |
| <b>Title</b>            | Adopted NDPHS Work Plan for 2007  |
| <b>Submitted by</b>     | Secretariat   |
| <b>Summary / Note</b>   | This Work Plan has been adopted during the NDPHS Partnership Annual Conference in December 2006. It contains the foreseen activities of the NDPHS during 2007, as well as the Action Plans of the NDPHS “core” (HIV/AIDS, PHC and SIHLWA) and “associated” (CBSS WGCC) Expert Groups (PH EG’s Action Plan was not available and, therefore, has not been included). |
| <b>Requested action</b> | For information   |

## **NDPHS Work Plan for 2007**

Adopted during the Third Partnership Annual Conference (PAC 3)

On 12 December 2006 in Oslo, Norway

### **I. Introduction and policy context**

The guiding vision and strategies of the 2003 Oslo Declaration are translated in this Work Plan into specific action lines aimed at advancing sustainable development in the Northern Dimension area through the improvement of public health and social well-being. Efforts to achieve the enhanced quality of life and demographic situation envisaged by the Declaration will be undertaken via intensified cooperation between and co-ordination among the Partner Countries and Organizations, as well as all other relevant stakeholders.

Within the Northern Dimension area there are extreme disparities in health conditions, and related social and economic problems, which lead to high levels of mortality and non-communicable diseases, violence, alcohol- and drug-abuse, and the spreading of infectious diseases. In particular, the incidence of HIV/AIDS in the area points to the need for immediate measures to be taken. This Work Plan is thus a basis for the promotion of health and social well-being at the international, national, regional and local levels, to address the challenges of the current situation and to ensure that progress is made towards achieving the Partnership’s objectives. The relevant stipulations contained in the Oslo Declaration, the United Nations Millennium Declaration and its Development Goals, the Chairman’s Conclusions from the 6<sup>th</sup> Baltic Sea States Summit, as well as recently endorsed the Political Declaration on the Northern Dimension Policy and the Northern Dimension Policy Framework Document describing the new Northern Dimension Policy from 2007 provide the frameworks for this Work Plan.

All relevant stakeholders have a key role to play in the improvement of health and social well-being, through the mechanisms set in place by the Partnership. The national

governments of the Partner Countries have a leading role in formulating strategies and providing various essential forms of support to efforts aimed at improving existing health and social conditions. Partner Organizations, regional cooperation bodies and international financial institutions are also key actors in setting priorities, and in making available the resources needed to move the activities and initiatives of the Partnership forward. The committed involvement of the private sector, local and regional actors, NGOs and other interested parties is also important at all levels of cooperation and consultation in the Partnership structure.

## **II. Objectives and targets**

As mandated by the Oslo Declaration, the Partnership will during 2007 direct its overall efforts to achieving the following two main objectives and meeting the respective targets:

### **(i) Reducing major communicable diseases and prevention of life-style related non communicable diseases**

Among communicable diseases, priority focus will be placed on HIV/AIDS, tuberculosis, sexually transmitted diseases and antibiotics resistance. Concerning non-communicable diseases, efforts will center on the determinants of cardiovascular diseases, and their risk factors including the excessive consumption of alcohol, the use of tobacco and illicit drugs.

#### **➤ Targets<sup>1</sup>**

- Prevent chronic and infectious diseases and their consequences, including by strengthening communities' capacities to detect and control diseases;
- Promote sexual and reproductive health;
- Support efforts to increase the numbers persons who have access to and receive quality, comprehensive and preventive health care services;
- Prevent alcohol and other drug abuse;
- Increase cross-sectoral and cross-boarder collaboration between all Partners and interested non-Partner bodies at all relevant levels (e.g. health and social sectors, education sector, NGOs, businesses and other private sector actors, as well as local authorities);
- Increase the frequency of the regular exchange of information and best practices, as well as joint projects and activities, between the Partners and interested non-Partner bodies (use, *inter alia*, the Project Database and Pipeline, when available);
- Enhance cooperation in health surveillance, statistics and analysis on communicable and non-communicable diseases and their determinants;
- Support reforms and other efforts that ensure peoples' equitable access to and receipt of quality and comprehensive medical services.

### **(ii) Enhancing and promoting healthy and socially rewarding lifestyles**

Under this objective, the Partnership will focus on nutrition, the enhancement of physical activity, creating smoke-, alcohol-, and drug-free environments, the practice of safe sexual behaviors, and supportive social and work environment and constructive social skills. Furthermore, special attention will be paid to the social and health implications of trafficking in human beings.

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<sup>1</sup> The following targets can be viewed as not only applicable to 2007, as they also serve as longer-terms aims for the Partnership.

### ➤ **Targets<sup>1</sup>**

- Create accessible and safe physical and social environments that promote healthy behaviors and social connectedness for adults, adolescents and children (e.g. through the promotion of sports and other recreational activities, the creation of youth centers and peer education programmes);
- Support reforms and other efforts that ensure peoples' equitable access to and receipt of health education, social-services, and primary health care;
- Increase the priority-status of issues of health and social well-being on political agendas;
- Strengthen communities' capacities to secure their citizens from toxic, infectious and other harmful substances or developments;
- Promote healthy activity and nutrition to prevent obesity and its consequences;
- Prevent violence, depression and suicide;
- Prevent the use of tobacco, alcohol and drugs among adolescents and youth;
- Increase the frequency of the regular exchange of information and best practices, as well as joint projects and activities, between the Partners and interested non-Partner bodies (use, *inter alia*, the Project Database and Pipeline, when available);
- Encourage and guide individuals and communities to prioritize their health and social-well-being and provide people (especially young people) with the framework to do so;
- Promote preventive and supportive measures that will support the health and social well-being of victims of trafficking in human beings.

### **III. Action lines**

The Partnership will endeavor to meet its objectives during 2007 through the following lines of action.

#### **(i) NDPHS Project Database: taking a coordinated approach to preventing major public health and social problems in the Northern Dimension area**

As endorsed by the second Partnership Annual Conference, the **Partnership Co-ordinating and Financing Mechanism** is the mechanism through which Partners will make decisions on funding or other contributions and which at the same time stimulates Partners and Participants to formulate their needs in the fields of public health and social well-being, in accordance with national plans. The main elements of this co-ordinating and financing mechanism are the Partnership website, the NDPHS Project Database and the Project Pipeline.

Consistent with the above, from 1 January 2007, the Partners will begin to implement the NDPHS project on "A Database on Public Health Projects in North Eastern Europe and its neighbouring countries" (NDPHS Project Database), which has the strategic objective to achieve a coordinated policy and project approach in actions against HIV/AIDS and lifestyle-related diseases as well as to promote healthy and socially rewarding lifestyles. The Project will be co-funded by the NDPHS Partner Countries and the European Commission,<sup>1</sup> and its duration is 2 years.

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<sup>1</sup> Subject to successful completion of the negotiations with the EC.

The NDPHS Project Database foresees many different activities that fall under this Work Plan, one of its key components being the implementation of the Project Pipeline (cf. Action line (ii) below).

➤ **Specific actions**

- NDPHS Expert Groups should be actively involved in the NDPHS Project Database (all work packages therein) and Pipeline, and contribute to making them an effective tool for policy and project development. This action will include, but not be limited to the following efforts in the Expert Groups' respective fields of expertise:
  - a. Based on the evaluation of the current situation in the ND area, develop thematic reports in support of policy and project development. Regarding the latter, the reports could identify (i) geographical locations, themes and topics concerning what projects should be included in the Pipeline, and (ii) what organizations can become involved in the development and implementation of those projects;
  - b. Actively assist in promoting and publicizing the NDPHS Database and Project Pipeline as well as the dissemination of their results.

**(ii) Financing NDPHS' and other parties' undertakings: ensuring adequate funding for NDPHS and Partnership-relevant activities and projects, *inter alia*, through the Project Pipeline**

In accordance with the Oslo Declaration, the Partners recognize that in order to meet the objectives of the organization, it is necessary to ensure adequate funding for activities and relevant projects carried out within its framework. Thereby, the Partners will during 2007 actively seek additional sources of funding, having in mind that the Project Database and Pipeline play important roles in this process.

➤ **Specific actions**

- Actively seek and ensure that funding is available for the NDPHS Expert Groups' activities and the functions of the NDPHS Secretariat;
- Implement the Project Pipeline during early 2007;
- Publicize the Project Pipeline to obtain input from project proponents;
- NDPHS Expert Groups: assess projects included in the Pipeline, if requested, and assist in search for donors for projects included in the Pipeline.
- Study the possibility to organize a NDPHS-sponsored resource mobilization (pledging) conference in 2008, bringing together potential donors from the Northern Dimension area and beyond to fund selected projects in the Pipeline. The Partnership will therefore take action to begin preparing this conference during 2007. This action will include, but be not limited to the following efforts:
  - a. Link the Partnership activities to organize the pledging conference to Project Database activities;
  - b. Establish an *Ad hoc* Working Group as the body responsible for preparing the 2008 pledging conference. For this purpose, the *Ad hoc* group will be in contact with donor communities and organizations (i.e. SIDA, the Norwegian Barents Secretariat, GTZ, and other relevant potential donors and international financial institutions from outside the Partnership);
  - c. The *Ad hoc* Working Group should identify new sources of financing for NDPHS relevant projects, and also involve businesses as well as non-Partner and non-EU countries in this process;

- d. If deemed appropriate by the Partners, the *Ad hoc* Working Group should re-open and move forward the issue of the NDPHS Voluntary Fund.

**(iii) NDPHS Expert Groups: providing expert input to the preparation and implementation of joint activities carried out within the Partnership framework**

As stipulated in the Oslo Declaration, the NDPHS Committee of Senior Representatives may establish expert groups, which facilitate professional exchanges, increase co-ordination among Partners and monitor joint activities. Among the core and associated NDPHS Expert Groups,<sup>1</sup> many have developed their own action plans for 2007. These action plans are attached to this Work Plan as Annexes 1-4. Thus, the Work Plan covers cross-cutting actions to be taken by all Experts Groups, as well as specific actions to be taken by individual Expert Groups.

Taking all planned actions below into account, the Partners shall work to ensure that they are actively involved and properly represented in the NDPHS Expert Groups.

➤ **Specific actions to be taken by all the core NDPHS Expert Groups**

- Appropriate action shall be taken by the Expert Groups to increase the engagement of the European Commission (EC) in their respective activities. This entails, but is not limited to, applying to the EC for project funds, if applicable, and including, where appropriate, EC-bodies in their activities (e.g. European Centre for Disease Control);
- Organize, if possible, topical conferences and workshops in selected health areas / geographical areas, in addition to regular Expert Group meetings, in order to promote more widely the involvement of other relevant actors in the Groups' efforts;
- Co-ordinate and cooperate with other relevant NDPHS Expert Groups;
- Conduct reviews of project proposals submitted to the Partnership via the Project Pipeline, if requested;
- Nominate, if possible, Co-Lead Partners to their respective Groups. The Co-Lead Partner should entail a country from the side of the Northern Dimension area not represented by the Lead Partner;
- Actively contribute to the implementation of the Project Database, not least through their involvement in the Project Pipeline;
- See to and ensure the availability of adequate funding for their activities (i.e. funding for the coordination of the Expert Group, including the employment of an ITA, as well as funding for meetings and conferences);<sup>2</sup>
- Expert Groups on SIHLWA, Prison Health and Primary Health Care are encouraged to work to develop concrete project-based activities, following the successful example of the Expert Group on HIV/AIDS.

➤ **Additional specific actions to be taken by the Expert Group on HIV/AIDS**

- Take appropriate action to involve new partners (ESTHER and the ILO) and engage in possible forms of collaboration with the European Commission and the ECDC;

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<sup>1</sup> The NDPHS "core" Expert Groups are HIV/AIDS, PHC, PH and SIHLWA and the "associated" Expert Group is the CBSS Working Group for Cooperation on Children at Risk (WGCC).

<sup>2</sup> The costs of financing the Expert Groups' coordination shall continue to be borne by their respective Lead Partners.

- Appoint a Tuberculosis specialist and representative of Russia to the Expert Group;
- Revise the general working programme and priorities;
- Develop and support projects, and possibly evaluate ongoing projects within the context of the NDPHS Project Database and Pipeline;
- Evaluate national AIDS policies;
- Re-evaluate and re-submit to the EC of the project proposal concerning the evaluation and harmonization of extended case management;
- Prepare projects on prevention activities and Estonian-Russian cross-border collaboration.

The estimated cost of for leading activities of the Expert Group on HIV/AIDS for 2007 is EUR 100,000. This cost shall be borne by the Expert Group, including but not limited to the Lead Partner Finland.

The complete list of the planned activities of the Expert Group on HIV/AIDS during 2007 is presented in the Expert Group's Action Plan, attached as Annex 1.

➤ **Additional specific actions to be taken by the Expert Group on Primary Health Care**

- Develop the priorities of and a number of concrete activities for the Expert Group on Primary Health Care;
- Consider the need for one or more International Technical Advisers, and employ him/her/them, as appropriate;
- Initiate relevant projects aimed at supporting the development of primary health care in given areas;
- Engage in a search for and identify new sources of funding.

The estimated cost for leading the activities of the Expert Group on Primary Health Care for 2007 is EUR 100,000. This cost shall be borne by the Expert Group, including but not limited to the Lead Partner Sweden.

The complete list of the planned activities of the Expert Group on Primary Health Care during 2007 is presented in the Expert Group's Action Plan, attached as Annex 2.

➤ **Additional specific actions to be taken by the Expert Group on Prison Health**

- Finalize the proposed draft Terms of Reference for the Expert Group on Prison Health, and submit it to CSR 11 for adoption;
- Produce a work programme for the Expert Group;
- Recruit an International Technical Advisor for the Group;
- Initiate concrete activities, in accordance with the work programme;

The estimated cost for leading the activities of the Expert Group on Prison Health for 2007 is EUR 100,000. This cost shall be borne by the Expert Group, including but not limited to the Lead Partner Norway.

➤ **Additional specific actions to be taken by the Expert Group on Socially Inclusion, Healthy Lifestyles and Work Ability (SIHLWA)**

- Organize a conference on non-communicable diseases/healthy lifestyle-related problems, sponsored by the Nordic Council of Ministers (proposed place and time: 10-11 December 2007 in St. Petersburg, Russia);
- Co-organize a conference on effective approaches to tackle alcohol related problems in local communities, sponsored by the CBSS Swedish Presidency (proposed place and time: Latvia, 12-13 March 2007);
- Finalize the SIHLWA stakeholder analysis and prepare an analysis of the state of occupational safety and health in the Northern Dimension area;
- Begin the second phase of "Occupational Safety and Health (OSH) project" in north-Western Russia (2007-2008);
- Prepare and eventually initiate projects on: "Alcohol and Drug Prevention among Youth in St. Petersburg," "Children at Risk" also in St. Petersburg, a joint Baltic Sea Network/BSN OSH project on systematic approach to work related diseases, and a project on "disseminating brief intervention to tackle alcohol dependency by health services" in selected NDPHS member countries;
- Strengthen ties with the NDPHS Secretariat, NDPHS Partners as well as all relevant stakeholders (WHO, ILO, etc.) in the field of non-communicable diseases and healthy lifestyles;
- Include SIHLWA projects in the new NDPHS database.

The estimated cost for leading the activities of the Expert Group on SIHLWA for 2007 is EUR 100,000. This cost shall be borne by the Expert Group, including but not limited to the Lead Partner Finland.

The complete list of the planned activities of the Expert Group on SIHLWA during 2007 is presented in the Expert Group's Action Plan, attached as Annex 3.

➤ **Specific actions planned to be taken by the CBSS Working Group for Cooperation on Children at Risk**

- Update the Child Centre including its five priority areas, and increasing the number of NGOs and public organizations to assist children at risk;
- Conduct a follow-up on the expert meeting on children exploited through the Internet;
- Continue cooperation and coordination with the Working Groups and task forces within the CBSS, the Council of Europe, the Nordic Council of Ministers, UNICEF, IOM, ILO and other relevant international organizations;
- Implement the Action Plan on Unaccompanied Children in the Baltic Sea region;
- Meet with established national contact points;
- Document how children in the region are being trafficked, and how they are assisted and handled by regional cooperation efforts;
- Extend the network by inviting professionals to expert meetings and consultations on prioritized issues;
- Hold a joint CBSS Working Group for Cooperation on Children at Risk and national coordinators meeting as well as an expert meeting identifying issues in the field of assistance to young persons with criminal behaviors.

The complete list of planned activities of the CBSS Working Group for Cooperation on Children at Risk during 2007 is presented in its Action Plan, attached as Annex 4.

**(iv) Engaging non-Partner Countries and Organizations: involving all relevant stakeholders in endeavors to achieve NDPHS goals and objectives**

The Partnership should continue in a dedicated manner its efforts to involve all relevant actors in its work, including those which are not NDPHS members, in the organization's activities.

➤ **Specific actions**

- Take appropriate action to involve new countries and re-activate previously involved ones;
- Take appropriate action to involve relevant other expert groups in pursuing the NDPHS goals and objectives (such as the new CBSS Task Force Against Trafficking in Human Beings), including those which are active in Russia;
- Connect with and engage local and regional administrations in Russia, as well as NGOs;
- Connect with and engage representatives of the business community in the Northern Dimension area;
- Use the Barents Initiative as an example of successful cooperation concerning local and regional bodies, and endeavor to apply this example to activities that could be carried out in the Kaliningrad and St. Petersburg regions (having in mind that the Barents Initiative was most successful in its efforts in the northern-most parts of the region, excluding Kaliningrad and St. Petersburg).

**(v) Increasing the visibility of the Partnership: making the NDPHS more recognizable and well-known**

In line with the NDPHS Information Strategy, the Partners, Associated Partner, Expert Groups as well as the Chairmanship and the Secretariat shall work to increase the visibility of the Partnership.

➤ **Specific actions**

- Interact with relevant actors in the Northern Dimension area and keep them informed about developments within the NDPHS;
- Include provisions regarding the NDPHS in relevant high-level and other documents;
- Provide input to relevant publications, if possible;
- Make presentations at national and international conferences and workshops;
- Renew the NDPHS website and include in it (i) an interactive on-line news section, (ii) links to other relevant websites (and from other websites to the NDPHS website), and (iii) a mechanism to circulate NDPHS e-News. The renewed website should prominently display the Project Database and the Project Pipeline (when the latter two become available).

## **IV. Evaluation and reporting**

In accordance with the Terms of Reference for the NDPHS Expert Groups, the Expert Groups shall prepare individual Progress Reports concerning their respective activities during 2007. These Progress Reports are to be submitted to the autumn Committee of Senior Representatives (CSR) meeting. Following-up these Reports, the Expert Groups shall develop Action Plans for 2008, taking into account their progress made during the previous year.

Based on the reports developed by the NDPHS Expert Groups, the Secretariat shall prepare an overall NDPHS Progress Report for 2007, for presentation to the autumn CSR meeting. If the CSR deems it appropriate, the Progress Report for 2007 can also be presented, after any necessary revisions, to the fourth Partnership Annual Conference (PAC).

In line with the Oslo Declaration, the evaluation of the implementation of this Work Plan shall also be linked to the "overall review and evaluation of the Partnership [to] be carried out in 2008, in accordance with a procedure to be established by the CSR." To this end, the evaluations undertaken concerning progress made during 2007 will feed into evaluation during 2008, covering the entire first phase of the NDPHS' activities.

## Expert Group on HIV/AIDS

### Action Plan for 2007

1. Meetings: The group is scheduled to have two working meetings, one in connection with the EU-wide HIV conference under the presidency of Germany in March in Bremen and the second in October in Poland.
2. Coordinating activities: With the help of the secretariat, ITA and the group is implementing the project pipeline and database so that it can be used for evaluation and seeking for financing for project proposals by the end of the year.
3. Constitution of the EG: Negotiations have been initiated to involve new partners (ESTHER, ILO). Also possible forms of collaboration with ECDC and EU Commission will be elaborated based on the discussions and activities during 2006. Invitation of a TB-specialist into the group will further be discussed during the Bremen meeting. As per the offer by Russia during the CSR meeting in Paris, the group will discuss about the procedures to invite representative from Russia.
4. Revision of the General Working Programme and priority areas will be discussed and elaborated. In particular, the implementation and impact of antiretroviral treatment needs to be emphasized more than in the current version.
5. Development and support of projects. **Ongoing projects** will be followed and possibly evaluated with the help of the new project pipeline and database. The **Barents initiative** will continue and will have new subprojects added during the year. This project is basically for NW Russia but parts of it have been used to enhance cross-border collaboration between Russia and the Baltic countries. The group is looking for new such project proposals during the year 2007. The project proposal concerning evaluating and harmonisation of **extended case management** components that was submitted for financing to the EU public health programme needs to be re-evaluated for possible resubmission. Another project prepared by the Polish group dealing with **prevention activities** will be further elaborated for possible submission for EU-financing during the year. An Estonian-Russian project for **cross-border collaboration** will be discussed and evaluated for multiplication in other sites. Several other project proposals have either been developed and evaluated or planned during the previous meetings. The large project from the Danish Church Aid, approved by the EG, is still looking for financing. Several other initiatives have been taken up in previous discussions but lack of financing mechanisms has slowed down their further development. Hopefully new mechanisms will become available during the year. In particular the "EEA"-money is potentially useful for several of the planned objectives but a political mechanism is not available that would facilitate its use for the ND projects.
6. Evaluation of national AIDS policies. During the meetings the EG will review and evaluate the current epidemiological situations in the partner countries and discuss about suggestions concerning national policies.

## **Expert Group on Primary Health Care**

### **Action Plan for 2007**

One of the main approaches of the Partnership, in order to reach its objectives, is to support the reorientation of health systems; these are to be strengthened with a particular emphasis on the provision and delivery of primary health care. While the development of primary health care varies among the Partnership members, there is a need to share experiences and expertise in the organization and delivery, funding mechanisms, human resource development and stewardship of primary health care. The opportunities for primary health care to support health promotion and disease prevention can support the Partnership objectives to improve public health and health outcomes.

The Primary Health Care (PHC) Expert Group was transferred from the CBSS Task Force on Communicable Disease Control in the Baltic Sea Region to the Partnership in September 2004 in connection with the finalizing of the Task Force. Due to financial difficulties the Group has had limited possibilities to meet and elaborate a programme for improving the situation in the Northern Dimension region.

Based on the result of a meeting in the autumn of 2006 the Expert Group proposes the following general Action Plan for 2007. The main priorities follow four streams of action.

#### **1. Developing priorities of the Expert Group on Primary Health Care**

The Expert Group will, using the financial resources offered by Sweden, in the first hand, elaborate a programme with priorities for future initiatives. In this work the Expert Group will take stock of the progress already made by the Group, notably the outcome of the PHC Expert Group's Workshop in Helsinki in the spring of 2005. The Workshop identified five areas for action, and a number of concrete activities, in order to improve public health through developing primary health and social care services, responding appropriately and equally to the needs of the people, as part of the health care systems: Framework for implementation of modern PHC, Systems Development, Human Resource Development, Promotion of public health and prevention of diseases, and Improvement of the service provision.

The Expert Group will revise these proposals and prioritise the most urgent areas. Important needs expressed by Partners will be taken into consideration when identifying the priorities. The relevant parts of the Partnership's Work Programme for 2006 – 2007 will be taken into consideration.

Furthermore, the Expert Group will finally consider the need for one or more International Technical Advisers (ITA:s).

Provided that the elaboration of the programme gives the necessary concrete information already during 2007, and that it is requested by a Partner, the Group will initiate relevant projects aimed at supporting the development of Primary health care in a given area.

#### **2. Co-ordination with other Partnership activities**

The Expert Group will co-ordinate and co-operate with other relevant Partnership Expert Groups, notably the HIV/AIDS Expert Group, the Expert Group on Social Inclusion, Healthy Lifestyles and Work Ability (SIHLWA), as well as with the Council of the Network of Public Health Training around the Baltic Sea.

The planned Partnership database will facilitate the co-ordination work of the Expert Group. In 2007 the Group will assist in its development with relevant input.

### **3. Review of project proposals submitted to the Partnership**

The Expert Group will review possible project proposals within its field of responsibility submitted to the Partnership.

### **4. Search for funding**

One of the challenges of the Expert Group is to find better funding, both of its elaboration of a Programme and to find financing of projects and other collaboration activities. The Expert Group recognizes that funding is a precondition for its further activities and will take steps to find financiers.

## Expert Group on SIHLWA

### Action Plan for 2007

Following the recommendation made by the Oslo Ministerial Conference of Northern Dimension Partnership<sup>1</sup> in Public Health and Social Wellbeing (2003), new Expert Group on “**Social Inclusion, Healthy Lifestyles & Work Ability**” (“**EG SIHLWA**”) was established in 2005. It held its 1<sup>st</sup> meeting in Stockholm in November 2005, where Finland and Lithuania pledged financial support for its operation. The 2<sup>nd</sup> meeting of the Expert Group was held in Helsinki 16-17 May 2006 and the 3<sup>rd</sup> meeting in Vilnius 30 November -1 December 2006.

The **EG SIHLWA** consists of 3 sub-groups:

- Subgroup on alcohol (periodic/ “binge” drinking)
- Subgroup on adolescent health and socially-rewarding lifestyles
- Subgroup on Occupational Safety & Health

We know already a lot about the epidemiological changes of unhealthy lifestyles and what will be the consequences to population health. The message is clear: all our countries are already in public health crisis and it is getting worse. Unhealthy lifestyles are not a natural catastrophe but a man-made problem. It can also be reversed by man-made policies and practical measures. It will require strong political action supported by integrated action by health-, social-, education- and other sectors. New innovation, holistic approach, and international collaboration will be needed, where the NDPHS Expert Group on Social Inclusion, Healthy Lifestyles and Work Ability (“SIHLWA”) can act as catalyst through:

- Bringing together key stakeholders from the core health constituencies within the health system and broader society, including those other government sectors whose policies impact on health;
- Carrying out a situational analyses, which analyse the size of the problem and identifies the priority areas for action;
- Evaluating what is already in place, strengths and weaknesses, and identifies current gaps;
- Strengthening international, bilateral and multilateral cooperation we could start by developing of an alliance for advocacy and action on non-communicable diseases which unites major international players in Europe, including intergovernmental organizations, NGOs and others;
- A special challenge for this Expert Group will be how we can best benefit from the synergy that the three subgroups will pose.
- Elaboration of viable and practical projects in NDP area.

**In 2007 on the SIHLWA agenda primarily will be the following issues:**

**Meetings:**

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<sup>1</sup> NDPHS consists of following members: 5 Nordic countries, 3 Baltic States, Russian Federation, Poland, Germany, France, Canada, Nordic Council of Ministers, Council of the Baltic Sea States, Barents Euro-Artic Council, WHO, ILO, IOM.

- 1) Organizing two SIHLWA meetings together with all 3 subgroups (spring and autumn 2007);
- 2) Organizing for Nordic Council of Ministers (Finnish Chairmanship) a conference on a timely topics under non-communicable disease/healthy lifestyles related problem in autumn 10-11 December 2007 (tentative dates) in St. Petersburg;
- 3) Co-organizing for CBSS (Swedish Presidency) a conference on "effective approaches to tackle alcohol related problems in local communities", with the following sub-themes, where measures have proven effective in reducing alcohol use induced harm, to be discussed in parallel: [ 1) family (including support to exposed families, children etc.), 2) health care (including the role of especially primary health care to prevent alcohol problems among the population); 3) traffic; 4) responsible beverage service (preventing violence of excessive drinking in restaurants, bars and other places where people go out to drink). This conference would be implemented under Council of Baltic Sea States sponsorship as part of Swedish Chairmanship activities tentatively in Latvia in March 2007.

#### **Projects:**

- 1) Finalizing SIHLWA stakeholder analysis;
- 2) Starting 2<sup>nd</sup> phase of "Occupational Safety and Health (OSH) project" in north-Western Russia (2007-08) [involved unit: subgroup on OSH];
- 3) Preparation and eventually starting a joint Baltic Sea Network/BSN OSH project on systematic approach to work related diseases [involved unit: subgroup on OSH]
- 4) Preparation of an analysis of the state of occupational safety and health in the Northern Dimension area [involved unit: subgroup on OSH]
- 5) Preparation and eventually starting project on "Alcohol and Drug Prevention among Youth in St. Petersburg" [involved unit: subgroup on ADO].
- 6) Preparation and eventually starting project on "Children at Risk" in St. Petersburg [involved unit: subgroup on ADO];
- 7) Preparation and eventually starting project in selected NDPHS area (e.g. Estonia, Latvia, Lithuania, Russian Federation and Norway which are not included in the EU-funded "PHEPA"-project) on disseminating brief-intervention to tackle alcohol dependency by health services / [involved unit: subgroup on ALC];

#### **Other activities:**

- 1) Continued work on strengthening links with main partners (especially WHO-EURO, ILO/Russia, and national actors on NCDs and healthy lifestyles.
- 2) Strengthened collaboration with NDPHS Secretariat in Stockholm and in St. Petersburg (NCM Office).
- 3) Collaboration and updating SIHLWA projects in the new NDPHS database.

**CBSS Working Group for Cooperation on Children at Risk**  
**Action Plan for July 2006 – June 2007**

| Member state | Priority*            | Activity  | Funding   | Responsible  | Time limit                    | Tools and methods   | Results and Outputs   | Follow up   |
|--------------|----------------------|---|---|--|-------------------------------|---|---|---|
| All          | <b>A, B, C, D, E</b> | Updating the Child Centre. Including the five priority areas.   | In budget for Children's Unit and in national budgets for NCs | National Co-ordinators in co-operation with Competence Centres and the Children's Unit | 1 July 2006 – 30 June 2007    | Keeping national networks aware of possibility to publish results.                  | Child Centre is a knowledge base for activities in the area of children at risk in the region. More and more professionals in the region use the Child Centre both for publishing material and for finding new knowledge. | Report to WGCC-meeting in fall 2006, report to WGCC-meeting in spring of 2007 |
| All          | <b>A, B, C, D, E</b> | Updating the Child Centre with more NGOs and public organisations working to assist children at risk. | In budget   | National Coordinators and the Children's Unit  | 30 <sup>th</sup> of June 2007 | Using web based form. Dissemination of the form to the entire network.              | The Childcentre should include all NGOs and public organisations and authorities in the region.   | Report to WGCC in the fall of 2006. and in the spring of 2007.                |
| All          | <b>C</b>             | Small expert meeting with invited experts   | Norwegian follow up of ministerial                            | Norway in cooperation with Children's Unit.  | September 2006                | Prepared meeting developing the rights of children in institutions and gatekeeping. | Report from meeting, input to the conference in Stockholm   | WGCC meeting in fall of 2006.   |

\* Priorities: **A**: Protection from sexual exploitation. **B**: Street children and children without family. **C**: Children in institutions. **D**: Young offenders and self-destructive acts. **E**: Unaccompanied and trafficked children.

| <b>Member state</b>                                | <b>Priority*</b> | <b>Activity</b>  | <b>Funding</b>      | <b>Responsible</b>   | <b>Time limit</b> | <b>Tools and methods</b>   | <b>Results and Outputs</b>  | <b>Follow up</b>                                       |
|--|------------------|--|---------------------|--|-------------------|--|---|--|
| All + Ukraine and Belarus                          | <b>C</b>         | Conference on the rights of children in institutions   | Swedish presidency  | Sweden in coop with Children's Unit                          | November 2006     | Invited delegations from member states + UA and BY                         | Conclusions to point to activities suitable for the WGCC to develop                             | WGCC meeting in spring of 2007                         |
| All  | A                | Follow up of expert meeting on children exploited in Internet settings   | In budget           | Children's Unit  | June 2007         | Active input to initiatives, dissemination of findings from expert meeting | Increased awareness of how to develop methods to assist children exploited, national activities | WGCC spring 2007                                       |
| Norway, Sweden, Russia, Estonia, Lithuania, Poland | A                | Regional research on Young persons' attitudes and experiences. Publication of the regional report and presentations of the findings from the research. | External            | Regional group: Norway, Sweden, Estonia and Children's Unit. | End of 2006       | Launch of report   | Dissemination of report   | WGCC to consider the research coop for future projects |
| All  | A                | Follow up of Barnahus expert meeting   | In budget/ external | Iceland, Children's Unit                                     | October 2006      | Develop suggestions for extended coop                                      | Plan developed  | WGCC fall of 2006                                      |

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| Member state                      | Priority*     | Activity  | Funding                                | Responsible                        | Time limit            | Tools and methods   | Results and Outputs   | Follow up   |
|-----------------------------------|---------------|---|--|------------------------------------|-----------------------|---|---|---|
| All                               | A, B, C, D, E | Continued co-operation and co-ordination with the WG and task forces within the CBSS, the Council of Europe, the Nordic council of Ministers, UNICEF, IOM, ILO and other intl org | In budget                              | Children's Unit                    | July 2006 – June 2007 | Meetings, exchange of reports, updating of funding sources.   | Better co-ordination and more knowledge on who is currently active in what area. Report to the WGCC on how different actors contribute to the area of CAR. Funding possibilities. | Yearly.   |
| All + Ukraine, Belarus, Moldova   | E             | Implementation of the Action Plan on Unaccompanied children in the region.  |  | Children's Unit                    | June 2007             | Enhance cooperation with police, supporting pilot projects, maintaining the network of National Contact Points. | NCPs active in cooperation on assisting children and young persons victims of trafficking. Exchange of experiences between the NCPs on line and off-line.                         | WGCC spring of 2007                                   |
| All member states + UA, BL and MD | E             | BSR CACVT project training professionals from 9 countries   | EU (Daphne), SC Sweden, Oak foundation | Children's Unit, EE, LT, PL and SE | January 2008          | 5 Regional training events, 5 national events   | Professionals more aware of how to assist children victims of trafficking.  | WGCC continuously and final report in spring of 2008. |

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| Member state                      | Priority* | Activity   | Funding   | Responsible   | Time limit   | Tools and methods  | Results and Outputs  | Follow up         |
|-----------------------------------|-----------|--|---|---|--------------|--|--|-------------------|
| All member states + UA, BL and MD | E         | Documenting how regional cases of children being trafficked are assisted and handled within the regional cooperation | EU (Daphne)   | Children's Unit EE, LT, PL and SE                               | January 2008 | Researcher will map all known cases of children and make interviews with children.   | Report published including both the channels the assistance have used and the personal stories of the children involved. | WGCC fall of 2007 |
| All + Ukraine, Belarus, Moldova   | E         | Meetings with established National Contact Points  | National funding and some funding from regional sources | Involved ministries with technical support from Children's Unit | June 2007    | Meetings with dissemination of successful work of national contact points. Follow up of research and other regional initiatives. | National contact points in all 11 member states + UA, BL and MD should be established                                    | WGCC in 2007      |
| All                               | D         | Expert meeting identifying issues in the field of assistance to young persons with criminal behaviours               | Russia and in budget                                    | Russia and Children's Unit                                      | April 2007   | Prepared meeting, background document, research input, NGO input   | Identification of areas for possible attention by the WGCC   | WGCC spring 2007  |

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| Member state | Priority*     | Activity  | Funding                        | Responsible   | Time limit                | Tools and methods   | Results and Outputs   | Follow up         |
|--------------|---------------|---|--------------------------------|---|---------------------------|---|---|-------------------|
| All          | B, C, D, E    | Extending the network of CCs and experts by inviting professionals to expert meetings and consultations on prioritised issues | In budget                      | NCs in co-operation with Children's Unit.               | June 07                   | NCs to contact experts in fields of specific concern to the WGCC and to seek their active participation in expert meetings and activities in the region | Competent professionals in the field of child trafficking, sexually exploited children, children in institutions, children living in the street and children with delinquent behaviour will contribute to development of activities and actions | Continuous        |
| FI, LV, RU   | A, B, C, D, E | Establishing National Coordination supporting all aspects of the cooperation  | In budget and national funding | Children's Unit and national ministries                 | October 2006              | Meetings with responsible ministries and possible NC partners   | NC established actively promoting contacts with relevant experts and researchers. NC actively contributing to the web site  | WGCC fall of 2006 |
| All          | A, B, C, D, E | WGCC meetings   | In budget                      | Children's Unit in co-operation with Denmark and Norway | October 2006, spring 2007 | Two meetings in member states   | Decisions on priorities, action plans, budget, staffing, specific activities.   | Evaluation        |
| All          | A, B, C, D, E | Joint WGCC and National Coordinators meeting  | In budget                      | Children's Unit in co-operation with Norway             | Spring of 2007            | Meetings in member states   | Discussing the cooperation, evaluating the activities   | Evaluation        |

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