

DECLARATION

CONCERNING THE ESTABLISHMENT OF A NORTHERN DIMENSION PARTNERSHIP IN PUBLIC HEALTH AND SOCIAL WELLBEING

Adopted at the Ministerial Meeting in Oslo on 27 October 2003

Ministers of Health and Social Affairs and other High Representatives of the founding partners; Canada, Denmark, Estonia, Finland, France, Germany, Iceland, Latvia, Lithuania, the Netherlands*, Norway, Poland, the Russian Federation, Spain*, Sweden, the European Commission, the World Health Organisation, the Barents Euro Arctic Council, the Council of the Baltic Sea States, the International Labour Organisation, the International Organisation for Migration, the Nordic Council of Ministers and the Joint United Nations Programme on HIV/AIDS met in Oslo on 27 October 2003 and agreed to establish a Northern Dimension Partnership in Public Health and Social Wellbeing.

In so doing, they in particular referred to:

The Northern Dimension Forum held in Joensuu, Finland, in September 2002;

The content of and experience from existing international co-operation and programmes in the field of health and social services, such as co-operation within the Arctic Council (AC), the Barents Euro-Arctic Council (BEAC), the Council of the Baltic Sea States (CBSS), the European Union, the Nordic Council of Ministers (NCM), the World Health Organisation (WHO), etc. as well as bilateral co-operation.

The United Nations Millennium Declaration and its Development Goals as stipulated at the Millennium Summit in New York in 2000.

The Declaration adopted at the Meeting of Heads of Government in Kirkenes, Norway in January 2003 to mark the tenth anniversary of the Barents Euro-Arctic co-operation;

The policy bases that exist in the Northern Dimension partner countries for strengthening their public health and social wellbeing programmes.

The objectives of the European Union Northern Dimension Action Plan 2004-2006 endorsed by the European Council at its meeting on 16-17 October 2003, in the field of public health and social well-being, and to the objectives of other partners in the partnership.

The EU Action Programme for Public Health 2003-2008 and the EU Action Programme to combat social exclusion 2002 - 2006

1. Objectives of the Partnership

The overall objective of the Partnership is to promote sustainable development in the Northern Dimension area through improving human health and social wellbeing. The Partnership aims at contributing to intensified co-operation in social and health development and assist Partners and

*) The Netherlands has conveyed its intention not to participate in the Partnership, regretting any misunderstandings that have arisen on its position. Spain has decided to withdraw as Partner.

Participants in improving their capacity to set priorities in health and social wellbeing, as well as to enhance co-ordination of international activities within the Northern Dimension area. The activities by Partners and Participants in a Partnership should contribute to greater political and administrative coherence in the area, narrowing of social and economic differences, and to a general improvement of the quality of life and of the demographic situation.

2. Composition of the Partnership

The Partnership constitutes a voluntary and targeted form of co-ordination and co-operation aimed at achieving the stated objectives. Eligible partners will be the Founding partners, EU Member States and Northern Dimension Partner Countries, the European Commission and other relevant EU Institutions, regional co-operation bodies, international organisations and financing institutions. Eligible participants are interested sub-national administrative entities in the Northern Dimension area. Other countries or organisations associated with the Northern Dimension may become Partners or Participants of the Partnership in accordance with national legislation or statutes and through a procedure to be established by the Committee of Senior Representatives.

Other interested parties, such as relevant non-governmental organisations and private sector entities may participate in the funding and/or implementation of activities within the framework of the Partnership and may be invited to Partnership meetings in the capacity of observers or guests.

The Partnership does not constitute a legal person under international law. The Partnership should not infringe on the sovereign rights and procedures of the Partners and Participants.

3. Role and operation of the Partnership

The Partnership will build on, enhance and support existing national and international activities within its scope. In addition the Partnership will promote efforts addressing needs that are not yet covered by existing activities. The Partnership will promote existing health and social affairs co-operation and networking within the frameworks of the Council of Baltic Sea States, the Barents Euro-Arctic Council, the Nordic Council of Ministers, the World Health Organisation or other bodies.

Experiences from existing co-operation will be collected, shared and made use of throughout the Northern Dimension area by the Partnership mechanisms. The activities by Partners and Participants in the Partnership may take different forms, depending on the scope of the task, available administrative and financial resources, and other factors. The Partners and Participants will explore various relevant models, such as the establishment of “consortia” among interested professional and/or financial parties for the implementation of specific tasks aimed at fulfilling the objectives of the Partnership.

Relevant regional and local authorities within the Northern Dimension area should be encouraged to play a crucial role in the implementation of activities by Partners and Participants within the framework of the Partnership. Their direct involvement in all stages and at all levels of the co-operation procedures under the Partnership should be ensured.

4. Priorities and strategies of the Partnership

The Partnership shall focus on two priority areas for improved co-operation and co-ordination. One of these priority areas is the prevention of major public health problems. At present, they

include communicable diseases, such as HIV/AIDS and tuberculosis, use of illicit drugs, cardiovascular diseases and consequences of socially distressing conditions. The other priority area is promotion of healthy and socially rewarding lifestyles. The focus shall be on determinants of health and social wellbeing, including sexual behaviour, use of alcohol, smoking, use of illicit drugs, social and work environment and social skills.

The main groups, whose health and social wellbeing is the main target, are children and young people. The Partners recognise, however, that in the health and social wellbeing of children and the young, the society and communities, parents and other adults, play an important role and that actions targeting parents and other adults can be crucial to the health and wellbeing of children and young people.

Gender and children's perspectives shall be mainstreamed in all efforts within a Partnership. Other cross-cutting themes to be taken into account by the Partners are: equity and social inclusion, interaction between health and social sectors, people with disabilities and indigenous people and other vulnerable groups with special needs.

One of the main approaches of a Partnership shall be to support reorientation and efficiency of the health and social care systems. In social care, especially community based and preventive social services are to be enhanced. In health care, the focus should be on a strong primary health care (as defined in the Alma Ata Declaration). Horizontal, rather than disease-specific vertical programmes should be encouraged. Besides health and social care systems, Partners shall aim to address the broader society and to increase recognition of social and health concerns.

The Partnership will promote co-operation and internationally co-ordinated action in order to fulfil specific objectives within the following two priority areas:

4.1 Reduction of major communicable diseases and prevention of life-style related non-communicable diseases

The main focus shall be on HIV/AIDS, tuberculosis, sexually transmitted infections and antibiotics resistance. On non-communicable disease special attention shall be paid to the determinants of cardiovascular diseases, including excessive use of alcohol and smoking. Attention shall be paid to the WHO framework convention on tobacco control. Preventive actions by health and social services, in co-operation with other sectors, are to be strengthened, including actions against the illicit use of drugs.

Main orientation of the Partnership in this field:

1. Enhancing intersectoral collaboration at relevant levels of administration, e.g. health, social services, education and other authorities, NGOs, private sector, etc.
2. Strengthening of co-operation in health surveillance of both communicable and non-communicable diseases and their determinants
3. Strengthening of preventive health and social services of individuals, health services and social services such as:
 - counselling, information and education
 - alternatives to institutional care for children, etc.
 - training and education in public health and in social care
 - peer education programmes among youth
4. Continuing efforts to reform social and health systems.

4.2 Enhancement and promotion of healthy and socially rewarding lifestyles

The main focus shall be on healthy nutrition, physical activity, smoke free environment, alcohol and drug free leisure time activities, safe sexual behaviour and supportive social and work environment and constructive social skills. Children and young people shall be the main target groups.

Main orientation of the Partnership in this field:

1. Building of public policies to enhance health and social wellbeing in relevant sectors, at all levels of society.
2. Creation of supportive physical and social environments to protect and promote health and social wellbeing, and to enable people to make healthy and socially sound choices. Such activities may include a wide variety of activities and actors, e.g. promotion of healthy nutritional habits, starting youth centres, promoting sports, peer education programmes, etc.
3. Continuation of reorientation of health systems and social care systems. Activities should focus on health promotion and primary health care and preventive social services. They should also include efforts to raise health and social issues higher on the political agenda and decision-making.
4. Empowerment and mobilisation of people and communities to take action to enhance their health and social wellbeing, with a special focus on children and young people.
5. Development of basic skills of individuals related to health and social life.

5. Structure of the Partnership

In order to promote an enhanced co-operation within the objectives set for the Partnership, the following mechanisms will be established:

5.1 Partnership Annual Conference (PAC)

The Partnership Annual Conference (PAC) will constitute the highest co-operation structure of the Partnership. The PAC will meet every year and alternate between the Ministerial level and the level of Senior Officials so that Ministers and other designated high representatives will meet every second year¹. The PAC will review progress under the Partnership, carry it forward and provide coherence and co-ordination for achieving its objectives, and at ministerial level provide guidance.

Main tasks:

- formulate the overall policy orientation of the Partnership
- decide on possible joint activities to be carried out within the framework of the Partnership and approve Work Programmes and other proposals aimed at improved co-ordination and policy coherence among Partners.
- ensure an efficient exchange of information, including the use of relevant databases
- recommend measures that facilitate improved co-ordination of projects and programmes carried out in the Northern Dimension area.
- explore possible synergies and ensure a better and more efficient division of labour and responsibilities between Partners and Participants

¹ During the establishment phase the PAC might be held at ministerial level every year if so is considered necessary.

- facilitate networking, promote international contacts to stimulate professional discussions, exchange of competence and experience, sharing of best practices and information
- ensure political support and continued commitment among Partners and Participants
- facilitate funding opportunities for activities in support of the Partnership objectives

The PAC will elect a Chair and a co-chair among its member-governments to lead the Partnership for a period of two years. The proceedings of the PAC will be based on the principle of consensus. The Chair will in accordance with established international practice issue "Conclusions by the Chair". Decisions are not binding for the Partners beyond the expression of agreement or intent.

5.2 Committee of Senior Representatives

The Committee of Senior Representatives (CSR) will be the regular co-ordination mechanism of the Partnership, meeting when required. The CSR will consist of senior representatives appointed by each Partner and will be chaired by a senior representative of the Partnership Chair for the duration of its tenure. The CSR will prepare documents and proposals for the PAC, ensure appropriate fulfilment of decisions and recommendations of the PAC, and adequate follow-up.

Main tasks:

- prepare and ensure follow-up of the PAC, including preparation and monitoring of possible joint activities within the framework of Partnership Work Programmes.
- decide on procedural matters pertaining to the functioning of the Partnership and its mechanisms.
- decide, as appropriate, on financial matters relating to the functioning of the Partnership and its mechanisms
- decide on the establishment and mandates of expert groups (or task forces) as well as of roundtables allowing for a wider participation (civil society, private sector etc.) in discussions on particular subjects of relevance to the Partnership
- perform other tasks assigned to it by the PAC.

Partnership secretarial function

A Partnership secretarial function will, when considered necessary by the CSR, be established in order to provide administrative and other support to the CSR. The secretariat will function under the direction of the CSR Chair. The secretariat will assist the CSR to prepare the Partnership Annual Conference and the meetings of the CSR. It could also be assigned to provide support to Partnership expert groups. Furthermore, the secretariat could by the CSR be assigned tasks pertaining to project preparation and implementation, as well as the establishment and maintenance of databases required for enhanced co-ordination and co-operation.

Expenses for the operation of the secretariat will, according to an agreement among partners prior to its establishment, be financed jointly by Partners in accordance with a procedure to be established by the CSR. The secretariat may be supplemented by national personnel secondments or other in-kind contributions.

5.3 Expert Groups

In order to carry out its tasks, the Committee of Senior Representatives may establish expert groups, consisting of experts from interested Partners and Participants and other international experts, as appropriate. Under the guidance of the CSR such expert groups may have an

advisory role and/or provide professional input to the preparation and implementation of joint activities carried out within the framework of the Partnership, including Work Programmes. The expert groups may facilitate professional exchanges, increase co-ordination among Partners and Participants and monitor joint activities within their area of expertise. Within its mandate, as given by the CSR, an expert group will organise its own work.

In case a relevant expert group or network already exists within the Northern Dimension area, the CSR may invite that group or network to function also as an expert group under this Partnership, in accordance with its original mandate and the objectives of the Partnership.

5.4 Partnership co-ordination/Focal point

Partners undertake to ensure, in accordance with individual requirements and practices, appropriate national/internal co-ordination of its participation in the sectors covered by the Partnership.

Partners and Participants in the Partnership will establish and maintain a focal point for regular contacts with the CSR Chair. Partners and Participants undertake to contribute information in due time on their own activities in pursuit of the objectives and priorities of the Partnership, in an accessible format and updated on a regular and timely basis.

6. Financing of Partnership activities

Partners recognise that in order to meet the objectives established by this Partnership, it is necessary to ensure adequate funding of activities implemented in the framework of the Partnership. Based on, and further developing in a co-ordinated manner, the multitude of activities relevant to the good functioning of the Partnership, it is agreed that different forms of financing can be sought for activities within the framework of the Partnership:

- National financing
- Bilateral financing
- Multilateral financing, for instance through contributions towards specific project lists.
- Multilateral financing through a voluntary Partnership fund, to be managed as a separate account by an international financing institution (IFI). The CSR is to consider and make recommendations on the possible establishment of such a fund to the PAC in 2004.

The Partnership should, in particular, seek to mobilise funding for activities from International Financing Institutions and the private sector, in addition to Partner financing or other public sector financing. Recipients of funding may be a Partner, any regional or local administrative entity of a Partner, non-governmental organisations or other entities interested in and capable of implementing programmes, projects or other activities within the framework of the Partnership. Each donor makes decisions on funding or other contributions and on control and audit in accordance with his own legal and administrative requirements.

7. Future development of the Partnership

The partnership provides a framework for enhanced co-operation on issues relevant to the fulfilment of its stated objectives. The Partnership is an evolving process. Based on the experience gained during an initial period, the possible further development of the Partnership will be considered by the Partners before the end of 2005. The CSR will make recommendations to the PAC on those structural or operational changes it considers necessary in order to develop the full potential of the Partnership. An overall review and evaluation of the Partnership will be carried out in 2008, in accordance with a procedure to be established by the CSR.