

**Questionnaire to the Reference Group
for the Baltic Sea Region Programme 2014-2020
17 April 2012**

In March 2012 the programming of the transnational EU Baltic Sea Region Programme for the funding period 2014-2020 has been launched with a first meeting of the Joint Programming Committee. At this meeting it was decided to establish a Reference Group composed of stakeholders of the EU Strategy for the Baltic Sea Region, as well as relevant transnational organisations in the region. The Reference Group shall contribute to the programming with experience and know-how. Furthermore it shall help to identify specific demands and expectations towards the new programme among potential target groups.

The following questionnaire is a first step in the process of involving the Reference Group in the programming. You are kindly invited to give your input to the development of the future programme at an early stage before the start of drafting the programme documents.

The aim of this questionnaire is to gather your expectations related to the scope and content as well as other important aspects of the transnational Baltic Sea Region Programme 2014-2020.

When the first complete draft of the programme document is approved by the Joint Programming Committee (expected in the first half of 2013) a consultation process with the Reference Group will be launched.

INSTITUTIONAL DETAILS	
Name of the institution	<p>NCD EG on Non-Communicable Diseases related to Lifestylesand Social and Work Environments</p> <p>4th NCD EG meeting 23-25 May 2012 in Helsinki, Finland (24-25 May jointly with NDPHS/ OSH TG (Occupational Safety & Health Task Group)</p> <p>Reference NCD&OSH_4_joint-session-6./Info 1 Title Concrete NDPHS/NCD results and their impact Submitted by NCD-Secretariat Summary / Note NCD EG secretariat sent 08.05.2012 this requested feed-back to NDPHS Secretariat.</p> <p>Requested action For reference and information on NCD EG position</p> <p>NDPHS NCD EG on Non-Communicable Diseases related to Lifestylesand Social and Work Environments</p>
Name and position of the responding person	Mikko Vienonen, Chairperson of the NCD EG/ NDPHS
Contact details of the responding person	m.vienonen@kolumbus.fi. GSM +358-50-4421877
Contact details of the person appointed to further contacts with the Joint Programming Committee (if different)	

1. The draft regulations for the European Territorial Cooperation goal define that four of the following thematic objectives shall be selected for each transnational cooperation programme. Please evaluate the relevance of the thematic objectives for the work of your authority/organisation.

(0 = not relevant, 1= rather not relevant, 2 = relevant, 3 = very important)

(1) strengthening research, technological development and innovation;	1
(2) enhancing access to, and use and quality of, information and communication technologies;	1
(3) enhancing the competitiveness of small and	1

medium-sized enterprises, the agricultural sector (for the EAFRD) and the fisheries and aquaculture sector (for the EMFF);	
(4) supporting the shift towards a low-carbon economy in all sectors;	1
(5) promoting climate change adaptation, risk prevention and management;	1
(6) protecting the environment and promoting resource efficiency;	1
(7) promoting sustainable transport and removing bottlenecks in key network infrastructures;	1
(8) promoting employment and supporting labour mobility;	1
(9) promoting social inclusion and combating poverty;	2
(10) investing in education, skills and lifelong learning;	2
(11) enhancing institutional capacity and an efficient public administration.	2
Please provide an explanation for the thematic priorities of your institution	
The above listed thematic objectives are strongly biased towards environmental and direct short term economy related issues. There is no objective aiming at enhancing and promoting human public health and reducing avoidable mortality and morbidity - in other words - to value health as economic resource and capital. All other listed objective loose meaning if the individual is dead. Therefore, see additional topics below under item 2.	

2. Are there additional topics not covered by the list of thematic objectives above that your institution considers relevant for future transnational cooperation in the Baltic Sea Region? Please explain and justify the relevance of any additional topic.

Promoting health in all policies in a way that disease burden to individuals and societies due to lifestyle-related avoidable morbidity and mortality will be reduced. The biggest gains are to be made in relation to reduction of hazardous and harmful alcohol consumption, smoking, and overweight & obesity, increasing physical activity and fruit and vegetable intake.

While promoting sustainable transport, focusing also on traffic accident prevention. Huge differences in traffic accident mortality and trauma between Baltic Sea Region countries indicate that there is good opportunity for improvement. At present, traffic safety is not explicitly focused at.

3. Is there any particular thought on the following questions your institution would like to share with the Joint Programming Committee at this stage of the programme preparation?

What type of contribution to the implementation of the EU Strategy for the Baltic Sea Region do you expect from the future programme?

NDPHS/NCD contribution will specifically aim to reduce avoidable life-style related waste of human capital through strengthening management of change in health-in-all-policies and individual focused evidence based effective health promotion.
What types of projects should the programme finance (e.g. policy development, development of strategies, policy implementation, implementation of strategies, investments, exchange of experience)? What types of projects should be prioritised?
Policy focused changes in controlling alcohol and tobacco price and access, especially to protect young generation. # Behavioural insight to implement "nudging" as new incentive to help individuals and populations to adopt new and from health point of view better habits (e.g. sugar, fat, energy, etc.).
Should 'transnational pilot investments' be financed by the programme? If yes, what kind of investments should be supported?
As long as transnational pilot investments are not judged by their direct short term financial outcome ALONE, they could be cautiously supported. Typically what should not be supported would be investments that lead people to drink more alcohol, smoke, eat excessively and increase their sedentary lifestyle. In investments also their overall public health impact should be assessed and used as a criteria for financing decision.
Which topics and what type of actions are relevant for the cooperation with Russia and Belarus?
Especially with Russia and Belarus, where life-expectancy of men is about 14 years and that of women about 10 behind of EU average, public health topics are extremely important. Poor health of their populations is one of the main reasons of their economic stagnation, which has had to be compensated by wasteful and short-sighted exploitation of their natural resources.
Should there be a special support for the cooperation and exchange between projects supported by the future programme?
Collaboration between similar types of projects and learning from the successes and failures is important. However, even more important is what the projects actually accomplish - avoiding overloading projects by "empty" collaboration, which does not lead into any practical outcome.
Which measures do you propose to make the programme more attractive for the involvement of the private sector? For which topics and types of activities would the involvement of the private sector be most relevant?
Interest in entrepreneurial activity in public health is increasing in the whole region. It is however a difficult tool and requires good knowledge and skillful regulation. Financial gains alone should never be the only criteria for public health action. It is health gain that matters.
In EU Cohesion Policy there is a strategic shift from grant schemes to financial instruments. Do you see a demand for transnational financial instruments (giving loans to beneficiaries instead of grants)? If yes, for which topics and types of activities?

Financial instruments are better functional in areas where short term economic gains can be expected. In public health it suits if well controlled and regulated for curative and rehabilitative activities. However, when it comes to prevention of disease and disability, financial mechanisms through market (demand and purchase) often fail. Health tends to become a value only when you have lost it. Therefore public health improvements need public action and financing (=grants) in order to be implementable. For the same reason public health measures will always need public (tax or insurance) funding. Leaving it to markets becomes quickly very expensive to the society.

What kind of support measures for applicants and approved projects shall be organised by the programme?

Application procedures are often cumbersome, time consuming and hence expensive. There should be a step-wise process starting with a lighter way of presenting project concepts and ideas for scrutiny in order to avoid wasting of time and effort.

What kind of measures do you propose to reduce the administrative burden for beneficiaries?

Project plans are expected to be very detailed in areas, where it is not possible to predict time table 2-3 years ahead anyway. Control of funds is important but there should be a reasonable limit and enough flexibility as long as project produces the outcome that has been indicated.

4. Further comments

Please send the filled-in questionnaire by e-mail back to Ulrike Klose, Programme Assistant at the Joint Technical Secretariat of the Baltic Sea Region Programme 2007-2013 (ulrike.klose@eu.baltic.net) **no later than 15 May 2012.**

Thank you for your co-operation!