



THE BARENTS WORKING GROUPS

ANNUAL REPORT 2021

Name of the Working Group: **Joint Working Group in Health and related Social Issues (JWGHS)**

The current Chair and the Chairmanship period: **Sweden-Republic of Karelia 2020 – 2021**

1. Priorities of the Chairmanship

With reference to the public health and related social situation in the Barents region, the JWGHS has identified the following main priority areas for cooperation, as stated in the 6th Framework Programme for Cooperation on Health and Related Social Issues in the Barents Euro-Arctic Region 2020-2023:

- Prevention and control of communicable diseases
- Improved health and increased access to health care in sparsely populated areas
- Improved environment for growth and development of children and youth

In 2021, the JWGHS oversaw three expert programmes. These are:

- Barents HIV/AIDS and Tuberculosis Programme,
- Barents Programme on New Technology and Methods in Health Care in Sparsely Populated Areas,
- Barents Programme on Children and Youth at Risk (CYAR)

2. Meetings

The JWGHS usually meets twice a year with 1 ½ days meetings including study visits. This has not been possible due to the pandemic, but still meetings was carried out in May and November. The meetings were held online, due to restrictive measures related to the spread of coronavirus infection around the world. In addition, a digital study visit to Umeå and relevant presentations from the University of Umeå was arranged in the spring of 2021.

On the JWGHS meetings, various relevant topics has been discussed such as reporting from the prioritised programmes and presentations on current themes. There has also been presentations from

the BEAC Chair as well as the Chair of the Regional Council and the Barents International Secretariat. At the meeting in May, representatives for the Working Group on Environment and the Barents Secretariat was invited to give presentations and initiate a discussion with the JWGHs on health and climate change. At the meeting in November a new research project on health and welfare cooperation in the Barents region and key results of the Nordic – Russian cooperation programme on Antimicrobial Resistance Containment was presented. Presentations were also given on experience and prospects of using mobile multifunctional advisory and educational center of Medical Institute of PetrSU in medical care provision in sparsely populated areas of the Republic of Karelia. In addition presentations were also given from a study of childrens physical health and cooperation for supporting welfare of children and youth in the Barents Region.

The reporting and presentations during the meetings have been highly relevant in relation to the overall aim of the JWGHs, to increase regional and cross border cooperation to improve public health and social well-being, and the priorities such as prevention and control of communicable diseases, improved health and increased access to health care in sparsely populated areas and improved environment for growth and development of children and youth.

The chairmanship 2020 and 2021 by Sweden and the Republic of Karelia was the very first digital chairmanship in the Barents Working Group for Health and related Social Issues. Something to remember and interesting how this will affect future cooperation in the Barents Region and contribute to a future strengthened cooperation.

There have been several meetings in the three different programs within JWGHs for HIV/AIDS and Tuberculosis, New Technology and Methods in Health Care in Sparsely Populated Areas and the Programme on Children and Youth at Risk. The activities and results of these programs are reported separately below.

3. Activities and Results of the year

There has been activities carried out in all the JWGHs programmes, but it has been a challenge since many of the stakeholders have been involved in the management of the COVID 19 situation in their respective countries and regions.

HIV/AIDS and Tuberculosis

JWGHs recognizes the importance of prevention of and combat against HIV and tuberculosis as critical areas, addressed by a particular programme. The HIV/TB Programme serves as a cooperative framework for intensification of response to HIV, TB and associated infections. The Programme seeks to improve patient-oriented approaches, health education and training, and also to promote exchange of information and experiences.

The reductions in HIV and TB testing and screening seen in 2020 have largely been offset in 2021. A hybrid approach is now widely used in patient counseling. The staff still remain under pressure related to Covid-19 pandemic – many workers have been re-assigned to Covid-19 tasks. HIV and TB drug delivery to patients continues uninterrupted. The epidemiological trends for

HIV and TB in the Barents Region have been steadily positive. The Covid-19 pandemic and restrictive measures have not yet demonstrated any negative impact on the HIV and TB epidemic. Yet, the Covid-19 pandemic might have diminished the outreach to key populations. The HIV transmission patterns vary across the Barents Region – the heterosexual route dominates in the Russian part while the Nordic part is prevailed by transmission among MSM. The contribution of immigrants to HIV and TB epidemiological landscape is much stronger in the Nordic part of the Barents Region than in the Russian part.

International cooperation on HIV and TB continued through 2021 but all face-to-face international contacts were off. The activities have been re-arranged into the virtual mode. Norway has implemented several TB control projects in Murmansk Region, Archangelsk Region and Komi Republic. Finland has completed a Barents-wide infectious disease prevention action.

New Technology and Methods in Health Care

Rural areas in the Barents region face specific challenges in the provision of high quality, coherent, and comprehensive health services. The objectives of the Barents Programme on New Technology and Methods in Health Care in Sparsely Populated Areas aim to collect and exchange information on best practices to meet unmet health care needs in the rural areas and to share models for introducing health information technology in different fields of health and care systems.

Three online meetings of the Steering Committee for the Programme “New Technology and Methods in Health Care in Sparsely Populated Areas” were carried out in 2021. A questionnaire for the second assessment on Digital Governance was developed. The SC has established contact with Finnmarkssykehuset (Finnmark Hospital Trust), who expressed their interest in developing the project proposal and implementing the assessment process. Since the JWGHS took initiatives during the year to strengthen cooperation and awareness-raising on health and climate and consider to introduce climate change in the next Framework Programme 2024-2027, the SC on New Technology Programme suggested starting the development of a project related to climate impact analysis of distance health solutions. Active cooperation with the Expert Group on Primary Health from the NDPHS is continuing.

Three challenges for digital health was indicated by the first assessment under in the programme on New Technology and Methods in Health Care in Sparsely Populated Areas;

- 1) Governance in Digital Health Systems - rigid organizational structures and policy settings, experience in digital leadership
- 2) easy, real-time access to actionable, secured, and trusted data and
- 3) activity coordination between participants on the healthcare continuum on behalf of the Patients and Families.

To retain added value from greater use of digital health tools post COVID-19, active strategies are needed to build on the current momentum. To further assess how the Barents Regions are dealing with the digital transformation of Health Care and how governing e-health, which involves decision-making and e-health management, is organized in the regions, a second assessment of so-called Digital Governance is developed. The programme's activities were

presented at the Conference - Barents Health Collaboration after COVID 19 and High North Conference.

Children and Youth at Risk

While many children and young people in the Barents Region grow up in a safe, healthy and positive environment, vulnerable groups of children and young people continue to lack adequate protection. The Barents CYAR Programme prioritizes a sustainable and comprehensive approach to support children, young people, and families at risk in the Barents Region with the overall aim to promote the well-being of these groups.

Main focus of the Barents Programme on Children and Youth at Risk (CYAR) is to strengthen the child perspective, share knowledge of evidence and experience-based initiatives and the exchange of information and cooperation between the members of the Barents Region. A project organization and a steering committee has been established for the implementation of the programme. During the year several initial discussions of the aim of the programme has been carried out and a presentation was made on the autumn meeting of the JWGHS.

During the chairmanship of the Barents Regional Council, Västerbotten county, carried out a study on children's physical health in the region to understand the current situation regarding children's physical health and what can be learned and shared between regions. This is in line with the priority programme within the JWGHS on Children and Youth at Risk and was be presented on JWGHS meeting in November.

Health and Climate Change

Two presentations and discussions on health and climate change was organized by JWGHS during 2021 due to the update of the Action Plan on Climate Change for the Barents Cooperation. Changes are taking place in ecosystems and ecosystem services. We will, in the Arctic area, experience both an economic, health and social impact. Actions to strengthen cooperation and awareness raising on health and climate should be explored, e.g. on climate-sensitive infections, drinking water supply and food security.

Virtual study-visit in Umeå

In May the county of Västerbotten, within the presidency of the JWGHS, arranged a virtual guided tour in Umeå. There was also a digital visit to Umeå University with relevant, interesting and well-conducted presentations about research cooperation in the Barents, the climate change with aspects of climate on health in the Barents and preventing suicide in Sápmi.

Health Cooperation after Covid-19

A Barents conference on health cooperation in the Barents Region after Covid-19 was organized in September together with the Norwegian Presidency and the Barents Regional Council of

Västerbotten. The meeting was moderated by the chair of JWGHS and the chair of Barents Committee of Senior Officials.

Presentations were held on health co-operation after covid-19 within the framework of various defined priorities. A political discussion was also held between state secretaries / deputy ministers in Sweden, Finland, Norway and Russia on the important future cooperation in the field of health in the Barents region.

4. Evaluation of the work

The JWGHS enjoys strong support among the member countries and regions, and the level of commitment to the collaboration is high. The two-level structure of the collaboration is reflected in the JWGHS, where representatives of the national and regional health authorities meet twice a year to discuss relevant issues.

The pandemic has shown that health is the foundation of functioning and wealthy societies. Our societies are interlinked with each other, and we share same interests and we face common challenges. It is important to build a sustainable development by cross-border relations with national and regional cooperation. The JWGHS provides such a political structure for health and social cooperation with meetings across the borders and regions.

This year, but in a larger extent last year, the JWGHS-meetings and the implementation of the programs was a challenge. Restrictions caused by the spread of coronavirus affected the format of planned events and activities that was implemented online or by correspondence.

This year, the importance of joint efforts in the healthcare sector was underlined, especially in the fighting against infectious diseases. The development of telemedicine technologies and services to the population living in hard-to-reach areas has again confirmed its relevance and necessity.

It was only possible to organize shorter meetings on-line and therefore a lack of possibility to arrange for in-depth regional reporting, review, and discussions of the programs the working group run and no possibility to jointly conduct study visits. There was one excellent exception with a virtual study visit in Umeå, in the county of Västerbotten. Usually the JWGHS organize meetings 1 ½ days at a time twice a year. Still, there has been relevant reporting and discussion during the meetings.

On-line meetings have taught us a partly new way of communicating across national borders we have not used before. That is a positive experience to be further developed in the future.

It is rewarding and important that we work together across the sectors with a horizontal perspective within the Barents Cooperation. The JWGHS have had a very good and productive cooperation with Norway as a Chair of the BEAC and Västerbotten as a Chair of the Barents Regional Council. Two good examples of projects during the presidency have been participation in the Barents E-health conference and the Conference on Health Cooperation in the Barents Region after Covid-19.

Another important example is the work the JWGHS have done together with the Working Group on Environment on updating the Action Plan on Climate Change. Possibilities and actions to

strengthen cooperation and awareness raising on health and climate should be explored, e.g. on climate-sensitive infections, drinking water supply and food security and the possibility to introduce climate change in our next Framework Programme for JWGHS.