



South-eastern Europe Health Network
Health Development Action for South-eastern Europe

**Fourteenth Meeting of
Senior Government Officials of
Countries in South-eastern Europe**

Report on a Joint Council of Europe/WHO meeting
Durrës, Albania, 23–25 November 2006



STABILITY PACT
FOR SOUTH EASTERN EUROPE



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1. Introduction

This was the Fourteenth Meeting of the South-eastern Europe Health Network and the second one following the decisions (the Skopje Pledge and the Statutes of the South-eastern Europe Health Network) adopted at the Second Health Ministers' Forum for South-eastern Europe in Skopje, The former Yugoslav Republic of Macedonia on 25–26 November 2005. In accordance with the transfer of ownership process to the Region, Albania, which held the Presidency of the Health Network from July to December 2006, provided very significant support towards organizing and running the Meeting.

Based on the proposal of the Executive Committee, the Meeting elected Maksim Cikuli, Minister of Health of Albania, as the overall chair of the Meeting. Ranko Skrbic, Svetlana Spassova, Vlasta Hrabak-Zerjavic, Djordje Stojiljkovic, Silvia Morgoci, Alina Dobrota and Snezana Cicevalieva chaired the session meetings successively. Alexandre Berlin acted as rapporteur.

More than 50 participants attended the Meeting, including several ministers. Annex 1 shows the full list of participants.

The agenda shown in Annex 2 was adopted. The main agenda elements were:

- reviewing the progress of the technical projects since the Thirteenth Meeting of the Health Network in Jahorina, Bosnia and Herzegovina in June 2006;
- agreeing on and signing the decisions concerning component one of the project on improving neonatal and maternal health and component two of the Food Safety and Nutrition Project;
- discussion of the document *Proposal for regional collaboration on mental health in SEE* to transform the regional project into long-term regional collaboration;
- preliminary discussion of a declaration of the national health coordinators on “Strengthening regional capacities for epidemic preparedness and response in support of the implementation of the International Health Regulations”;
- briefing on the current status of the transformation of the Stability Pact for South Eastern Europe into a regional cooperation council and discussion of the consequences on the Health Network, including agreement on the urgent next steps to be taken; and
- presentation and discussion of a “new” area, evaluation of public health services (in accordance with the Skopje Pledge), for which support is available from the Council of Europe Development Bank.

2. Opening session

Maksim Cikuli, President of the Health Network for the second half of 2006, chaired the session. He welcomed the members of the Health Network (countries of south-eastern Europe and donor countries) present and extended a special welcome to the representatives of the European Commission, the European Investment Bank and the International Organization for Migration. He recalled the meeting of the health ministers of the region on the occasion of the fifty-sixth session of the WHO Regional Committee for Europe in September 2006 in Copenhagen during which they stressed the importance of the contribution of the Health Network towards cooperation in the health sector in the region, such cooperation being an essential contribution towards the European integration of the countries of the region.

The meeting was also welcomed by:

- Frosina Georgievska-Schenker of the Initiative for Social Cohesion of the Stability Pact, who stressed that the Health Network has come a long way from fighting for recognition to now setting an example;
- Michèle Meunier of the Council of Europe Development Bank, who emphasized the constructive partnership that has been established between the Bank and the Health Network;
- Piotr Mierzewski of the Council of Europe (co-organizer of the Meeting with Albania), who conveyed the greetings and appreciation of the Council of Europe for the work of the Health Network, which is building bridges between people, and emphasized the need to avoid the disappearance of social solidarity;
- Maria Haralanova of the WHO Regional Office for Europe, who emphasized in particular the gratitude of the WHO Regional Director for Europe, Marc Danzon, who considers the Health Network one of the key achievements of his first mandate and well as the importance of the implementation of the troika principle (past, present and incoming presidencies working together) and the presence of the European Commission at the meeting.

Istvan Szilard of the International Organization for Migration and Stephen Wright of the European Investment Bank expressed their appreciation for the invitation to the Meeting and their interest in exploring the possibilities for increased collaboration with the Health Network.

Snezana Cicevalieva, Chair of the Executive Committee of the Health Network, retraced the history of the Health Network and stressed the key principle of the Health Network – equal involvement of all countries in all its projects. She also recalled the emphasis of the Second Health Ministers' Forum for South-eastern Europe in Skopje in November 2005 on health as an essential component of economic development. While recognizing the progress that has already been made in the transfer of ownership to the region, she indicated that more time may be required to completely transfer this ownership.

Anna Jassem, representing the European Commission, conveyed the greetings of Markos Kyprianou, the Commissioner responsible for Health and Consumer Protection, and presented the current developments regarding the European Union (EU) public health policy and south-eastern Europe. The European Commission supports regional cooperation in health within, outside and across the EU borders. It warmly welcomes the excellent progress achieved by the Health Network in just five years. The main two topics of this Meeting (mental health and communicable diseases) as well as the other projects of the Health Network are among the priorities of EU public health policy. The European Commission will consider the practical ways of developing collaboration with the Health Network in all these areas, including participation in the various EU networks. The Health Network is particularly welcomed to provide input to the European Commission's forthcoming strategy on health. She also stressed that the new Instrument for Pre-Accession Assistance (2007–2013) will have a regional component; for health projects to be eligible for support, it is important that health be mentioned as a priority area in the national programming documents currently being negotiated. Annex 3 shows the full address on behalf of the European Commission.

3. Project progress reports

Following the decision taken at the Thirteenth Meeting of the Health Network in Jahorina in June 2006, the regional managers of each project prepared and distributed summary sheets, based on a commonly agreed template, in advance, not only to save time at the Meeting but also to allow for more substantive discussions. The participants greatly appreciated this approach.

Each of the regional managers introduced very briefly their respective project, highlighting only the very recent developments and achievements.

For the Mental Health Project, the participants strongly endorsed proposed evaluation of the project and the idea that it would be most desirable for the Health Network (through its Mental Health Project) to become an observer in the EU Platform on Mental Health. The participants also agreed that the project being presented in appropriate forums at the Council of Europe would be desirable.

The Health Network expressed its strong support for continuing the Communicable Diseases Surveillance Project, which was implemented under difficult circumstances. The Health Network welcomed the continued commitment and support of Belgium for this project.

The Food Safety and Nutrition Project, despite very modest resources, has achieved significant results – national plans and revised food safety laws. The main problem is now implementation, which requires substantial investment.

Participants expressed concern about the possible loss of leadership of the health ministries in relation to agriculture ministries. An integrated approach is strongly required; participants raised the need for a high-level meeting on this issue.

The Tobacco Project reported its main achievement – the signing and ratification by almost all countries in south-eastern Europe of the WHO Framework Convention on Tobacco Control despite the strong lobby of the tobacco industry in some of the countries. The countries now need to go beyond ratification and initiate implementation.

The Blood Safety Project has promoted the establishment of policies, strategies and plans of action in most countries. The outcome has also been valuable for the EU candidate countries in their dialogue with the European Commission. Further funding is now required.

The Health Information Systems Project, which was already identified as a priority at the First Health Ministers' Forum for South-eastern Europe in Dubrovnik, has been implemented in close connection with the Mental Health Project. The information system developed by the Health Information Systems Project will help with the planned evaluation of the Mental Health Project achievements. Further funding is now required for testing the information system in the community-based mental health centres.

4. Communicable diseases (including International Health Regulations)

Bernardus Ganter of the WHO Regional Office for Europe introduced the discussion of this very important topic by presenting the key features of the new International Health Regulations stressing the economic burden of communicable diseases – the economic burden of severe acute respiratory syndrome (SARS) has been assessed at between US\$ 50 and 90 billion – and the fact that increasing travel continues to have a growing impact on the transmission of communicable diseases. However, the recent experience with early detection and rapid response has shown that the number of potential cases can be very significantly reduced. Pandemic preparedness slows the development of an epidemic, giving time to better cope with the problem. The revised International Health Regulations significantly increase the obligations of the WHO Member States, in particular the public health services, permanent focal points and increased investigative and reporting obligations. They also introduce new obligations for WHO, as a global focal point.

Anna Popa (Greece) reviewed the large number of emerging viral diseases, and Mira Kojouharova (Bulgaria) and Silva Bino (Albania) reviewed the preparedness plans and implementation in their respective countries.

The discussion that followed these presentations showed clearly the importance of this issue and the seriousness with which it is tackled in south-eastern Europe, stressing, however, the importance of public health capacity-building. National surveillance systems face a major challenge beyond borders, and much closer coordination is needed – a common interest for the region and the EU. The WHO Regional Office for Europe indicated that Belgium will continue and expand its support for implementing the International Health Regulations in the region, and the European Investment Bank indicated its interest in capacity-building. The participants considered the circulated draft declaration of the national health coordinators of the Health Network on strengthening regional capacities for epidemic preparedness and response in support to the implementation of the International Health Regulations prepared by Albania to be of utmost importance. Based on the very positive response to the document at the Meeting, the participants agreed that, following internal consultations in the countries, formal feedback is to be forwarded to the regional project manager, with copies to the Secretariat by 15 January 2007. The redrafted document will be submitted for consideration at the special meeting of the Health Network in February 2007 for appropriate action.

5. Mental health

The focus of this theme was the transformation of the Mental Health Project into a regional long-term programme.

Matthijs Muijen (WHO Regional Office for Europe) presented an overview of the challenges of mental health reform as well as the origin of a number of mental health problems in the region – post-conflict situation, displaced persons, deterioration of services and increased socioeconomic problems. He stressed the importance of the need for strong leadership for change and the large diversity in the financial allocation to mental health within the overall health budget (between 3% and 9%) and the availability of structures and staff between the countries of the region. Further, the whole region suffers from a chronic lack of psychiatric nurses.

Heinz Katschnig (Austria) reviewed the standards of mental health care in western Europe and south-eastern Europe. He described in particular the critical situation in Romania – understaffing, overcrowding, remote location of facilities, etc. In general, the situation seems to be: a marginalized position of mental health, non-understanding of the field, fragmentation of care, stigmatization, discrimination and marginalization. Social services are urgently needed (social care, homes, support work, etc.).

Athanassios Constantopoulos (Health Network Executive Committee) reviewed the history of the Project since the Conference on Mental Health and Stigma in a World of Crisis was held in Athens in 2001. The project from its inception was conceived as a project of the countries, for the countries and by the countries with

the following prerequisites: at least three donors, equal distribution of donations directly to the countries and completion of each component before the start of the next one. The project was to be an instrument for reconciliation, peace and stability. Component three of the project focuses on training.

The Bosnia and Herzegovina delegation presented the discussion document *Proposal for regional collaboration in mental health in south-eastern Europe* as agreed at the Thirteenth Meeting of the Health Network in Jahorina.

Goran Cerkez recalled that the prevalence of mental health problems in the region, currently affecting about 12% of the population, is expected to increase. The philosophy of the discussion document is that mental health is not to be viewed from the psychiatric viewpoint but from the public health one. The paper is in line with the EU green paper in this area.

Ranko Skrbic reviewed the current reform of mental health in Bosnia and Herzegovina; the previous focus was exclusively on inpatient care with no role for community mental health. Now the focus is on dehospitalization, and the establishment of a continuum a link between community mental health centres, family care and inpatient care. All delegations welcomed the document and agreed with the scope and principles set out in it. Participants made several suggestions for inclusion in the follow-up document to be prepared – probably a decision to be signed by ministers. These suggestions include: the need for a clear role for the country centres and their relation to the regional centre; a detailed analysis of the costs of this initiative; the relationship with other initiatives in the Region, such as the one proposed by the International Organization for Migration for collaboration with the Health Network; assessment of needs and the development of applied research; increased use of the expertise developed in the Region; and an indication of how the key principles of the current project on mental health (equal involvement of all countries in the region) would be maintained.

This initiative is also important as it will serve as a model for transforming other projects of the Health Network into long-term programmes.

Participants agreed that comments and suggestions are to be sent to the WHO Regional Office for Europe by 15 January 2007 with copies to the Secretariat for a new document to be tabled for discussion at the next special meeting of the Health Network under the Bulgarian Presidency in February 2007.

Following this discussion, Istvan Szilard presented the health-related activities of the International Organization for Migration in the region, reviewing the importance of migration (legal, illegal and forced) in the world. Currently more than 40 million people in western and central Europe are living outside their country of birth, and migrants comprise up to 90% of the population growth. In south-eastern Europe, internal migration is also very important as is human trafficking and smuggling. The real availability of health services to migrants

must be questioned and, in particular, the special psychosocial needs of migrants. The higher education sector does not seem flexible enough to cope with the new demands. The International Organization for Migration is currently providing community-based mental health assistance to vulnerable people and displaced communities in south-eastern Europe and is ready to envisage a joint programme with the Health Network establishing community-based mental health centres for displaced and Roma populations based on the model of the Health Network community-based mental health centres, while taking into account the special needs of these populations. The major issue of both these projects is to move from pilot schemes into the mainstream of health services and the need to empower the users.

The participants welcomed the presentation. Maria Haralanova (WHO Regional Office for Europe) stressed that the Health Network is open to partnerships and cooperation needs to be strengthened between all the international organizations active in health in the region. The Health Network is already actively exploring with the International Organization for Migration possible synergy in relation to its ongoing and forthcoming projects. Piotr Mierzewski (Council of Europe) indicated the considerable interest of the Council of Europe in the International Organization for Migration work with the Roma.

6. Other issues: neonatal and maternal health and evaluation of public health systems

Neonatal and maternal health

The Second Health Ministers' Forum for South-eastern Europe in Skopje recognized that the high neonatal mortality in the region requires urgent attention; neonatal and maternal mortality in south-eastern Europe is still significantly higher than in the EU, for a variety of reasons, including the lack of equity. This higher mortality also significantly affects the demographic changes in the region. After the Regional Manager, Stelian Hodorogea (Republic of Moldova) presented the project on neonatal and maternal health and its three components, the decision on component one (raising the quality of care provided in maternal and perinatal health by developing and updating national standards, guidelines and protocols) was presented for discussion, agreement and signature. The importance of the support and technical partnership of Norway was stressed.

Evaluation of public health systems

Michèle Meunier (Council of Europe Development Bank) indicated the readiness of the Bank to continue its partnership with the Health Network, emphasizing that public health services seriously lag behind in the reform of the health systems in the region and the need to develop a common vision for the region. Not only does public health need to be placed on the political agenda but also, as a result, to lead to improved capacity- and institution-building.

The Health Network agreed on the importance of initiating the project proposed by the Council of Europe Development Bank on the evaluation of public health services in south-eastern European countries. The former Yugoslav Republic of Macedonia will lead this project, which will be run with corresponding country offices like all the other projects. The WHO Regional Office for Europe indicated its very strong support for this project and its practical commitment with the provision of expertise. The outcome of this project will provide an important input to the WHO Regional Office for Europe Conference on Health Systems in 2008. The project will also be an overarching long-term theme for the Health Network.

7. Transferring ownership of the Health Network to the region, the Stability Pact beyond 2007 (regional cooperation council), developing regional collaboration in health and improving the efficacy and visibility of the Health Network

Maria Haralanova (WHO Regional Office for Europe) recalled the decisions taken by the Second Health Ministers' Forum for South-eastern Europe in Skopje to initiate the slow process of transferring ownership of the Health Network to the region and the results thus far achieved.

Frosina Georgievska-Schenker (Initiative for Social Cohesion of the Stability Pact) summarized the current developments regarding the transformation of the Stability Pact into a regional cooperation council. The seat of the Secretariat in the region and the name of the political coordinator from the region have to be agreed in 2007. The number of priority areas will be reduced as well as the size of the secretariat. It is essential for the Health Network to define its structure and its relation with the new council.

The Meeting, having expressed unanimously its strong support for the continuity of the Health Network, agreed to send a clear and strong message to the next meeting of the Regional Table of the Stability Pact in Zagreb in May 2007. The message would stress the importance of the Health Network, the impact in the countries of what it has already achieved and the need for its continuity with an appropriate link to the regional cooperation council that will be established. The participants agreed that the Presidency of the Network and the Presidency of the Executive Committee will deliver such a statement at the Zagreb meeting. To that effect, the forthcoming Bulgarian Presidency of the Network has agreed to organize a special meeting of the Health Network in February 2007 with the participation of the political coordinators and the executive committee.

Simultaneously, the Health Network urges all the political coordinators to sensitize the national authorities at the highest political level to the need to convey a very strong message on behalf of the Health Network at the Zagreb meeting.

8. Signing of decisions

At a signing ceremony, the following decisions were signed:

- component two of project on food safety and nutrition south-eastern Europe – establishment of a harmonized and integrated model of food safety and nutrition services; and
- component one of the project on strengthening national capacities for improving maternal and neonatal health in south-eastern Europe – raising the quality of care provided in maternal and perinatal health by developing and updating national standards, guidelines and protocols.

9. Comments, conclusions, recommendations and decisions

9.1 This has been the second successful meeting of the South-eastern Europe Health Network under the transfer of ownership process to the region following the ministerial decisions at the Second Health Ministers' Forum for South-eastern Europe in November 2005. More than 50 participants attended, including important delegations from several countries with several ministers attending. In addition, representatives from the European Commission, the European Investment Bank and the International Organization for Migration attended as well as several experts in infectious diseases, mental health and infant and maternal health.

9.2 The meeting, while reviewing the progress of ongoing projects, focused its substantive discussions, as agreed at the Thirteenth Meeting of the Health Network in Jahorina, on infectious diseases and mental health, in the latter case with a view to establishing a long-term programme for regional collaboration.

9.3 The Health Network warmly welcomed the participation of a representative of the European Commission at the Meeting and noted with considerable interest the activities of the European Union in health and the openness of the European Commission to develop closer collaboration with the Health Network, in particular by opening its various platforms to participation by the Health Network. It is essential for the Health Network to ensure that health be given sufficiently high priority at the highest political level in all the south-eastern European countries to ensure the possibility of EU regional funding in health in the context of cross-border cooperation.

9.4 The Health Network expressed its thanks to the European Investment Bank representative for his willingness to explore the possibilities for the Bank to become a partner of the Health Network and be directly involved in the activities of the Health Network, as the Bank defines itself as a policy-driven public bank, fully in line with the scope of the Health Network.

9.5 The Health Network very much appreciated the presentation by Istvan Szilard of the International Organization for Migration of its activities in health and particularly mental health for migrant populations as being very much in accordance with the Health Network and complementary to its activities. The Health Network agreed that the offer of collaboration by the International Organization for Migration with the Health Network in extending the current scope of the model community mental health centres to other population groups should be explored diligently, and the Health Network should table a specific proposal for discussion as soon as possible.

9.6 The Meeting, having expressed unanimously its strong support for the continuity of the Health Network, agreed to send a clear and strong message to the next meeting of the Regional Table of the Stability Pact in Zagreb in May 2007. The message would stress the importance of the Health Network, the impact in the countries of what it has already achieved and the need for its continuity with an appropriate link to the regional cooperation council to be established. The Presidency of the Network and the Presidency of the Executive Committee will deliver such a statement at the Zagreb meeting. To that effect, the forthcoming Bulgarian Presidency of the Network has agreed to organize a special meeting of the Health Network in February with the participation of the political coordinators and the Executive Committee.

Simultaneously, the Health Network urges all the political coordinators to sensitize the national authorities at the highest political level to the need to convey a very strong message on behalf of the Health Network at the Zagreb meeting.

9.7 A specific EU web domain has been secured for the Health Network; it now urgently needs to be developed. The Thirteenth Meeting of the Health Network in Jahorina highlighted the need for increased visibility for the Health Network. As Slovenia will be holding the EU Presidency during the second half of 2007, it should be invited to the next special meeting of the Health Network to share its views how it could highlight the Health Network during its Presidency.

9.8 The reports on the seven technical projects are based on a common template, as agreed at the Thirteenth Meeting of the Health Network in Jahorina. Although these reports are in various stages of development, they showed the very significant progress and achievements made by all of them. Many of them have now reached the stage of practical implementation, often requiring significant investment and corresponding political decisions. Some output of the projects has the potential for being directly implemented in other health programmes at the national level.

9.9 The Health Network considered the draft Declaration on Epidemic Preparedness Implementation of the International Health Regulations tabled by the Albanian delegation of utmost importance. Based on the very positive response to the document at the Meeting, the Health Network agreed that, following internal consultations in the countries, formal feedback is to be forwarded

to the regional project manager with copies to the Secretariat by 15 January 2007. The redrafted document will be submitted for consideration at the February special meeting of the Health Network for appropriate action.

9.10 The revised International Health Regulations increase significantly the obligations of the Member States, in particular the public health services, permanent focal points and increased investigative and reporting obligations. In view of the importance of rapidly implementing the International Health Regulations in the region, the Health Network strongly urges its member countries to regularly exchange information on their respective plans and measures taken for implementation. This will both facilitate and speed up the implementation process in the whole region and the interaction between the established national focal points.

9.11 The Health Network warmly thanked the Bosnia and Herzegovina delegation for preparing and tabling of the discussion document *Proposal for regional collaboration in mental health in south-eastern Europe* as agreed at the Thirteenth Meeting of the Health Network in Jahorina.

All delegations agreed with the scope and principles set out in the document. Several suggestions were made for inclusion in the follow-up document to be prepared – probably a decision to be signed by ministers. These suggestions include: the need for a clear role for the country centres and their relation to the regional centre; a detailed analysis of the costs of this initiative – the relationship with other initiatives in the region, such as the one proposed by the International Organization for Migration for collaboration with the Health Network; assessment of needs and the development of applied research; increased use of the expertise developed in the region; and an indication of how the key principles of the current project on mental health (equal involvement of all countries in the region) would be maintained.

The importance of this initiative must also be seen in the light that it will serve as a model for transforming other projects of the Health Network into long-term programmes.

The Meeting agreed that comments and suggestions are to be sent by 15 January 2007 to the WHO Regional Office for Europe with copies to the Secretariat for a new document to be tabled for discussion at the next special meeting of the Health Network under the Bulgarian Presidency in February 2007.

9.12 Neonatal and maternal mortality in south-eastern Europe is still significantly higher than in the EU, for a variety of reasons, including the lack of equity. This higher mortality has also significantly affects the demographic changes in the region. The Meeting emphasized the importance of the support and technical partnership of Norway. After the Regional Manager, Stelian Hodoroagea (Republic of Moldova) presented the project on neonatal and maternal health and its three components, the decision on component one

(raising the quality of care provided in maternal and perinatal health by developing and updating national standards, guidelines and protocols) was presented for discussion, agreement and signature.

9.13 The former Yugoslav Republic of Macedonia will lead a new project on evaluation of Public Health Services, which will be run with corresponding country offices like all the other projects. The meeting welcomed the kind financial support of the Council of Europe Development Bank. The WHO Regional Office for Europe indicated its very strong support for this project and its practical commitment with the provision of expertise. The outcome of this project will provide important input to the WHO Regional Office for Europe Conference on Health Systems in 2008. The project will also be an overarching long-term theme for the Health Network.

9.14 The Meeting agreed in principle that a special meeting of the Health Network under the Bulgarian Presidency will take place in February 2007, probably in Sofia and that the next regular meeting of the Health Network will take place in Varna, Bulgaria in June 2007; the exact dates will be communicated as soon as possible. The Executive Committee will meet the day before each of these meetings.

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Fourteenth meeting of senior government officials of countries in south-eastern Europe

WHO Regional Office For Europe

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Regional Adviser for Communicable Disease Surveillance and Response

Maria Haralanova

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Matthijs Muijen

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PRELIMINARY PROGRAMME

Thursday, November 23, 2006

09:00 – 10:30 Opening session

Welcome addresses:

- Prof Maksim Cikuli, President, South Eastern Europe Health Network (Jul-Dec 2006), Minister of Health of Albania
- Ms Frosina Georgievska, Programme Officer, Stability Pact Initiative for Social Cohesion
- Dr Piotr Mierzewski, Head ad interim of Health Division, Council of Europe
- Ms Michelle Meunier, Director, Research & Analysis Department, Council Of Europe Development Bank
- Dr Istvan Szilard, IOM Senior Migration Health Adviser for Europe& Migration Health Liaison Person to EC/EU
- Mr Steve Wright, Associate Director, Human Capital, European Investment Bank
- Dr Maria Haralanova, Regional Adviser, Public Health Services, WHO Regional Office for Europe

Election of Officers

Approval of scope and purpose and programme

The progress since the 13th SEE Health Network Meeting

Introduction

Ms Snezana Cicevalieva, Chair, SEE Health Network Executive Committee

“Current developments regarding the EU public health policy and the SEE region”

Ms Anna Jassem, Directorate General for Health and Consumer Protection, European Commission

10:30 – 11:00 *Coffee Break*

11:00 – 12:30 Project Progress Reports

- Mental Health Project – Ms Vesna Puratic, Regional Project Manager
- Communicable Disease and Surveillance – Dr Silva Bino, Regional Project Manager
- Food Safety and Nutrition – Dr Aleksandra Makaj, Regional Project

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Manager

- Tobacco Project --Dr Marta Civljak, Regional Project Manager
- Blood and Blood Components Safety and Quality - Dr. Alina Mirella Dobrotá, Regional Project Manager
- Health Information Systems – Dr. Michail Okoliyski, Regional Project Manager
- Mother and Neonatal Health Project – Dr Stelian Hodorozea, Regional Project Manager

12:30 – 14:00 *Lunch*

14:00 – 15:30 **Review of the transfer of ownership process to the region**

Dr Maria Haralanova, Regional Adviser, Public Health Services,
WHO Regional Office for Europe

Discussions

Evaluation of Public Health Services in SEE countries.

Ms Michelle Meunier, Director, Research & Analysis Department, Council Of
Europe Development Bank

15:30 – 16:00 *Coffee Break*

16:00 – 17:30 **Decisions on upcoming projects**

- Decision on Component One of the SEE Project on “Improving Neonatal and Maternal Health”
- Decision on Component Two of the SEE Project on Food and Nutrition

Upgrading the regional public health capacities of the health systems in South-eastern Europe to meet the challenges of newly emerging threats to the health of their populations (Pandemic preparedness)

- Communicable disease control and surveillance, importance and challenges for EURO region
Dr Bernardus Ganter, Regional Adviser, WHO Regional Office for Europe

Discussion

- Regional Project on CDS project in the SEE region: Project Highlights and steps forward
Silvia Bino, Regional Project Manager, SEE CDS Project

Discussion

Friday, November 24, 2006

08:30 – 10:30 **International Health Regulations**

Dr Bernardus Ganter, Regional Adviser, WHO Regional Office for Europe

Discussion

Pandemic Preparedness in South East European Countries. (Bulgaria and Albania)

Dr.Mira Kojouharova, Dr.Eduard Kakarriqi, Country Project Manager

Discussion

Surveillance Systems and health sector reform

Introduction to the discussion paper – *European expert*

Discussion

Draft Regional Policy Paper on upgrading the regional public health capacities of the health systems in South-eastern Europe to meet the challenges of newly emerging threats to the health of their populations

10:30 – 11:00 *Coffee Break*

11:00 – 12:30 **Towards a long-term regional cooperation for modern, accessible and efficient mental health services.** Introduction to health systems reforms and their implication to mental health: Second Health Ministers Forum: Commitment to future

Dr Maria Haralanova, Regional Advisor, Public Health Services, WHO Regional Office for Europe

Mental Health Context

Challenges in mental health reform

Dr Matt Muijen, Regional Advisor, Public Health Services, WHO Regional Office for Europe

Discussion

Standards of mental health care in Western Europe and new member states

Professor Heinz Katschnig, Chairman, Department of Psychiatry Medical University of Vienna

Discussion

IOM experience in providing community based health assistance for vulnerable people and communities

Mr Istvan Szillard, Regional Liaison and Coordination Office the European Union, International Organization for Migration

Discussion

12:30 – 14:00 *Lunch*

14:00 – 15:30 **Mental Health Reform in the South-eastern Europe**

- Current status of the MNH reform process in SEE; challenges, opportunities and the way forward

Dr Neven Henigsberg, Country Project Manager, Croatia

- Community Mental Health Services as a cornerstone of the reform

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process in the region

Dr Vladimir Ortakov , Country Project Manager, The former Yugoslav Republic of Macedonia

- The Mental Health Project for south eastern Europe – a project of the countries, by the countries and for the countries
Prof. Athanassios Constantopoulos, Consultant Psychiatrist and Director Regional General Hospital of Athens, (G. Gennimatas)Mental Health Centre

Discussions

15:30 – 16:00 *Coffee Break*

16:00 – 17:30 Long term programme for regional collaboration in mental health

- Mission and Vision
- Objectives
- Values and Principles
- Programme / Content
- Resources Needed
- Sustainability

Introduction by representatives of Bosnia and Herzegovina , leading country of the SEE Mental Health project

Discussion

Saturday, November 25, 2006

**09:00 – 10:30 Long term programme for regional collaboration in mental health
Discussions and conclusion**

10:30 – 11:00 *Coffee break*

**11:00 – 12:00 Conclusion and recommendation
Closure**

Address of the European Commission

Mister President, Ladies and Gentlemen,

- On behalf of Commissioner Kyprianou, I would like to express his warmest congratulations to the organisers of this meeting. Unfortunately it was not possible for Commissioner Kyprianou to join the Meeting himself.
- Regional cooperation is a very important element of the European Union. We have discovered a long time ago that many challenges, from economic reconstruction to increasing the scientific research, cannot be addressed by individual countries alone.
- Likewise, health threats - such as HIV/AIDS or most recently avian flue – and also many other health problems can be effectively addressed only by a trans-border approach.
- That is why the EU has been a strong supporter of regional structures both within, outside and across EU-borders.
- Examples of such cooperation include the Nordic Council at EU northern borders and the Barcelona process in the Mediterranean region. In both cases, regional cooperation has important links with the European Union.
- That is also true for South East Europe. Enhanced regional cooperation is one the major objectives set down in the Thessaloniki agenda, endorsed in the EU-Western Balkan Summit of June 2003, to strengthen the stabilisation and association process.
- The Stability Pact for South-Eastern Europe has been extremely successful over the last six years in promoting regional cooperation in various fields, including health.
- We are truly impressed with the excellent progress achieved by the Health Network of the Pact in just 4 years of its existence.
- The two main topics of this conference – communicable diseases and mental health – are clear priorities of the EU public health policy. We are delighted to see that the draft documents circulated in advance of the meeting are very much in line with our own thinking here.
- Likewise, the projects on tobacco, blood safety, maternal health and health information all seem very timely and useful.
- Thank you once again for the invitation to join this meeting. It will be very interesting for me to get acquainted with the various projects realised by the Network and the discussions on its future.
- I would like to wish you fruitful discussions during this 3-day meeting. Thank you very much for your attention.