

15 YEARS OF ALLIANCE FOR HEALTH AND WELL-BEING IN SOUTH-EAST EUROPE

FOURTH SOUTH-EASTERN EUROPE HEALTH MINISTERIAL FORUM

Health, well-being and prosperity in South-Eastern Europe by 2030
in the context of the 2030 Agenda for Sustainable Development
Chisinau, Republic of Moldova, 3–4 April 2017

REPORT

OF

THE FOURTH SOUTH-EASTERN EUROPE HEALTH MINISTERIAL FORUM

ON

“HEALTH, WELL-BEING AND PROSPERITY IN SOUTH-EASTERN EUROPE BY 2030 IN THE CONTEXT OF THE 2030 AGENDA FOR SUSTAINABLE DEVELOPMENT”

CHISINAU, REPUBLIC OF MOLDOVA
03-04 APRIL 2017

SEEHN MEMBER STATES



SEEHN PARTNERS



*THE SOUTH-EASTERN EUROPE HEALTH NETWORK EXPRESSES ITS
ACKNOWLEDGEMENT AND GRATITUDE TO WHO REGIONAL OFFICE OF EUROPE FOR
ITS CONTINUOUS POLITICAL AND TECHNICAL LEADERSHIP AND SUPPORT IN THE MOST
EFFICIENT AND HIGH QUALITY MANNER*



**Family photo of the participants of the Joint SEEHN/WHO Regional Office for Europe FOURTH SOUTH-EASTERN EUROPE HEALTH MINISTERIAL FORUM, 03-04 April 2017
Chisinau, Republic of Moldova**

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FOREWORD

The complex issues such as health require shared efforts. Thus, it is indisputable the fact that health challenges cannot be solved comprehensively by any part of a Government alone. At the same time, global and regional influences on health are evolving very quickly and require new skills of leadership and coherent governance. Global health challenges create a necessity for everybody to step in and strengthen the joint effort in response to those challenges and opportunities and this call needs to be widely recognizable within and relevant to society as a whole.

In response, being established in 2001, the South Eastern Europe Health Network (SEEHN) has proved a high degree of efficiency and effectiveness during the past fifteen years – developing, promoting and supporting regional cooperation and technical activities in public health in the South Eastern Europe. However, it is of note that regional cooperation in public health remains of the highest priority to support political cooperation and economic development in the South Eastern European region. Also, despite of the political changes and emerging challenges, to which the SEE Health Network has had to adapt during the past fifteen years, actually the European Union continues to emphasize the public health as a tool for economic and human development.

In this context, in the period of 3-4 April 2017, under the Presidency of the Republic of Moldova, the Fourth SEE Health Ministerial Forum on the theme of *“Health, well-being and prosperity in SEE by 2030 in the context of the Sustainable Development Goals of the UN”*, took place at Chisinau. This Forum gathered the ministers of health of SEE Health Network member states and represented an essential cornerstone of regional cooperation for public health and well-being in SEE, discussing the political and technical collaboration and the way forward for a closer partnership.

Thereby, the Fourth SEE Health Ministerial Forum ended with the singing of the *Chisinau Pledge*, which will be providing us with strategic guidance and will serve as a framework to boost interventions in the following areas: sustaining and strengthening the regional cooperation in public health in South-eastern Europe; achieving the United Nations Sustainable Development Goals (SDGs); achieving universal health coverage (UHC) for our populations; further upgrading public health services and capacities; further strengthening our mutual regional and national action in cases of regional emergencies and related important migrations; working more closely and efficiently with our partners to make the best use of their unprecedented support.

Therefore, we strongly believe that our commitment and the policy directions we have agreed to, will contribute to implementing the global United Nations and World Health Organization agenda and the SDGs. Also, we are opened and ready to share with any other region, group of countries or individual states our experiences and lessons learned.

Using this occasion, on behalf of the nine South East Europe countries, I would like to express true gratitude to the World Health Organization and in particular to its European Regional Office for tremendous support over the last years to the South Eastern Europe Health Network, which makes the Region’s voice heard, for supporting us to advance public health gains and our genuine aim and commitment to achieve the SDGs.

Dr. Ruxanda Glavan
President of the SEE Health Network Presidency
Minister of Health of the Republic of Moldova

ACKNOWLEDGEMENTS

We would like to express deepest appreciation to Dr. Maria Ruseva for her in depth involvement and great contribution, guidance throughout the entire process of the 4th Ministerial Forum organization. With Dr. Ruseva support and determination, outstanding diplomacy the Ministerial Forum could happen and already received the acknowledgement it deserve culminating with an agreement at the regional level through the Chisinau Pledge. Sincere gratitude we express to Dr. Berlin and to Prof. Alex Leventhal, who supported us with valuable advises in the most critical moments and have been present throughout the entire process of Ministerial Forum organization.

High appreciation goes to Dr. Zsuzsanna Jakab, WHO Regional Director for Europe for exceptional support provided to the SEEHN as a Regional Structure, in particular to this high level event, to ensure South Eastern European voices a heard at the global level and one is left behind. Many thanks go also to Dr. Lucianne Licari, who from the very early stage till the very end was the one and the pillar of this Ministerial Forum. Special thanks are due to all the panelists for their time and valuable contributions that made the Conference so meaningful for the SEE Ministers and is expected to impact regional health policies. Particular thanks are conveyed to WHO Country Office in Moldova and Dr. Haris Hajrulahovic and his team who greatly contributed to the excellent organizational performance of the event.

Our sincere appreciation goes to the Host Country, Republic of Moldova and the current President of the SEEHN Presidency Dr. Ruxanda Glavan, and Chair of the SEEHN Executive Committee Dr. Nicolae Jelamschi, who offered all their energy and efforts to ensure a successful Ministerial Forum concluded with a regional agreement aimed to improve SEE populations' health gains.

Particular recognition shall be paid to the entire SEEHN Secretariat team led by the Director Dr. Mira Jovanovski Dasic. Each member of the team contribution was important, priceless and throughout the entire long organizational process. Last minute mobilization and contribution of all was vital to the success of the Forum.

Last but not least, many thanks to all the interpreters, photograph, technical persons, design and decoration that made the event to be rated at the highest level and be a perfect coordination and a great team work.

LIST OF ABBREVIATIONS

BiH	Bosnia and Herzegovina
CDs	Communicable Diseases
CO	Country Office
CVD	Cardiovascular Diseases
EC	European Commission
EHFG	European Health Forum Gastein
EU	European Union
GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria
HiAP	Health in All Policies Approach
HRH	Human Resources in Health
HSS	Health System
IHR	International Health Regulation
IOM	International Organization for Migration
IPA	Instrument for Pre-Accession Assistance
MDG	Millennium Development Goals
MDR	Multidrug Resistant
MH	Mental Health
MKD	Republic of Macedonia
MNE	Montenegro
MOH	Ministry of Health
MoU	Memorandum of Understanding
NCD	Noncommunicable Disease
PH	Public Health
RCC	Regional Cooperation Council
RHDC	Regional Health Development Centers
RM	Republic of Moldova
RS	Republika Srpska



SDG	Sustainable Development Goals
SDH	Social determinants of health
SECID	Southeast European Centre for the Surveillance and Control of Infectious Diseases
SEE	South Eastern Europe
SEEHN	South Eastern European Health Network
SOPs	Standard Operating Procedures
SRSS	Structural Reform Support Service
Stability Pact	Stability Pact for South-eastern Europe
TB	Tuberculosis
TB-REP	TB-Regional Eastern European and Central Asian Project on Strengthening Health Systems for Effective TB and drug resistant TB prevention and care
UHC	Universal Health Coverage
UN	United Nations
WHO	World Health Organization

REPORT¹

INTRODUCTION

This was the fourth Forum of the Ministers of Health of the Members States of the SEE Health Network jointly called and organized by the Regional Director of the WHO Regional Office for Europe and the Minister of Health of the Republic of Moldova, current President of the SEE Health Network Presidency (second half of the 2016 and the first half of 2017).

This event was attended by the Ministers of Health and Country Delegations of the SEEHN Member States², namely Albania, Bosnia and Herzegovina, Bulgaria, the State of Israel, Republic of Macedonia, Republic of Moldova, Montenegro, Romania and the Republic of Serbia, and/or their representatives, the partner countries and partner international organizations, directors of the SEE Health Network (SEEHN) Regional Health Development Centers (RHDC) and other key participants. For further information, please, see the Forum's List of Participants enclosed in Annex 1. The final Programme of the Forum is provided for information in Annex 2.

The regional cooperation for public health was formalized when the ministers of health of the SEEHN adopted and declared their commitments to the provisions of the Dubrovnik, Skopje and Banja Luka Pledges, endorsed at the First, Second and Third Forums in 2001, 2005 and 2011, respectively.

Thus, the period 2014 - 2016 have had extremely intensive years for the regional collaboration for health, particularly with regards to the implementation of the Banja Luka Pledge (2011), the SEE 2020 Growth Strategy (2013) embedding health as a separate dimension that contributes to economic development, growth and prosperity. The EU 2020 Strategy and the WHO Europe Health 2020 Policy Framework (2012), as well as the European Action Plan on Strengthening Public Health Capacities and Services (2012), the WHO Europe Action Plan for the Prevention and Control of Noncommunicable Diseases, the International Health Regulations and many more global and European policies and decisions have served the SEEHN countries as their foundations and strategic policies and cornerstones. **(2016).**

Because of the above and in view of the current political, economic, social and health changes that have taken place in the region since the endorsement of the SEE Health Network Memorandum of Understanding in 2008, it was of utmost importance that this Ministerial Forum was conducted accordingly in order to provide for strengthened leadership, governance, managerial and technical opportunities for the Network and the regional cooperation in public health in SEE to develop further.

¹Some PowerPoint presentations and statements are available at request at the SEEHN Secretariat. Following intensive and exchanges of opinions, lessons learned and constructive discussions, the SEE Ministers of Health and their representatives approved the draft "Chisinau Pledge" which is enclosed in Annex 3 to this report.

²Throughout this document, Minister of Civil Affairs on behalf of the Bosnia and Herzegovina's health authorities shall be understood as Ministry of Civil Affairs of Bosnia and Herzegovina, Federal Ministry of Health of the Federation of Bosnia and Herzegovina, Ministry of Health and Social Welfare of the Republic of Srpska and Department of Health and other services of Brcko District of Bosnia and Herzegovina

The fourth Forum focused on the topic of ***“Health, Well-Being and Prosperity in South-Eastern Europe by 2030 in the Context of the 2030 Agenda for Sustainable Development”***.

The countries of South Eastern Europe (SEE) have shown recent improvements in health, but major gaps still exist in the future to be healthy and in combating risk of illness, which have negative consequences in terms of the capacities of individuals, families and communities to realize their social, economic and human potential, particularly in comparison to the European Union (EU) Member States. In addition, the SEE countries are facing serious demographic changes that affect both health and the health systems, such as internal migration, ageing population, cross-border migration and migration of the health work force. Today the burden of noncommunicable diseases (NCD) represents the predominant health challenge in the region.

The Fourth Forum, under the theme “Health, well-being and prosperity in SEE by 2030 in the context of the Sustainable Development Goals of the UN”, follows 15 years of SEE cooperation (2001–2016), streamlined towards the global and European efforts for achieving improved health, equity and accountability in health, building on major European resolutions, charters, communiqués, treaties, frameworks and action plans, as well as the new European policy framework for health and well-being, Health 2020.

In continuation of the efforts to implement the principles, priority areas and actions of the European policy for health and well-being “Health 2020” and the SEE Strategy “Jobs and Prosperity in a European Perspective” 2020 (SEE 20202), the main purpose of the Forum was “to introduce joint sub-regional and national actions in the SEE region for implementing and achieving the United Nations Sustainable Development Goals (SDGs), with the objective of better health, equity and accountability”. This is a continuation of and complementary to the European “Health 2020” and the SEE 2020 Strategy.

The SEEHN Memorandum of Understanding of 2008 and its Addendum of 2011, therefore, needed revisions, in view of the current and future developments of the SEEHN and its governance and institutional mechanisms.

The Forum brought together high-level representatives of governments in the SEE region and beyond, in order to share best practices and identify common challenges. The topics of discussion included the status and challenges of noncommunicable diseases, universal health coverage, cross-border public health, emergencies and migration, as well as joint efforts to address issues related to the Social Determinants of Health (SDH) and the Sustainable Development Goals by 2030 (SDGs 2030).

The SDGs 2030 Agenda, addresses complex challenges of health and well-being by promoting an integrated policy response, across sector and portfolio boundaries, incorporating concern for health and health equity impact, into the policy development processes of all sectors and agencies. This allows governments to address the key determinants of quality of life, well-being, health and health inequities in a more systematic way and enables them to take into account the benefit of improved population health for the goals of other sectors.

The SEE regional cooperation on public health remains a high priority for underpinning the political cooperation and economic development in the SEE region, thus, facilitating confidence-building and supporting the European and Euro-Atlantic integration.

The Fourth Forum reviewed the performance of the SEEHN during the past 15 years and identified the opportunities for future cooperation. The Forum also reviewed the status, national capacities and future opportunities related to the achievement of the SDGs in the SEE region.

The SEE regional cooperation in public health has entered a very important phase with changes in the political set-up and emerging new entities, in particular the Regional Cooperation Council and two of the SEEHN Member States (Bulgaria and Romania) already members of the European Union. In addition, former members of the SEEHN, Croatia and Slovenia, which are also EU member countries, currently are partners to the SEEHN. Such developments have required the SEEHN to adapt to the new realities and to develop a more regionally owned and led framework for cooperation.

The Forum was a firm step along the pioneering path taken by the ministers of health of the SEEHN in 2001, when they have signed the Dubrovnik Pledge, the first-ever political document on cooperation on health development in the SEE region.

The expected outcomes of the Fourth Forum were reached, namely: the political commitment of all SEE governments to an expanded sub-regional cooperation for introducing and/or strengthening the principles, priority areas and actions towards achieving better health, well-being and prosperity in the region in the context of the SDGs; to this end, a fourth political document, the Chisinau Pledge, accompanied by the SEE Health 2030 strategy and a new Memorandum of Understanding, were signed.

The leading role of WHO Regional Director for Europe, Dr. Zsuzsanna Jakab, as the honored partner of this very important event, was recognized in line with the continuous support of WHO Europe as the founding partner in the process of the Network's establishment, development and functioning, as well as in line with the common Health 2020 goals for improving the health and well-being of the populations, reducing health inequalities and strengthening public health.

The **specific objectives of the meeting** were met, namely:

- political commitment to be expressed to the sub-regional collaboration in public health in the SEE;
- the political commitment for implementation of the WHO European Policy Framework for health and wellbeing – Health 2020 and the SEE 2020 strategy within SEEHN countries within the health reforms of the SEEHN countries were further promoted and scaled up;
- Universal health coverage through strengthening the health systems and public health services reforms, scaling up the health promoting services for noncommunicable diseases prevention and control with a particular focus on the vulnerable population groups and creating resilient communities were further promoted and committed to;
- The 2030 Agenda for Sustainable Development to agree on specific regional actions for addressing the key determinants of quality of life, well-being, health and health inequities in a more systematic and holistic way, was agreed to and taken as the next strategic commitment and step forward..

The **expected outcomes** of the meeting were achieved, namely:

- views and developing common strategies and approaches were exchanged towards the achievement of universal health coverage for preventing and controlling noncommunicable diseases; the SEEHN "Belgrade Statement" was adopted;

- The political commitment of all SEE governments to an expanded sub-regional cooperation for introducing and/or strengthening the principles, priority areas and actions towards achieving better health, well-being and prosperity in the region in the context of the SDGs were achieved.
- A fourth political document, the Chisinau Pledge was signed to that effect.

On the occasion of the Fourth SEE Health Ministerial Forum in Chisinau, the Republic of Moldova, two important technical pre-meetings were organized 02 April 2017 in partnership and under the leadership of the WHO Regional Office for Europe.

The pre-meetings events were held with the purpose to bring together the SEE National Health Coordinators and the National Focal Points of NCD and Communicable Diseases prevention and control for a constructive dialogue on the current situation in the SEE countries that will identify the next steps for boosting national and common regional actions.

PRE-MEETING ON PREVENTION AND CONTROL OF NON-COMMUNICABLE DISEASE

In line with its Banja Luka Pledge of 2011, the SEEHN has made prevention and control of NCDs a priority, both as a network and in the individual member states. The interventions have included investment in a regional health development centre in Montenegro, tobacco control training (also in Montenegro), salt reduction initiatives, as well as numerous activities related to improvement of intersectoral action, early detection of NCDs, screening and management of established conditions such as diabetes and hypertension and regional indicators for monitoring and evaluation of NCDs.

The pre/Forum meeting in Chisinau had the purpose to systematically assess the progress made in the SEE countries in the implementation of the national commitments and progress indicators agreed upon in the UN Review of 2014, with the aim of producing a summary report and a draft declaration for consideration by the Ministerial Forum. During the planned United Nations High-level Meeting on Noncommunicable Diseases (NCDs) in 2018, Heads of States and Governments will take stock of their achievements in this area as agreed upon by the first United Nations General Assembly on NCDs in September 2011, and re-committed to by the second Assembly on NCDs in 2014.

The meeting followed the process:

1. **Preparatory Phase:** A questionnaire on Country Capacity and Response to NCDs was circulated in February 2017 to all European member states, in order to permit a preliminary analysis to be completed for the SEEHN pre-Forum meeting;
2. **Preliminary Analysis:** The responses to the Survey were analyzed and a preliminary set of results on the current situation in SEEHN and the progress towards the SDG targets related to NCDs, were presented;
3. **Country Reports:** Each Member State presented their experiences and lessons learned over the period 2010-2017;
4. **Draft Declaration:** A draft declaration was discussed by the meeting participants summarizing the lessons learned and the progress achieved, as well as suggestions for the structure of a national roadmap for the achievement of the NCD-related targets of the SDGs by 2030.

Promulgation of the Declaration: A Regional Meeting of NCD Directors will be held (8-9 June 2017 in Moscow, Russian Federation) as part of the European preparations for reporting to the UN General Assembly in 2018. It is proposed that the SEEHN statement/declaration is read out in that meeting as a contribution to the broader regional discussions.

The session started with opening remarks from Dr. Aliona Serbulenco, Deputy Minister of Health, Republic of Moldova. She highlighted NCDs as one of the biggest challenges that are expected to affect 50 million by 2030, where by Moldova and the SEE region are not an exception. The NCD mortality rate is one of the highest among all other death causes, in that context Moldova has undertaken measurements, such as the tremendous efforts to reduce tobacco consumption, by approving the Law on tobacco publicity ban (May 2015). Other steps are being taken in other public health areas, for decreasing the cardiovascular diseases (CVD), cancer screening, alcohol consumption decrease, etc.

Consecutively, Dr. Nicolae Jelamschi, Chair of the Executive Committee, SEE Health Network, highlighted that the challenge of NCDs for the SEEHN is of outmost importance at the regional level.

Thus, there is a Regional Development Health Center established in Montenegro in 2011 on the NCDs and there is another one specialized on mental health established in Bosnia and Herzegovina, Sarajevo in 2011. Dr. Jelamschi underlined the importance of the upcoming two days of the Ministerial Forum which will focus on the achievements for the SDG Agenda, UHC, HiAP approach and mechanisms to strengthen the regional and global cooperation in this respect.

Dr. Gauden Galea, WHO Europe Director of the Division of Noncommunicable Diseases and Health Promotion, presented the scope and purpose of the meeting, organizational issues that were meant to conclude with joint SEE Draft Declaration for the upcoming global events.

The meeting continued, with SEE country presentations on the progress achieved during the implementation of the national commitments and the progress indicators agreed upon in the UN Review of 2014. The track of the progress reached towards UN set of indicators was analyzed from the prospective of the domestic funds, available and committed by each country in this respect and not as the foreign aid channeled, as the objective of the process is to secure continuity, self-reliance and sustainability in the long run.

Dr. Galea presented the global and European context and developments in the prevention and control of non-communicable diseases, by illustrating a historical process, developments and future steps, in the area of NCDs.

The next speaker Dr. Joao Breda, Head of the WHO European Office for Prevention and Control of Noncommunicable Diseases, presented the capacities of the SEE Health Network countries, for non-communicable diseases prevention and control with the experiences in some of the countries after the introduction of the appropriate and recommended food labeling.

Subsequently, the floor was open to general discussions. Dr. Galea summarized and highlighted the importance of NCDs prevention and control. He underlined the slow progress in this respect and emphasized the need of strengthening the early detection and screening programmes. A number of comments were made, related to the data collection challenges, concluding with the need and importance to strengthen this particular area. In this regards, WHO Europe offered a new tool to be applied for the evaluation of the public health interventions that will be focused on the health outcomes and not much on econometrics.

The headline conclusion of the session was to formulate a common SEE Regional statement, prior to the Moscow event, by the end of May 2017. This statement should include: a) the importance of the NCDs to be kept high in the political agenda at the regional and national levels; b) strive for better implementation and correlated national funds allocated to this end, and c) better available data and public health interventions assessment tool ready application.

PRE-MEETING ON MANAGING CHANGE IN HEALTH SYSTEMS RELATED TO KEY COMMUNICABLE DISEASES

The objective of this pre-Forum meeting was to discuss and present approaches and strategies to maintain communicable disease response by health system strengthening (HSS). Health services financing, new model of services delivery and new approaches to strategic planning of the human resources are among the critical elements of the systems that may be reformed.

Tuberculosis (TB) Regional Eastern European and Central Asian Project on Strengthening Health Systems for Effective Tuberculosis (TB) and drug resistant TB prevention and care (TB-REP) is a good example of the HSS for communicable disease response.

The meeting served as a framework to discuss the following issues:

- communicable disease challenges, including TB, HIV and Hepatitis, that SEEHN countries face and what donors' support they have and need in future;
- countries strategies in place focused to maintain achievements in health outcomes, after the donors support ends;
- HSS as an essential part for the sustainability of national response to public health challenges;
- Health services finance mechanisms shaped to the model of care for key communicable disease;
- The role of health systems in SDGs implementation and achievement in relation to communicable disease.

The session started with opening remarks by Dr. Aliona Serbulenco, Deputy Minister of Health, Republic of Moldova. She highlighted that in Moldova, despite all the efforts, TB morbidity and mortality have still increasing trends. This was underlined as an extremely alarming fact, as each 4th person diagnosed with TB, developed a Multidrug Resistant (MDR) form. TB retreatment is around 60%. The Moldovan Government has been doing a lot to strengthen the laboratory capacities and building up human capacities. Many achieved successes are due to extensive partnerships with WHO Europe, the Global Fund (GF), UNDP and other international partners. Moldova is currently implementing its 5th National Program to control and decrease the TB burden and it is coordinated by a National Council. This coordination body allows inclusion of civil society and communities in the implemented actions. Dr. Serbulenco concluded that the current meeting is a perfect opportunity to share experiences, challenges and to set the further goals.

Dr. Nedret Emiroglu, Director, WHO Regional Office for Europe, welcomed the pre-Forum meeting and highlighted its importance for joint discussions and identification of areas of support. Although TB prevalence has been generally reduced, the high mortality rate and high HIV co-infection rate are still increasing, in which regard she called upon action and greater involvement of the civil society.

A presentation was delivered by Dr. Ihor Perehinets, Program Coordinator, WHO Regional Office for Europe on behalf of Dr. Massoud Dara, on the key progresses and challenges in TB, HIV and Hepatitis in the WHO European Region. The presentation gave an overview of the epidemiological status of HIV, TB and Hepatitis B, C, identified the main challenges, and Regional Action Plans in place. Dr. Perehinets resolved with the prospective for the future and highlighted the following important ways forward: to intensify the country support for integrated and people centred care; to enhance good practices, continued policy dialogue, research and innovation; to foster full implementation of national action

plans with more domestic resources; to scale-up to full functioning the regional and sub-regional platforms and initiatives.

The next presentation from the civil society sector, as key partner, was delivered by Ms. Fanny Voitzwinkler, TB Europe Coalition, who presented their interventions aimed to decrease the TB incidence. This intervention demonstrated the strong relationship between civil society and public health systems and their complementarities.

Uldis Mitenbergs, the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) representative, spoke about the new GFATM strategy and innovation through TB-REP project, which seeks to foster fundamental transformation of health services delivery and financing mechanisms.

Consequently, the debate opened on health system challenges, requirements and aspects favoring sustainable health care within health systems and better health outcomes. It also introduced experiences from Member States of the WHO European Region with regards to progress made and challenges encountered during transformation of health systems.

In conclusion, Dr. Emiroglu summarized the discussions and highlighted the importance to continue with the efforts on Health Systems strengthening to tackle Communicable Diseases, with a special focus on TB. Dr. Emiroglu expressed the importance of the common work and joint actions from all the actors – public sector, civil society and partner and donor organizations. As the meeting was prior to the Ministerial Forum, the following points were summarized for further discussion:

- A platform with the linkages of communicable diseases to the health system comprehensive service delivery approach;
- Evidence based support to adapt and implement comprehensive systemized policies and ensure transformation of organization changes towards people centered services, which will be tailored to capture communicable diseases in their policies;
- Transition from external to domestic funding;
- Political commitment, to provide a platform for that domestic funding to renew and have sustainable commitment;
- Greater engagement of the civil society.

Dr. Emiroglu concluded that this Forum would pledge for a platform for sharing experiences and monitoring and evaluation of the changes, to ensure accountability, sustainability and prosperity.

CLOSED SESSION OF THE SEEHN EXECUTIVE COMMITTEE, 02 APRIL 2017

The SEEHN's Executive Committee meeting was held on 2 April 2017. The Executive Committee Members discussed the following legal, political, technical issues:

- Drafting groups for the finalization of the Outcome documents of the Ministerial Forum, the Chisinau Pledge and the Memorandum of Understanding were unanimously approved;
- The SEEHN Memorandum of Understanding of 2008 and its Addendum of 2011, need revision in view of the current and future developments of the SEEHN and its governance and institutional mechanisms;
- Reach an approval to identify at a later stage the signing procedure of the revised SEEHN Memorandum of Understanding, by using the rotation procedure through post, or to identify an International Forum to gather all the country delegations and sign it at that occasion;
- SEE Health Network Executive Committee: enforcement of the current members to complete the full 2 years mandate;
- Endorsement, commitment and willingness to sign have been decided to be undertaken during the Forum;
- Scenario for the Award ceremony on the occasion of SEEHN anniversary - 15 years of Alliance in health and wellbeing in SEE, was defined;
- Following the Letter from the Bulgarian Minister of Health, all members of Ex Com agreed the next Presidency of the SEEHN to be overtaken by the Bulgarian Government after the elections and constitution of the new government. In this regard, the SEEHN Secretariat should communicate this decision with the newly elected Minister of Health for the organization of the next 39th Plenary Meeting of the SEEHN to be held in Sofia in the second half of the 2017.

FOURTH SEE HEALTH MINISTERIAL FORUM

PLENARY SESSION 1: OPENING

Dr. Nicolae Jelamschi, Chair of the SEEHN Executive Committee welcomed and introduced the top panelists. He invited Her Excellency, **Dr. Ruxanda Glavan, Minister of Health, Republic of Moldova, and President of the SEE Health Network Presidency** for her welcoming speech.

In her opening speech Dr. Glavan highlighted the fifteen years of successful regional cooperation in public health within the SEE Health Network, marked by shared values and mutual efforts towards peace, health and wealth in the South East Europe. The SEE Health Network has proven to be an ingenious initiative of the regional cooperation in public health, due to its leadership as well as its ongoing intellectual evolution by forming, reviewing and reforming its governance structure and areas of policy making.

Dr. Glavan underlined the SEE Health Network's huge potential to be a sustainable initiative of regional ownership, particularly through the establishment of its nine Regional Health Development Centers (RHDCs) across the region, representing a regionally based cooperative framework in public health. The Network's potential was also represented when it succeeded in putting health on the regional economic development agenda by incorporating a health pillar into the new South Eastern Europe "2020 Strategy". In addition, she stressed that the SEE Health Network has organized various expert and educational workshops through previous projects and the current RHDCs, thus, providing a strong platform for effective policy making to strengthen key public health areas of common concern and to stimulate the process towards European Union integration of its member countries..

Minister Glavan emphasized that further the SEE Health Network's development requires to adapt to the new realities and to develop a more regionally owned and led framework for cooperation. The SEEHN Memorandum of Understanding of 2008 and its Addendum of 2011, therefore, need revision in view of the current and future developments of the SEE Health Network and its governance and institutional mechanisms.

At the same time, *"...the South Eastern Europe regional cooperation in the field of public health remains high on the agenda as means of promoting political cooperation and economic growth in the SEE region, and it is an important tool for supporting European and Euro-Atlantic integration..."*, she underlined.

Minister Glavan stressed the purpose of the Fourth Ministers of Health Forum to review the performance of the SEE Health Network, during the past fifteen years and to identify opportunities for future cooperation related to the achievement of the Sustainable Development Goals in the South East Europe.

In conclusion, Dr. Glavan extended, on behalf of the Network, appreciation and gratitude to all partner countries and agencies, especially to WHO Regional Office for Europe, the Council of Europe and the Council of Europe Development Bank for their long-term and continuous support provided. Special gratitude was expressed on behalf of all SEE Ministers to WHO Regional Office for Europe and its Country Offices for the political and technical support throughout the 15 years of the existence of the SEEHN and for the well-being of the SEE populations.

Dr. Zsuzsanna Jakab, WHO Regional Director for Europe, followed with her welcoming address to the audience and expressed thanks to the SEE leaders for attending the high level Forum as well as to the host government and particularly to Minister Glavan for the excellent organization. She stated that this Forum comes 6 years after the endorsement of the Banja Luka Pledge, at the previous ministerial forum, which set the course towards cross sectorial collaboration and health in all policies, to address NCD, social determinants of health (SDH) as well to strengthen Regional collaboration. She stressed that all above-mentioned topics, together with the UHC and the IHR are among the six leadership priorities set out in its 12th Global Program of Work 2017-2019.

Dr. Jakab stated that the strategies and action plans in place reflect the Global Framework of the 2030 Agenda for Sustainable Development and its SDGs. Health and wellbeing are a primary focus of the SDG #3, although it is reflected in other SDGs as well. Remarkably, in the European Region the EU Policy and the European policy framework "Health 2020" are fully in line with the SDGs, thus, they fully enabled the implementation of the Millennium Development Goals (MDG), and strive for more health in all-policies approach.

"It is of paramount importance to reduce health inequalities, thus none shall be left behind", she said. Through improved leadership and participatory approach implementing the Health 2020 is possible. She presented the whole-of-government and whole-of-society approaches reflected in the main outcome documents of the Regional Committees of 2015 and 2016, gave the right impetus for people-centered care and consideration to efficient healthcare service delivery models.

Cross-border health care was spotted to be a burning issue especially for the Region and with the current challenges of the migration crisis. Dr. Jakab underlined that these objectives are reflected in the recently approved European Strategy and Action Plan for refugees and migrant health.

IHR remains a priority and focus on the principles of the Sendai framework for disaster risk reduction 2015-2030, which is reflected as well in the new WHO Health Emergencies Program, she added.

The Regional Director highlighted the importance of the 2030 Agenda for sustainable development and mentioned that WHO has supported its Member States to have health high on their political agendas through policy dialogues, technical support and cross-sectorial initiatives. She concluded her opening speech by thanking the audience with the following statement: *"If one country fails to meet its population basic needs, it is our common failure, as many public health issues transgress national boundaries. Yet, putting this pledge into practice would enable jointly to contribute to health and well we all of us in this region"*.

Minister Glavan, thanked Dr. Jakab for her kind words and her continuous support to the Network and particularly for the organization of this Forum, whereby the WHO Regional Office and its Country Office (CO) in Chisinau, led by Dr. Haris Hajrulahovic, provided valuable support during this and the previous forums.

Next, Dr. Glavan called upon another very important partner to the SEEHN, the Regional Cooperation Council (RCC) and invited **Mr. Gazmend Turdiu, Deputy Secretary General, RCC**, to present the greeting message of the RCC Secretary General, H.E. Mr. Goran Svilanovic.

Mr. Turdiu extended his and the RCC's congratulations to Minister Glavan for the work done and the Forum organization aimed to bring regional efforts towards the next level of development of the SEEHN. He also congratulated the Network that agreed on the SEEHN newly appointed director Dr. Mira Dasic and acknowledged the tremendous work done by the SEEHN acting Director Dr. Maria Ruseva. Mr. Turdiu stated that despite all the challenges in the region and particularly those of financial nature the RCC will provide all the possible support to the health dimension. He also acknowledged the SEEHN as an organization which proved its contribution towards development through implementation of the SEE 2020 Strategy's growth pillar. Mr. Turdiu thanked in this context WHO Regional Office for Europe and particularly Dr. Jakab, as well as all partners who have already provided support in this respect.

Mr. Turdiu mentioned the SEE 2020 Strategy as the main strategic document, which already has been discussed on several occasions. The current 4th Forum proved to be another great opportunity to reflect and discuss on what has been achieved, the challenges and the ways forward. Mr. Turdiu reconfirmed lack of funding for the SEEHN. He, however, stressed the commitment RCC to the health dimension especially through providing support to the human resources for health (HRH) area, related to multilateral and bilateral agreements on mutual diploma recognition in the region and addressing the corruption within health sector.

On behalf of the SEEHN, **Dr. Glavan** extended appreciation and greetings for the support the RCC has provided throughout these years.

Regrettably H.E. Mr. Tapiola, the European Union (EU) Ambassador, was unable to join the Forum; therefore official thanks were extended to the EU for its continuous support using the presence of **Dr. Alexandre Berlin, Honorary Director of the European Commission** for attending all the SEEHN meetings, for his personal dedication as a rapporteur at these meetings and his consultation with regards to the EU guiding principles and sustenance.

Finally, Dr. Glavan used this opportunity to congratulate **Dr. Mira Jovanovski Dasic for her recruitment as the permanent Director of the SEEHN Secretariat** and expressed her pleasure and prospect to work closely in the future, by inviting her to address the audience as well.

Dr. Dasic greeted the audience. She announced also the headline for the next 4th Forum days: "Health, Well-Being and Prosperity in South East Europe by 2030 under the agenda of the Sustainable Development Goals 2030". She emphasized that this Forum is to determine and include the SDGs and its targets into National Agendas. This progress demonstrated that many things might be improved if there is commitment and joint work. She also highlighted that there are many challenges ahead, confirming that the key strategic directions of Health 2020 remain even more relevant than ever before.

Jointly the Region can make the great step towards a sustainable future, to get there, Dr. Dasic expressed her strong believes that the region and the network need to be stronger, increased investments in health and placing healthcare and public health higher into countries' national political agendas. She also called for the ministers' commitment to intergovernmental and intersectorial action, to further scale up the implementation of Health 2020 and the South-eastern Europe 2020 Strategy.

Dr. Dasic listed SEEHN Pledges (Dubrovnik, Banja Luka and Skopje), and called upon political responsibility to pursue the integration of health and well-being into National Policies of the Member Countries. Therefore, the endorsement of the Chisinau Pledge remains an ultimate

priority for the Region being also an instrument of SEEHN corporate accountability and the solid contract and commitment.

The SEEHN Director thanked the Founding Partners, the WHO Europe for its political and technical leadership and the RCC for strengthening the regional cooperation. In conclusion, she invited all to invest in this partnership to increase policy coherence, improve health in the SEE Region and serve Member Countries more efficiently.

Minister Glavan thanked the SEEHN Secretariat Staff for all the work done for the organization of this Forum, and WHO Regional Office for Europe and the WHO CO in the Republic of Moldova for the support. Finally, she announced the Forum as open.

Minister Glavan encouraged her colleagues, the SEE Ministers and the audience to take this opportunity for active discussions, in order to have clear conclusions and recommendations for the implementation of the SEEHN road map and, finally, to endorse and sign the Chisinau Pledge at the end of this Fourth Forum.

After the unanimous adoption of the Agenda and Program by the audience, Minister Glavan made a short introduction of the two documents which have been developed and have undergone substantial intergovernmental and multi-governmental consultation processes in 2016:

- Draft Chisinau Pledge
- Draft Memorandum of Understanding (MoU) on the Statutes of the SEE Health Network.

In relation to the new MoU on the Statutes of the SEEHN, Minister Glavan underlined that there are some countries that will need more time to conclude their national legal consultation processes. Two Drafting Groups were nominated by the Executive Committee of the SEE Health Network, in order to work on refinements of the two Forum's outcome documents to be circulated once more before the process of endorsement planned for the second day of the Forum.

Minister Glavan presented the nominated members of the Drafting Groups for both outcome documents (Annex 4). They were unanimously accepted by the delegations.

Then, Minister Glavan invited to the floor the first Keynote Speaker, **Mr. Gazmend Turdiu, Deputy Secretary General of the Regional Cooperation Council**, to present his Keynote speech on *"Health improvements in SEE: a guarantee for prosperity and achieving the SEE 2020 goals"*.

The SEE 2020 Strategy reflects the determination of all government in the SEE to embrace bold policy approaches for socioeconomic growth, thus, to better integrate in the EU, he emphasized. Mr. Turdiu mentioned that the RCC is the coordination body in the SEE 2020 implementation process, though "Health dimension" was trusted to the SEEHN, and it was translated into a strategy and action plan for health at the regional level.

Afterwards he listed the key strategic directions in the "health dimension", namely to: a) introduce policy measures for improving population health gain, with a focus on the low-income groups, by strengthening the delivery of universal and high quality health-promoting services; b) strengthen the institutions and improve the inter-sectorial governance of the health sector at all levels, including health information and infrastructure and regional cross-border information exchange; c) harmonize public health (PH) services and legislation, standards and procedures,

develop mutual recognition of university diplomas and professional qualifications thus to enable Free Trade Area from the PH prospective; d) strengthen Human Resources in Health (HRH) to harmonize qualifications, monitor and promote mobility of the HRH.

The objectives set to achieve these directions have reached the mid-term stage and the assessment results showed mixed progress and unclear picture related to the “Health dimension”, as some data are missing, he pointed out.

Furthermore, the RCC representative listed the recent support provided by the RCC to the SEEHN in monetary value linked per each activity.

Health (doctors and dentists) along with Construction sector, were mentioned to be priorities for the RCC in the mutual recognition of university diplomas and professional qualifications within the framework of the “Skills and Mobility Flagship” and a joint working group with CEFTA and ERI-SEE has been established, he added. In this regard, the upcoming meeting in Belgrade at the end of the month is expected to take decisions related to open negotiations on mutual regional recognition Agreements.

Another issue, presented by Mr. Turdiu, was related to the corruption in the health sector, the public opinion and the recent developments and actions in the different countries of the Region, in this respect. Additionally, the RCC Secretariat has launched this year a regional project to support the existing efforts in the corruption risk assessment in healthcare sector, he informed.

Support to health institutions to assess the level of corruption in sub-areas of the healthcare sector, specific to each country, has been offered by RCC. In this regard Mr. Turdiu announced that an interest has been expressed by Skopje, Sarajevo and Chisinau and the RCC is keen to extend it to other Western Balkan Region.

In conclusion it was wished to strive for more actions and better outcomes in the health sectors.

After the very clear and encouraging presentation of Mr. Turdiu, Minister Glavan emphasized the higher role that, as Ministers of Health, they shall play within Governments during the implementation of the SEE 2020 Strategy.

As a President of the SEEHN Network Presidency and of this Forum, once more Minister Glavan accentuated that this Ministerial Forum would not have been possible without the crucial role and tremendous contribution of WHO Europe, as co-organizer of the meeting.

Then she invited **Dr. Zsuzsanna Jakab, WHO Regional Director for Europe** to present her keynote speech: *“Achieving the UN Sustainable Development Goals 2030, Health 2020 and the SEE 2020 goals: how to make it a reality?”*.

Dr. Jakab expressed her thanks to be part of this event and to Minister Glavan and her team for organizing and hosting this important policy event. At this Fourth Forum, she mentioned that discussions for the next cornerstone of regional cooperation for public health and well-being in South East Europe, will take place. She also indicated further discussions about the political and technical cooperation and the way forward for a closer partnership.

She presented that in Europe we are witnessing many challenges making the health agenda both

more relevant and more urgent than ever: such as rapid ageing of the population, an increased incidence of chronic conditions and multi-co morbidities, environmental, social and economic pressures, etc. However, she started to speak firstly about significant health improvements observed in the SEE countries over recent decades. *“On this front, Europe has reason to be proud: our strategies are working, she stated”* (Figure 1):

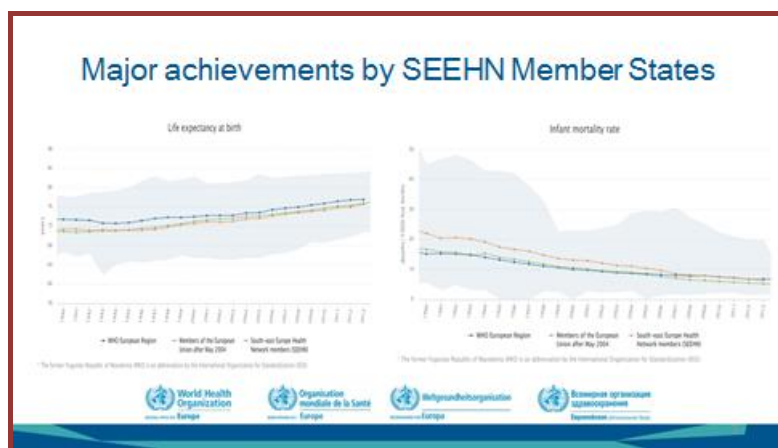


Figure 1

Countries from the SEE Health Network have made good progress since 2011. They are well on track to achieve premature mortality reduction target by 2025 and 2030 however progress is uneven and there are significant threats, namely: the increase in obesity prevalence. However, certain achievements are hindered, in the longer run by risk factors, she stated, as we can see from the following Figure 2:

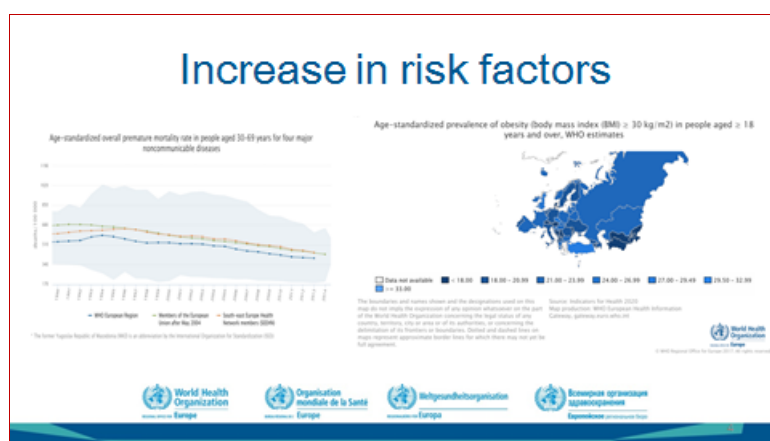


Figure 2

Dr. Jakab emphasized, that the SEE countries have also made solid progress regarding socioeconomic development in view of the opportunity the 2030 Agenda for Sustainable Development provide, for tackling some of the major determinants of health and how health plays a central role in the Sustainable Development Agenda (Figure 3).



Figure 3

“Achieving Sustainable Development Goals means to strengthen health in your national development strategies and consider the SDGs in the implementation of national health policies. Advancing health and well-being for all at all ages, means to work towards UHC. It means aligning national health policies with the guiding principles and priorities of Health 2020: address upstream determinants in an intersectoral way; address equity in health and use the values captured in Health 2020”, stated Dr. Jakab.

As a highpoint of her presentation, Dr. Jakab explained that the Chisinau pledge further calls for working more closely and efficiently with partners to make the best use of the unprecedented support by recognizing new forms of governance for health; implementing whole-of-government, whole-of-society and health-in-all-policies; advocating healthier policies in and across all sectors and working within the “One United Nations” process in the WHO European Region and enhance sub-national partnerships – across countries.

“...Finally, I appreciate the fact that Member States value and highlight the role of WHO Regional Office & its Country Offices.”.

In conclusion, Dr. Jakab underlined the two very successful pre-meetings held the day before, one on the NCDs and the link between Health Systems and the Communicable Diseases (CDs). In that context she mentioned that the majority of the SEE countries have recently adopted new or revised strategies, action plans and tools on NCD. She shared some additional key points with regards to these meeting, especially in the context of how to strengthen health systems performance to sustain response to CDs.

Efficient financing models for better financial protection, including transition from donor funding to domestic funding, need to be promoted, Dr. Jakab stated.

She thanked stakeholders for assisting in setting these key strategic directions and declared this event and discussions over the next 2 days as a process committed to continuing the south east European dialogue between countries.

In conclusion of the session **Ms. Glavan** invited all participants for the official family photo to be taken before the coffee break.

PLENARY SESSION 2: SUB-REGIONAL COOPERATION FOR PUBLIC HEALTH IN SEE

Professor Florian Dorel-Bodog, Minister of Health of Romania took over the chairmanship of **Plenary Session 2: Sub-regional cooperation for public health in SEE.**

Professor Bodog continued with the next agenda item "*The Sub-regional cooperation for public health in SEE*" and announced that this session will be facilitated by **Dr. Claudia Stein, Director, Division of Information, Evidence, Research and Innovation, WHO Regional Office for Europe.**

Dr. Stein invited **Mr. Kosta Barjaba -Member of the South Eastern Europe Health Network Executive Committee and National Health Coordinator of the Ministry of Health of Albania** to make a short introductory presentation on the subject.

Mr. Kosta Barjaba introduced firstly the letter of the new Minister of Health of Albania, Mrs. Ogerta Manastirliu, and expressing repentance for not being able to attend this very important government official agenda and event for the SEE Health Network. He presented Mrs. Manastirliu's and the Government's of Albania statement considering cooperation on health issues as a priority of the regional collaboration. He reiterated that the Government of Albania has taken Universal Health Coverage through Universal Access as its major goal.

Afterwards, he presented the the report on the sub regional cooperation for public health in this subregion from 2001 – 2016, entitled "*15 Years of Alliance for Health and Well-being in South Eastern Europe*". This study and report has been developed by Mr. Alain Nellen based on his Master Thesis at the Graduate Institute of International and Development Studies, Geneva, Switzerland. The study and report have shown that through the regional collaboration, and particularly the SEE Health Network, the health sector has proven to be a post-conflict recovery platform, after the conflicts in the former Yugoslavia, which were marked with regional political, social and economic turmoil.

Mr. Barjaba went through the evolution of the SEEHN's governance structure and vision since its establishment in 2001 under the political framework of the Stability Pact for South-eastern Europe (Stability Pact), the latter having been created as an European Union initiative to re-establish peace and security in the region. Since then and until now over the past 16 years, has Network has shifted its vision and has undergone substantial development towards promoting health as an integral part of economic development through a whole-of-government and whole-of-society approach. (Figure 4)



Figure 4

Emphasizing the challenges and progress made so far, Mr. Barjaba described how the SEEHN, through cooperation at political level, working closely with WHO Europe and the RCC (the successor of the Stability Pact for SEE), has undertaken its ownership and the leadership in implementing projects covering public health areas, bringing together health professionals from the region to share best practices and executing key policy documents.

Professor Bodog congratulated Mr. Barjaba for the interesting and valuable presentation that has provided an independent external view of the SEE Health Network, its history and achievements. The presentation clearly addressed the strengths, weaknesses, challenges and opportunities that this network faces and appreciated the recommendations, calling for strengthened governance and more cohesive collaboration at all levels of the network. He took this opportunity to thank the SEEHN about the success and the publication, announcing this session as an excellent starting point for the Round Table of the Ministers and partners. **Professor Bodog** then handed over the floor to **Dr. Claudia Stein** to facilitate the discussions of Ministers and Partners on this crucial topic.

Dr. Stein took the floor by quoting the old proverb: “... if you want to go fast you go alone if you want to go far, you go along together...”, which has been proved previously by the presenter Mr. Barjaba. Dr. Stein highlighted from the very beginning that this network has proved its potential.

She congratulated the SEE Health Network and all the delegations on this unique regional collaboration on health, well-being and economic development, then she invited Ministers of Health to share their opinion on the regional collaboration for health, to define its added value at national and sub-national levels, to share their challenges as well as their vision and new initiatives that can bring the SEEHN to a higher level of development in the coming years.

Dr. Claudia Stein used this opportunity to call the attention of the SEEHN Member States to consider the collaborative activities that other networks in the European Region have established. She shared such an example from her domain of work: 8 Member States have created a specific collaboration called “**the Small Countries Health Information Network**” which is supported by WHO Europe with the objective to share the evidence and information (Montenegro being a member of both networks).

She underlined that this initiative is now producing outputs that are particularly relevant and suggested that the SEEHN may wish to consider establishing a similar activity and sub-network, supported by WHO Europe that can serve the specific needs of the SEE countries. She shared the information about the meeting that WHO Europe has held at the end of 2015 in Tirana and the recommendations derived from this meeting for the establishment of such a network.

After presenting this example as an incentive for a productive discussion, Dr. Stein kindly invited excellences and ministers to reflect on this and make their statements for any new initiatives in the SEE region, by focusing on one or more of the following questions:

- *Why there is still a need for putting continuous efforts to maintaining political commitment, when the gains and the strengths of common actions under the SEEHN so are apparent?*
- *What else do you as Ministers expect from this Network?*
- *Could you envisage thematic networks within SEEHN, such as the one proposed for health information?*
- *What would be the expected outcome, on a yearly basis that the SEE Region would achieve, both in terms of SEEHN operation and performance?"*
- *How can we further develop the RDHCs, to become hubs in the SEE regional setting and support them to be competitive producers of meaningful data and policy interventions tailored for the region?"*

Minister of the Republic of Moldova, Ms. Glavan recapped that the country really appreciates the SEEHN as a platform for regional collaboration and views it as a useful tool to advance the European health policy "Health 2020", as well as the opportunities created for engaging in technical debates, for exchanging best practices and improving the health and wellbeing of our populations. While celebrating the 15th years of SEE alliance and partnership, this process has produced three pledges throughout the years and the country welcomes the fourth one expected to be coming out by the end of the current Forum. Besides prominent achievements at policy level, through the work and coordination of the Network's RHDC, regional expertise in areas of high importance have been institutionalized. Having a RHDC on Human Resources in Health (HRH), established in Chisinau, is a high recognition of the country's achievements in leading and coordinating the regional efforts on health workforce and mobility in SEE, particularly with the National Human Resources for Health Development Strategy (2016-2025) standing ready to share its experience with other countries of the SEEHN.

In conclusion, Ms. Glavan encouraged members of the Network to capitalize on the huge potential of the Network's RHDCs, while exploring further opportunities to strengthen them. She also urged the SEE countries' health authorities to regularly make best use of the SEEHN as a political and technical platform to advance and complement the work done under the aegis of "Health 2020" and the 2030 agenda for sustainable development, in attaining the highest possible levels of health for our populations.

Dr. Stein thanked Dr. Glavan for intervention and then passed the floor to the next speaker, the **Minister of Civil Affairs of Bosnia and Herzegovina (BiH) Dr. Adil Osmanović**, who saluted the audience and specified the long collaboration that BIH has developed in the past 16 years.

Since the Dubrovnik Pledge and with the implementation of the Banja Luka Pledge, the BIH authorities have committed within the SEEHN, steered by the WHO and other international partners, for strengthening Public Health (PH) capacities and services for NCDs, in order to ensure equity in health. He emphasized the progress in the public health field cross regional collaboration and mentioned

several important achievements of high value for his country, namely: (i) building capacities in the field of transplantation medicine, in collaboration with the Croatian transplantation Institute; (ii) progress in capacity building for surveillance and response of avian influence with the RHDC for CDS; the “Southeast European Centre for the Surveillance and Control of Infectious Diseases” (SECID) in Albania; (iii) Strengthening and defining unified legal frameworks for human right protection of mental health patients, as well as (iv) procedures for strengthening services for mental health (MH) patients within the community mental health centers in BIH. Dr Osmanović, finally highlighted the improvement of policies and public health capacity planning of the SEEHN Member States, directed by WHO Europe.

Regional collaboration in public health is the crucial point for supporting the political collaboration and economic development in SEE Region, which builds trust to European and Euro Atlantic integration processes, he stated. In the end, he assured the audience, that the BIH authorities (all the three ministries), will strongly continue to support the SEEHN and through the regional collaboration will support health systems strengthening and prospect.

The next intervention was made by **Dr. Kenan Hrapović, Minister of Health of Montenegro (MNE)**. He started his narration, quoting Dr. Jakab from the previous session, saying that “... failure of one country is failure of all”. It is a fact that there is no country that can guarantee its population health alone, because challenges of health policies are similar no matter the size of the country or population’s size, he stated. However, Minister Hrapović put emphasis on the progress achieved, by recognizing health as political issue and placing it high on the development agenda of SEE countries. In the context of progress made in the region, he mentioned also challenges such as: climates changes, increased production of antibiotics and increased resistance to antibiotic; growing and aging populations; epidemic of chronic diseases; globalization of risky behaviors; migration etc., as causes which have amplified populations’ expectations and needs, while resources are reducing. Thus, the need for better and stronger collaboration of our countries in this region, Minister Hrapović concluded, is fundamental.

After the Ministers of Health have addressed the audience on the above mentioned subjects, Dr. Stein opened the floor for discussion to the Deputy Ministers.

Mr. Jovica Andovski, the Deputy Minister of Health and currently acting Minister of Health of the Republic of Macedonia (MKD), took the floor by stating that the country, hereby, reiterates its strong support for the maintenance and advancement of this partnership with the SEEHN, which has been continuous since the first day of its establishment. He also highlighted the organization of the Second Ministerial Forum in Skopje, where for the first time ever in SEE, as well as on a broader scale, Health and Finance Ministers were brought together, when not just intersectoral cooperation but also on the important issues of health financing prospects at both national and regional levels, have been initiated.

He reaffirmed the commitment of his government for a sustainable SEEHN functioning, by mentioning the establishment of the Secretariat and the maintenance of its premises in Skopje.

“... By developing a coherent and unique platform for action as partnership of countries and partners, by investing in professional Regional Health Development Centers we are investing in our road to implementation of the Sustainable Development Goals 2030” he stated.

Mr. Andovski used this opportunity to salute Dr. Mira Dasic, the new director of the SEEHN Secretariat, emphasizing that a strong Secretariat can support us on this journey and assured continuation to invest in it.

Before concluding his intervention, Mr. Andovski stated that the Republic of Macedonia suggests a change in the SEENH Executive Committee structure and stated that MKD will support an Ex Com with representatives of member states and representatives of the partners only, with a term of office of to be limited to the period between the forums. In the end, he expressed appreciation to the WHO Europe and Dr. Zsuzsanna Jakab for the extraordinary support and constant investing in the SEEHN.

Next speaker, deputy **Minister of Health of Bulgaria, Dr. Galin Kamenov** congratulated the 15th years of existence of the SEEHN and pointed out the role of the SEEHN in strengthening public health systems and health policies, both at national and regional level. As a representative of one of the member states involved in the SEEHN, Mr. Kamenov assured that it is very important to enhance this cooperation and increase the political commitment to the network and maintain the expert dialog in the region. Strengthening of the government structures and the Secretariat of the network, will be essential, he resolved.

After the Deputy Ministers expressed their opinion and made an intervention, Dr. Stein opened the floor to heads of delegations, and gave the floor to the **Ambassador of Republic of Serbia in Romania, H.E. Mr. Branko Brankovic**. He directly featured that achieving the highest standards of health, wellbeing and prosperity requires tackling environmental determinants of health, which bring health in coherence with "Health 2020".

He mentioned the very important meeting of the Parties of the UNECE Protocol on Water and Health in 2016, when the Republic of Serbia has taken its chairmanship. The Protocol's and its programmes' scope and objectives are fully in line with the UN 2030 Agenda, particularly, SDG 6 on ensuring water and sanitation for all and SDG 3 calling for combating water borne diseases and reducing illnesses and water contamination diseases. This Protocol has been a precursor to place the region on the right track by promoting integration of policies, inter-sectoral collaboration and preventive approach with clear focus on equity. The Republic of Serbia considers the Protocol as truly powerful tool to transmit SDGs objectives and its priorities into reality, as well as an effective platform for getting together different sectors for steering policies of national, regional and intersectorial character. Therefore he highlighted that the Republic of Serbia as a Chair of this Protocol is encouraging countries in the region, particularly countries that have not yet acceded, to actively engage in it. In the end, he thanked the organizers and announced this meeting together with the document that will be signed, as a success for itself but also as an opportunity for further cooperation.

Mr. Kosta Barjaba took the floor once more to describe the Albanian view as an active member of the SEEHN. He emphasized the importance of the regional cooperation. Mr. Barjaba highlighted the signing a bilateral Memorandum of Understanding between Albania and Montenegro in the field of health cooperation on the same dates as the 4th SEE Health Ministerial Forum of a true added value of the regional collaboration through the SEEHN. He also mentioned that since the 2015, when Albania was holding the SEEHN Presidency, when the Universal Health Coverage was a major goal, Albania is still working hard to implement and reach this goal and shared several important national interventions in the health system, such as: adoption of legislation for financing through general taxation, promotion of equal access to health care services, free primary health care, etc. He concluded his address with the words *"for trade we have to compete but for health we do not have a choice but working together"*, therefore, he accentuated the importance of the SEEHN and took the opportunity to congratulate the Head of the Secretariat.

Since there were no further statements from the side of Partners, the *tour de table* of the ministers and delegations came to an end and the facilitator Dr. Claudia Stein wrapped up the session by summarizing and thanking the audience for the richness of the discussions and very clear statements and commitment for collaboration in this network. She also underlined the contentment of all speakers with the establishment of the Secretariat and its work and congratulated the SEEHN Director for her appointment once again.

Dr. Stein, recognized the progress achieved at both levels, political and technical. She underlined the action point of the speakers, identifying the RHDCs as the executive arm of the SEEHN. In this regard, she suggested an action platform to be created, mapping the various expertise of the RHDCs and the existing Hubs in moving this agenda forward and recommended that the secretariat discusses it further. She thanked everybody and handed back the floor to Professor Bodog.

Professor Bodog, the Romanian Minister of Health, concluded the session by thanking all the speakers for their valuable informative, positive and constructive session, as well as the masterful facilitation by Dr. Claudia Stein with extremely important conclusions and initiatives that will be part of the Forum Report for the SEEHN's future actions.

PLENARY SESSION 3: HEALTH, WELL-BEING AND PROSPERITY IN SOUTH EAST EUROPE BY 2030 IN THE CONTEXT OF THE 2030 AGENDA FOR SUSTAINABLE DEVELOPMENT

This session Chair, **Dr. Zsuzsanna Jakab, WHO Regional Director for Europe**, welcomed back the audience to the afternoon session and before introducing the next Agenda item, she asked the permission to invite **Dr. Alexandre Berlin** to have a short address on one specific issue.

Dr. Berlin, Honorary Director, European Commission and Co-opted Member of the SEEHN Executive Committee raised two small but very important issues, one in relation to the RHDCs and their valuable performance, by kindly asking the RHDCs to send a brief update of their activities and the second issue related to the EC TAIEX Instrument of the EU, who organizes multicountry workshops for the SEEHN by bringing together experts from this region. In this regard, he suggested the Secretariat to request countries to indicate very briefly the topics they would like to have as TAIEX workshops and offered his mediation in negotiating for them with the EC TAIEX Instrument.

Dr. Jakab thanked Dr. Berlin for this introduction and the good news and certainly encouraged Member States to use this instrument, by emphasizing the importance of immediate action, after signing the Pledge, where this topic could be of a great interest in the following months. She also recognized the importance of the RHDCs and reminded the participants, that there are Ministerial meetings from time to time, which can be used for this discussions even before the next forum.

Dr. Jakab started Session III by recognizing it as the main focus of the Fourth Ministerial Forum.

By introducing Ms. Christine Brown from the WHO Regional Office for Europe, as an old friend and supporter of the SEE Health Network since 2009, she recognized her dedication and contributions to the work of this Network as immensely appreciated.

Dr. Chris Brown greeted the audience and expressed her pleasure to see the real invigorated partnership of the SEEHN and other organizations for Health, Well-being and Prosperity within countries and between countries and organizations.

She invited **Dr. Mira Jovanovski-Dasic, Director, SEE Health Network Secretariat**, former member of the SEEHN Executive Committee, former National Health Coordinator of Montenegro, former Director General, Ministry of Health of Montenegro to orientate the participants into what are the issue to address and what commitments are necessary to make, in order to move forward.

After greeting the audience, **Dr. Dasic** stated that this Forum comes timely to support contemporary global and regional agendas that position health high on the development agenda and as a contributor to development and growth.

In that context, Dr. Dasic presented 5 messages relevant to all the topics of this Forum's agenda and asked the audience to take them forward (Figure 5):



Figure 5

She described how the SEEHN operates at sub - regional level influencing regional and global health agendas, how the SEEHN Member States have been aligning their national health policies to the European health policy framework “Health 2020”, which is the reason today all of them have health policies aligned with its values and approaches and some of them have started adapting the national policies and localizing them to the Sustainable Development Goals 2030.

She emphasized how important it is to evaluate and align strategies for health at the national level across all sectors and governance levels, to map how national health priorities and targets align across the SDGs and engage the private sector, civil society groups and political leaders (Figure 6).



Figure 6

Dr. Dasic acknowledged the importance of a strong Secretariat, which can support the SEEHN as a Partnership for Health, Wellbeing and Prosperity and emphasized that investing in strong SEEHN Secretariat, will strengthen the action towards jointly decided outcomes.

The SEEHN Secretariat's Director emphasized the need to approve Chisinau Pledge as the next foundation regional health policy towards 2030, where all the SEEHN Member States and Partners will join hands and invest for better health of the SEE population. Dr. Dasic concluded her presentation by inviting the audience to focus their discussions over these subjects, leading to the adoption of the Chisinau Pledge.

Dr. Brown thanked Dr. Dasic for her clear presentation and showing the resilience and commitment for health, well-being and prosperity in South East Europe in the Framework of the 2030 Agenda for Sustainable Development.

Before moving into the roundtable discussion, she invited the audience to watch a short Video ***"Acting Together for Health Wellbeing and Prosperity in the SEE Region"***.

Dr. Brown clearly stated that we cannot have inclusive and sustainable development without health as a goal and a partner, but we also need to align health improvement with strategies and plans for improving development. She pointed out to the enormous opportunities to reach across government to address the social, environmental and commercial determinants and to tackle the root causes of discrimination and inequity that are leaving many behind in our society.

Subsequently, Dr. Christine Brown, opened the floor for discussions with all participants and partners and firstly asked the **RCC Deputy Secretary, Mr. Gazmend Turdiu** to join her at the podium.

Referring to the video, she emphasized how the word "health" have not been mentioned, but only words, such as economic policy makers, social policy makers, etc.. In that line she asked Mr. Turdiu as a non- health senior professional and official to share his reflections in working with health from another perspective: *"What we should do better and where we are doing wrong?"*

Mr. Turdiu mentioned his engagement with the implementation of the SEE 2020 Strategy, by making a very short introduction of the SEE Strategy 2020, which contains inclusive growth pillars and within it a health dimension that includes four actions aiming in achieving four objectives. He admitted that these actions have been implemented only partially and only now we can see results, on moving towards achieving these objectives.

In addition, Mr. Turdiu described what the problems have been from the RCC perspective, as an umbrella organization, which is inclusive and has a view on the implementation of all the sectors relevant to the SEE 2020 Strategy. He mentioned three main problems, related to the health dimension coordination, implemented in close cooperation with the SEEHN:

The first one is *"All-inclusiveness"*, notifying the lack of inclusiveness of Kosovo into this network, stating that the SEEHN is missing institutions which are dealing with health care of 12% of population in this region. In this regard, he underlined that Kosovo is included within the framework of the SEE Cooperation process, which is the highest political platform in the region and expressed his concern for the exclusion of Kosovo from the SEEHN platform.

Dr. Brown, recognized inclusiveness as an issue in the society in general and underlined that it is very important that RCC shares these experience of national processes, since health was not viable in the past and mutual engagement to integrate health and not go in parallel, is very important.

Mr. Turdiu then made his second point, namely "*Prioritization*" and described the programming process of the SEE Strategy 2020, cycling on different levels and he underlined that even though there were representatives of the SEEHN at the Regional Dimension Networks Meeting last year, where the possibility of including health actions into RCC programme have been discussed, during the following steps, at national consultation processes, participation of Ministries of Health was very limited and health remained silent. This is the reason why within the RCC programme 2017-2019 no funds were allocated to health in the region.

Mr. Turdiu was led to his third point and highlighted the importance of the "*European Commission, as a most important Donor*" in this region, who unfortunately is not participating in this Forum, and once more mentioned better prioritization of the health domestically or regionally. He also mentioned the opportunity that the Ministers of Health by negotiating with their partners in Brussels, could influence opening the IPA funds for health (as 11,3 billion EUR have been allocated for 7 years for IPA II, but not a penny for health).

Dr. Brown expressed high appreciation of Mr. Turdiu's intervention and stressed his points as very clear messages. She acknowledged the availability of the evidence, strategies that follow international practices, but this is an issue not just across this table but across the region, because we are not making this process strong. She mentioned that health sectors are left with small projects on the side and, therefore, health goes in parallel and not as part of the mainstream.

In that line, Chris Brown, requested other interventions from the Ministers table and invited **Dr. Hrapović**, Minister of Health of Montenegro to again take a lead and describe how they are using SDGs in the context of health.

Dr. Hrapović, expressed his appreciation for this authentic and unique debate, which inspired him to express his opinion related to the importance of money or health policies. Dr. Hrapović accentuated that he is the first non-medical person among the five previous Ministers in MNE, an Economist and said: "*to bring decision for money, we have to be healthy*". He shared his opinion with the previous speaker, Mr. Turdiu that Ministers haven't really knocked on the EU's door, and thanked for this optimistic suggestion.

He shared the information about the adoption of the National Strategy for Sustainable Development by the Government of Montenegro, whereby, health has been recognized as the outcome and indicator of sustainable development and inclusive growth in all three of its dimensions: economic, environmental and social. By adopting this agenda, the Government of Montenegro has pledged to work for the improvement of the health of all citizens and established the Council for prevention and coordination of the NCDs, under the Prime ministers leadership. This national council is seriously implementing the strategy, fully supported by the government of MNE, by equally promoting health prevention, quality of treatment and rehabilitation for all citizens, including migrants.

With regards to the SEEHN, he highlighted the work of the RHDC for chronic NCD, which is hosted by Montenegro and its work on coordination of sub regional responses to chronic non-communicable diseases. As a result of the sub regional consultation processes, Dr. Hrapović, emphasized the importance to identify a set of indicators for monitoring the progress of the chronic diseases control, as a precious instrument that helps to operate responsibly and efficiently and mobilize the necessary

resources for chronic non-communicable diseases control. In this regard, he called this issue - Finalisation indicators to monitor progress of the chronic NCDs control, as a very important but unfinished task, where the support of WHO Europe would be substantial.

The facilitator congratulated Dr. Hrapović for the very interesting points he made, accentuated the important move that the Head of the Country is becoming the Head of the Commission for NCDs, by developing promotional campaigns, engaging the community, MNE is making a very significant step forward.

Dr. Brown then gave the floor to **Dr. Goran Čerkez**, who intervened by using education as a key word in this context. He specified his concern about health not being a priority of all countries, underlined the importance of the educational sector and the impact this sector can make by integrating health in other national strategies. He also stated that the International Organizations can be more influential, in positioning health above all other targets in countries.

Dr. Chris Brown, wrapped up his points as “... *the meaning of good child development, the importance of other sectors to understand health and what is it to do for strengthening capacities for investment in health*”. In this line, she concluded, we should bring together different sectors to discuss about health, by recommending the network to organize such gatherings.

In continuation, she asked Dr. Jelamschi to explain the changes implemented in the Republic of Moldova (MDA) and how in the country it became possible to change the course and set health high in the political agenda.

Dr. Jelamschi informed the Forum that during this period in the Republic of Moldova there were a lot of changes of different kind, political, economic etc. Despite the fact that it was a long period, he said that health remained a main challenge and every government which came into power, took the responsibility to continue with the implementation of the previously adopted programmes and documents. Taking into account that the Republic of Moldova has the National Health Strategy until 2017, Dr. Jelamschi stated that the process of the development of a new strategy has started. He underlined that Moldova, as many countries in the region, aligned to 2030 agenda for sustainable development since 2015, through periodic national health forums and cross-sector working groups established under the State Chancellery, where the UN and WHO support, in particular, was instrumental. The UN Partnership Framework 2013-2017 and the UN Development Assistance Framework 2018-2022 that are currently being developed, are important tools to promote health in other sectors, emphasizing the cross-sector nature of work, he stressed.

Dr. Jelamschi explained that when the National Development Strategy *Moldova 2020* was endorsed in 2012, health did not get a high priority. Following a number of high-level meetings, however, including the recent meeting between the Prime Minister of Moldova, and WHO Regional Director for Europe in November 2016, has influenced health to be given a higher priority on the political agenda. In this context, there was a comprehensive mid-term review of the *Moldova 2020* paper, where health will be incorporated as an important priority, he said.

In addition, Dr. Jelamschi mentioned that the Ministry of Health pursues to work with other sectors, in particular in closer collaboration with the social protection and education sectors. In this line there are on-going discussions for merging the Ministry of Health and the Ministry of Labor, Social Protection and Family to work on issues such as: updating medical curricula for pre-service and in-service education; nutrition in pre-school and school facilities; food and nutrition; alcohol and tobacco; sanitation and waste management etc.

Dr. Jelamschi concluded by reiterating the country's commitment to advance the sustainable development agenda, in partnership with all relevant stakeholders, going beyond SDG 3 and building on the positive experience of other members under the SEE Health Network, WHO European Region and worldwide.

After completing the intervention from the Ministers side, the facilitator gave a very brief introduction to a good example of placing health within the economic programme, and asked **Dr. Natasa Djurasinovic** to share the Republic of Serbia's lessons learned from their positive example.

Dr. Natasa Djurasinovic highlighted the Employment and Social Programme of the Republic of Serbia adopted in the 2016, which has a strong commitment to two objectives: (i) Social Child Protection and (ii) Health Care/Health Systems, which are priorities in Serbia. Dr. Djurasinovic listed the objectives and measurements of this programme, for example the newly introduced protocol on improving social and medical care for children, etc. According to the new legislative framework, she informed that the local municipalities in Serbia are responsible for primary health care, monitoring the population health status, protection of patients' rights and developing programs for environmental protection and public health. Local health councils were established to implement whole-of-government and whole-of-society approach and the support to implement this initiative was provided by the European Commission that culminated with the Social Inclusion Strategy and it was a joint effort of public sector, civil society and academia, she said.

Dr. Djurasinovic concluded by mentioning the EU Health Program 2014-2020 being an ideal platform for connecting the countries within Western Balkans with common challenges and priorities.

By listing the crucial points of these positive examples from Serbia, the **facilitator** acknowledged this very efficient way of alignments and inter-sectoriality work, which was perfectly managed in terms of capacities, laws and financing.

The next intervention was made by the Deputy Minister of Health, **Mr. Andovski**, who discussed the challenges and aspects of realization of the adoption of the Strategy "Health 2020" in the MKD, which now it is the most important framework for facilitating good health and well-being and achieving of goals inclusive and sustainable society. National "Health 2020" process has brought together all the stakeholders, in all sectors and at all levels, in responding to the national needs for health promotion, as well as responding to the commitments made by the state at regional and global levels. Mr. Andovski then thanked the World Health Organization for its support throughout this process, and greeted its role as a partner that have built professional and public trust in the country.

"SEEHN has extremely big potential to complement our action at national level in achieving "Health 2020" and "Agenda 2030" goals and targets, he stated. In this context he called upon a more coherent approach to shaping both political and technical agenda and a partnership with WHO Europe and the other partners of the SEEHN in implementing action at sub-regional level, including the SEE 2020 Strategy as a good instrument to channel EU's support in the region.

Dr. Brown elaborated the strong point Mr. Andovski made by describing the potential of the network together with its partnerships as a home for driving this forward, as an added value for enabling and a place where the ministers are looking for best examples.

She then invited the Deputy **Minister of Health, Dr. Kamenov from Bulgaria** to make an intervention.

The Bulgarian government is strongly committed to improving the social agenda and setting the development of social policy, based on human capital. By quoting the President of the Republic of Bulgaria, “ *The shadow of inequity lies on two most important social systems: health protection and education*”, Deputy Minister Kamenov spoke about the National Coordination Mechanisms and the Programmes, which are applying the objectives of sustainable development in the country and are managed by the Ministry of Foreign Affairs.

He mentioned the *National Development Program 2020*, adopted in 2014, as a decision for national growth, in compliance with the engagements of the Bulgarian Government, at international and European levels. Unfortunately, the UN SDGs are yet not embedded, but the Millennium Development Goals (MDGs) are quoted within the *National Health Strategy 2014-2020*, which was adopted in 2015. In this line, Mr. Kamenov underlined that the Bulgarian Government highly appreciates the World Health Organization Country Office (WHO CO) support, in the organization of a national workshop gathering various stakeholders from different sectors, both governmental and non-governmental, to review the National Health Strategy and include the SDGs.

Finally, he gave another example of the progress made by the Ministry of Health in collaboration with WHO Europe, namely the adoption of the *Program for prevention and control of Tuberculosis*, which is a socially significant matter in Bulgaria, by setting ambitious targets for reducing the prevalence up to 40% by 2025. Additionally, the *National Program for Prevention and Control of HIV and sexually transmitted Infections (STI)*, was also adopted recently and it has set up targets of achieving at least 60% coverage of the most-at-risk populations (MARPS), reducing new HIV infection by 75%, removing the risk of maternal-child HIV transmission and including anti-retro viral (ARV) therapy in 90% of people living with HIV.

The floor was opened then for comments and interventions from the SEEHN's Partners.

Ms. Dorotea Kahr-Gottlieb, Secretary General, European Forum Gastein, began her intervention by connecting to the last comment made by the facilitator, naming the Network a “*Home for policy debate*”. In this regards, Ms. Gottlieb offered the European Health Forum Gastein (EHFG) as a “... *home for exchange of policy issues and a place where authorities can discuss show case and share practices at the European and trans-Atlantic level*”. She acknowledged the good collaboration with the network and used this opportunity to offer their support in, arranging bilateral meetings for the SEE Ministers or closed workshops. She also invited participants to attend the EHFG 2017, whose goal will be to take health in all policies a step further, with the subject “*health in all politics*” and observe and discuss the implementation of politics related to health in Europe.

The EHFG Secretary General concluded her intervention, by inviting also young professionals from the region to apply to the Young Forum Gastein Initiative. Another mentioned opportunity was the call for applications on cross border care projects for the European Health Award with the prize of 10 000 Euros.

Dr. Chris Brown, bringing the attention to the challenges to participate in these kind of Forums, highlighted the importance of funds, therefore she saluted the EHFG's offer to work with the network for strengthening capacities also outside the forum.

The next representative of the Partner organizations spoke on behalf of the **Council of Europe**, who used to be a founding member, precisely from the **Council of European Directory of Medicines and Health Care**, which deals with medicine products. He shared detailed information about the Health Committee of Experts, which is running meeting in regular bases, discussing pharmaceutical care and

rational use of medicines. Even though he could not make a commitment for funding, he offered the possibility of inviting experts from the SEE Ministries of Health or Agencies, to benefit from these Committees at EU level, in drafting technical project that may lead to high level potential savings. He encouraged member states to appoint experts from their National Drugs Agencies to attend different committees (for falsification, classification of pharmacies, organ transplantation, blood safety, etc.)

The facilitator accentuated the value of cross-fertilization of ideas and practices and management of strategies, during this kind of meetings and handed back the floor for conclusions to the Chair, Dr. Jakab.

Dr. Zsuzsanna Jakab congratulated all the speakers for the big progress made in the SEE countries, despite the challenges and pointed out the New Agenda 2030 as a fantastic opportunity by asking countries to make sure they are part of this process and put well-being high when localizing the SDGs. The WHO Regional Director for Europe mentioned in her previous presentation in 2015/2016 the national development plans have included health in 70% , *“but now we have to make it 100% and it is a big responsibility and you can count on the WHO support”*, she stated.

Dr. Jakab put a special focus to the intensification of the multi-sectorial approach and putting more faith to other sectors, underlying the magnificent MNE example where the Prime Minister is leading the NCDs committee, as well as similar initiatives in MKD, SRB and BIH.

Dr. Jakab mentioned both dimensions of inter-sectoriality, namely the regional and national ones and assured that WHO Europe is coordinating the regional dimension by bringing together sectors like health and environment, health and social policy, health and finance etc., and that could only work if countries put strong national coordination mechanisms in place.

Another point Dr. Jakab made was about the role of partnership as vital in the SDGs implementation process, especially the need to work closely and make sure the EU is part of this process. The EHFG was underlined as a very good platform for bringing the SEE Health Network together with EU and WHO Europe and beyond.

WHO Regional Director's final point was that funding mechanisms are key, but to invest in exploring the mechanisms, submitting the right applications and discovering funding opportunities is crucial.

Dr. Jakab concluded the session by thanking Dr. Brown for the great and vivid facilitation of this session and also thanked all the panellists, Ministers, Heads of delegations and partners for their valuable input. She announced **Dr. Adil Osmanović, Minister of Civil Affairs, Bosnia and Herzegovina, as the Chair** of the next session, and **Dr. Hans Kluge, Director, WHO Regional Office for Europe** as a facilitator of the **Plenary Session 4**.

PLENARY SESSION 4: UNIVERSAL HEALTH COVERAGE AND PUBLIC HEALTH

Minister Osmanović expressed his pleasure to open the session on Universal Health Coverage, which he stated is at the heart of the Sustainable Development Agenda, the European Health Policy Framework “Health 2020”, and the Ljubljana and Tallinn Charters. He reiterated the definition of UHC is *“All people should get access to needed health services of sufficient quality to be effective (including prevention, promotion, treatment, medicine, rehabilitation and palliative care) without the risk of being exposed to financial hardship”* as of crucial importance and value for all Governments.

Even though it is clear from the definition that public health is included in UHC, he emphasized the importance of attention and resources allocation to strengthening public health capacities to build a people centered and efficient health systems. He expressed his appreciation for the longstanding history of the SEEHN in public health and at the same time, he asked his colleagues to be modest, because much more needs to be done.

He then introduced the facilitator of this session **Dr. Hans Kluge**, Director of the Division on Health Systems and Public Health at the WHO Regional Office for Europe and before passing the floor to him Dr. Osmanović invited Dr. Glavan, Minister of Health of the Republic of Moldova, to set the scene on the UHC.

In her introductory speech **Minister Glavan** underlined that the principles of UHC are embedded in the European “Health 2020” and also reflected in the Moldovan National Health Policy 2008-2021 Health Development Strategy. In this respect Dr. Glavan listed several measures the Moldovan Government has undertaken: higher reimbursement rate for the anti-hypertension drugs, widening the beneficiary list for free health insurance for farmers’ like women with 4 and more children, decrease of the out-of-pocket payments with the support of WHO Europe, etc. Still a lot has to be done, she said such as for example for improved hospital sector efficiency, UHC access to high quality and safe medicines, etc.

She declared that WHO Europe’s support to the PH sector in MDA has been vital and valuable for regionalization of the public health laboratory system, decrease of tobacco and alcohol consumption, UHC, public health capacities, pharmaceutical policies and hospital efficiency, etc.

Minister Glavan concluded, as a bottom line, that securing funds for public health is only possible only through the efficiency in the rest of the Health System performance and when strengthening of the public health and hospital services become the major areas for savings in reality.

Dr. Kluge took the floor by thanking Minister Glavan and Dr. Osmanović, for the excellent overview of what the Universal Health Coverage is. By clarifying some disbelieves of the meaning of the UHC, he underlined that UHC includes prevention, promotion, diagnosis treatment, care and palliative care, which means includes all the interventions to improve the health of the population.

Dr. Kluge clarified that the UHC is not a concern for disease control programmes, but includes key interventions which are addressing the main causes of both NCDs and CDs. UHC is, therefore, so important for the unfinished MDGs agenda and also for the SDGs 2030.

Another disbelieve, he particularized is that UHC is everything for everyone at all costs, which brings the authorities to hesitate support this system. In fact UHC is about realisation of the people’s right to health by gradually expanding health care and protecting the citizens from financial risks.

Since there were no other questions related to the presentation of Minister Glavan, Dr. Kluge invited the panellists of the session to come in the front, namely **Dr. Kenan Hrapović, Minister of Health, Montenegro, Professor Florian-Dorel Bodog, Minister of Health of Romania and Dr. Galin Kamenov, Deputy Minister of Health, Republic of Bulgaria**, to discuss on the following questions:

- How were they dealing with Public Health in their countries, whether there were any obstacles, any enabling in the implementation of the so called Essential Public Health Operations, remembering the European Action Plan to Strengthen Public Health Services, as an essential pillar of Health 2020, and he took this opportunity to mention the important input given by *Prof. Alex Leventhal, Dr. Maria Ruseva and Jose Moreno*.
- Improving the efficiency of public health services, besides the evidence, still with a limited budget and how to increase financing for public health.

After he presented the subjects of discussion of this panel, he invited the first speaker, **Minister Dr. Kenan Hrapović** to make his intervention.

Dr. Hrapović called upon witnessing a number of processes that globalization, urbanization and technology have brought, as well as the environmental changes, demographic transitions and other burden of diseases. He put his attention on younger generations, children as most important population and on prevention particularly in terms of cost effectiveness.

He also raised and elaborated on the questions how to transform problems that globalization brings into opportunities, how to be proactive. Speaking as an economist, he tried to explain the value of dividends for the governments and how governments can gain, if investing in health proactively, by emphasizing the multi-sectorial aspect as a model in MNE.

He emphasized the interest of the government of Montenegro on promotion and prevention programmes, by giving some positive examples: preventive programmes for colorectal, breast and cervical cancers, which have had remarkably a great response in MNE. He mentioned planning to undertake studies in MNE to show fiscal effect to the government so they can support public strategies and approaches and in this respect he requested both WHO Europe's support, as well as other countries' experiences in order to finalize this project.

He specified the importance of human resources for health, which becomes an issue in these countries, due to the fact that medical staff more and more is migrating to the western countries for financial reasons. Dr. Hrapović described his aspiration to achieve UHC and underlined that the MNE government is offering continuous medical education and increasing the number of health staff in order to sustain the sub-national coverage and appropriate dispersion of medical services.

Finally, he made a point, related to the previous panel, the unexploited Instrument for Pre-Accession Assistance (IPA) funds and/or other EU related funds, and suggested several countries to jointly apply for these funds.

Dr. Hans Kluge, summarized quickly and congratulated Dr. Hrapović for his extra intervention which touched upon many issues, namely from early investment in children, linking to the education, from inter-sectorial to prevention, demonstrating the fiscal effect to the public health workforce, up to the joint IPA application.

Dr. Kluge gave some examples of positive prevention programmes impact, such as: (i) the anti-tobacco control being funded partially by the health insurance fund in the Republic of Moldova; (ii) some studies which describe the economic impact of prevention in the UNK, whereby, one extra child walking or biking to school brings a return of 700 Euro by increasing productivity, by decreasing cost to the national system and decreasing air pollution; in USA by implementing prevention programs for depression at the working place which costs 200\$ per person/year, brings a return of 4000\$ /year.

Dr. Kluge asked Dr. Hrapović another question to respond to:

Can you give us more convincing arguments towards fiscal policy makers? How to make the health sector more credible to Ministers of Finance, so they make more investments in Public Health?

In response, **Dr. Hrapović** gave several examples from his experience from the past as a Director of the Health Insurance Fund and his current experience and chance to make a difference. *“Never talk to the Minister of Finance about savings in health, but rational expenditures”*, he stated. He then described few models of possibilities for saving inside the system and their reinvestment, as well as the suggestion for establishment of a government fund, which will divide budget for expensive procedures and operations. Dr. Hrapović concluded his answer by sharing the evidence about the recognition of the good Information System in Health in MNE, which has shown how rational use of funds can save money.

Once more the facilitator congratulated Minister of Health of MNE for his excellent points, and mentioned the investment in medicine and technologies as an excellent point, which becomes most frequent request from many Ministries of Health (MOHs) to WHO Europe.

The facilitator gave the floor to the next panellist, the Minister of Health of Romania Professor Florian Bodog.

Minister Bodog stated that the principles of UHC are embedded in the national legal documents in Romania and have started to be implemented and monitored since last year, by listing some recent examples to highlight the public health interventions targeting health promotion, social determinants and health inequities. One of them is a Norway funded project for three years in public health operations, with the main objective to enhance the institutional capacities of the local authorities, by introducing Roma Health Mediators and Community Nurses Network on Mother and Child Health, reproductive health, TB control, early detection of the NCDs. The project is also supported by the World Bank and domestic funds. The tools developed and the legislative framework is focused on the integrated care and intersectorial actions at the community level. A large media campaign was developed and implemented. Albeit, there are many other challenges in Romania such as the human resources for health and lack of funding for research.

In addition, Minister of Health of Romania, shared the information about the successfully implemented 11 project funded by the Norway Grants, which made Romania eligible to participate in the next round, with 15% participation by the government. He also underlined the valuable support the government of Romania is receiving by the WHO experts, and thanked in advance for the upcoming collaboration in this regard.

The Facilitator found extremely important the targeted intervention towards Roma Population in Romania. In this respect he mentioned the results of the joint WHO Europe and World Bank Progress report and the UHC analysis undertaken in a number of countries, regardless of the level of

development, showed that in the beginning of the UHC the poor population are the ones who often benefit less, in comparison with the wealthy population in urban areas.

He reminded once again the audience that the first goal of the UHC is related to equity and these targeted health intervention programmes are trying to balance those persistent inequalities.

Then he invited the next panellist.

Dr. Galin Kamenov, Deputy Minister of Health of Bulgaria, emphasized the importance of UHC and Bulgaria as well, at the same time he pointed out it to be a challenge for any health system. The main objective of the Bulgarian health system governance is accessible and high quality healthcare services provision to the population. The MoH undertook active actions and initiated key reforms aimed at improving efficiency and access to healthcare services, optimizing the health outcomes. The Deputy Minister listed 6 recent government initiatives, with a short explanatory notes on each of them: (i) Introduction of a Mandatory National Health Map, which allows to have in place a reliable mechanism for planning medical care and predictability of investments (both public and private) in the health care system; (ii) Possibility for the national Health Insurance Fund to contract hospitals, in accordance with the National Health Map, to enable better use of human resources and public funds; (iii) Increasing the efficiency in the health insurance system management, funding based on outcomes and incentives for providers to ensure high quality medical services; (iv) Increasing the National Health Insurance Fund budget in 2016 for outpatient care, PHC and specialized outpatient care; (v) Opening new opportunities for promotion and diseases prevention activities; (vi) Promotion of procedures in outpatient care, including medical services for patient whose condition does not require prolonged hospitalization.

Dr. Kluge thanked for the comprehensive overview given by the Deputy Minister of Health of Bulgaria, examples of people centred systems and universal health coverage, the shift of care from hospitals to the primary health care and the outpatient care, which is presently seen as a frontier of health care in Europe. By summarizing the main topics of discussion, he also mentioned the human rights to health, as a target 3 c under SDGs targets, and called upon this year's Regional Committee in September, comprising the EU Framework for action on sustainable workforce 2030.

"Good work means more work" said Dr. Kluge and in that context he informed about the important meeting held recently in Greece, where WHO Europe team, headed by the RD, has participated. A Public Health policy dialog with all stakeholders and the Structural Reform Support Service (SRSS) of the European Commission (EC), with an official mandate to technically support country structures, which had a great impact for the significance of the PH as a cost cutting element and where an agreement has been reached that the EC and SRSS to consider some reprogramming for PH for making the system efficient.

After the panel Dr. Kluge opened the floor to the Ministries delegations for general discussions and passed the floor to **Dr Bogdanić**.

In relation to the 10th SDG goal – reducing inequities and ensuring equitable access to health services through UHC based on stronger primary health care, Dr. Bogdanić mentioned the survey undertaken in the Republika Srpska (RS/BIH) in 2011, which has demonstrated a number of positive results in that regard, such as improved access to family physicians, an increased number of preventive services and screening procedures. However, he emphasized that the development context of RS/BIH carries great number of threats for health and the health care systems. In that respect he shared the actions that the government of Republika Srpska/BIH has undertaken to respond to these challenges, such as

adopting the Policy for Improvement of Health of the Population by 2020 which has committed to strengthen patients- oriented care system.

As a very important outcome from the self-assessment tool undertaken for the evaluation of the essential public health operations (EPHOs), Dr. Bogdanić shared the general conclusion that in all of them RS needs an improvement. He, therefore, highlighted the priority his government has made to allocate part of the budget from the excise taxes for financing public health. He expressed his prospect for the forthcoming meeting in October in Banja Luka 2017, organized by the WHO Europe, to be led by Dr. Kluge and all former Ministers of Health, on the subject of earmarking so called “taxes of sin” and suggested it a possible topic of discussion for the next SEEHN meeting, taking into consideration that most of the countries in the SEE region are sharing similar challenges.

The facilitator summarized the clear points derived from Dr. Bogdanić’s intervention, particularly about the integration of PH and PHC, where he mentioned and acknowledged the support from the Swiss Development Agency. He referred to the often conceptualization of the PH and PHC, and how they are separately financed, but underlined that more and more evidence show that this two should walk together and support each other.

He used the example of Ebola and Zika virus epidemics to explain the importance of the timely information at community level, and sub national level, as well as remained with the PH impact to the secondary prevention of health care.

Dr. Natasa Djurasinovic intervened by describing the Serbian Public Health Law endorsed last year and the National Health Strategy which will be adopted this year, where public health in all policies approach is embedded as the main concept. The implementation will be led by a PH National Council coordinated by the MOH and according to the new law, local authorities are establishing health councils (160 so far) and in line with the WHO H2020 strategies. Moreover, in cooperation with the Ministry of Finance and Ministry of Local Self-Government programmatic budgets have been in a pilot phase developed this year by the municipalities. This means that representative from the local health councils will be part of the local self-government working group, for development of the program budget across all sectors, and will enable municipalities to define PH needs and finance them adequately. Dr. Natasa Djurasinovic concluded that in longer prospective they expect this approach to strengthen PH and ultimately improve health and wellbeing of the population.

Dr. Kluge highlighted the important point of linking the strategy, the policy and the financing, made by Dr. Djurasinovic, mentioning the big gap that appears between the political commitment and allocation of money for PH. Then he concluded that a political commitment to a broad PH policy with a concrete financing behind, needs to be in place.

He gave several examples for explaining the importance of PH, such as the intervention of WHO Europe RD to strengthen the Division of Health Systems and Public Health, and with the success of Dr. Ruseva, is not any more cannibalized, he said.

Dr. Hrapović, in the last round, acknowledged the previous good examples how to replicate the financing as a model, however, he underlined that there is a big resistance by the community mayors to take over the outpatient services and share the financial burden.

Dr. Kluge opened the floor to the partners and invited the colleague from International Organization for Migration (IOM).

Dr. Jaime F. Calderon Jr., Regional Migration Health Advisor, IOM Regional Office for South-Eastern Europe, Eastern Europe and Central Asia, expressed gratitude on behalf of the IOM for the opportunity to speak at this very important event that allowed to promote cooperation among Member States and most importantly, to strengthen public health partnerships within South East Europe. The IOM Representative highlighted the successful cooperation between the SEEHN and IOM with regards to migrant health through exchange of information on matters of common interest, Roma health, mobility of health workers, as well as the development and implementation of projects including research, reports and publications. He also expressed willingness to more engagements with the network on these thematic areas in the upcoming years.

Dr. Jaime F. Calderon Jr. underlined the successful recent Global Consultation organized by IOM, WHO and the Government of Sri Lanka, which provided a multi-stakeholders' platform to set the migration health agenda and address the current dynamics and complexities of migration. Despite the fact that many migrants are vulnerable to health risks due to migration related circumstances, they face obstacles in accessing essential healthcare services which have negative consequences on their well-being, he stressed.

The IOM Representative, called upon all governments, on behalf of the Organization as a leader in migration matters, to mainstream the "right to health" in their policies and programmes and ensure that all people, regardless of their status, are given access to health services. This will (1) ensure the rights of migrants' to health, (2) minimize the potentially negative impact of the migration on migrants and society, (3) reduce disparities in migrants' health status and complies with the principles of "universal" access to healthcare, (4) reduce excess mortality and morbidity among migrants, and equally important, (5) facilitate equitable, inclusive and sustainable development for all. In this respect he urged in signing the proposed Chisinau Pledge, where member states take into account the challenges that remain and recommit to addressing them including commitment of necessary resources.

Additionally, IOM believes it is critical that both the Global Compact on Migration and the Global Compact on Refugees specifically address health issues and hopes the thematic sessions can offer the opportunity to mainstream the migration health agenda, guided by the 2030 Agenda for Sustainable Development.

Dr. Jaime F. Calderon Jr. concluded by reiterating IOM's commitment to work closely with the Member States of the SEEHN and the other development partners to address these challenges and to ensure that no migrant is left behind.

Dr. Kluge expressed thanks for the excellent partnership and mentioned the European Action Plan on Migrants' Health adopted at the last WHO Europe Regional Committee Session.

The Slovenian Representative, Ms. Metka Logar, Head of European Affairs and International Cooperation Service, Ministry of Health intervened by excusing the Slovenian Minister of Health for not being present because of the ongoing healthcare reforms in their country. Then she presented their key priorities in PH which are: health prevention and promotion, health protection and disease prevention. There is an ongoing assessment of PH services in partnership with the WHO Europe and after the completion of this exercise, Slovenia is open to share its experience, she said. Ms. Logar highlighted the current monitoring process of health and wellbeing of the population, analyzing the healthcare provisions managing health risks hazards, protecting and promoting health and early diagnosis. A newly adopted legal framework, the National Healthcare Plan 2016-2025, is defining strategic development priorities and objectives for PH, aimed to provide qualitative, safe public

services to the population, she added. Through the latter the necessary links will be created with other sectors as education, social protection and labour, environment, and all that will be linked to the fiscal possibilities. The Slovenian Representative concluded by underlining the importance of providing high quality healthcare services based on the principle of solidarity that are creating at the same time healthy lifestyle practices and thanked for the particularly successful 15 years of cooperation within this network.

Dr. Kluge spotted several championships of Slovenia in the PH area and the recently celebrated 20 years of the Ljubljana Charter.

The floor was passed to the **Prof. Alex Leventhal**, one of the long-term allies and supporters of the SEEHN, to comment on one of the most important and critical matter as the human resources for health (HRH) as well as on the work already done with European Association of Schools of Public Health (ASPHER).

Prof. Alex Leventhal highlighted that HRH is appearing constantly as a challenge, with the world changing. Although there are some prevailing rules, cost-effective interventions with almost 100% of success, it does not apply to all the other areas, he emphasized. The importance to motivate young people, to show them the horizon, to spot out proofs of PH interventions for economic efficiency, was mentioned. To conclude, Prof. Leventhal said: *“wealthy people are turning into healthy people and this change is wished to all people and those countries, who will invest in health, are actually investing in future and humanity”*.

Dr. Zsuzsanna Jakab closed the session underlining the rich discussions and thanking Dr. Kluge for his excellent moderation. UHC was emphasized to be a key strategic concept within the SDGs, albeit also it is important to have a common understanding of the UHC definition. WHO globally and in the European Region is promoting the broad definition. It is not only enough to agree on the definition but also to move towards implementation of UHC, as it is one of the most powerful equalizers. Everybody agreed during the session discussion that PH as disease prevention, health promotion and promotion with its intersectoral component, shall be given a priority.

In this sense Member States need political commitment at the highest level in each country policy document, although there is Health 2020 linking to the PH Action Plans, but this is not still not sufficient.

Dr. Jakab stated that there is a need for more data to convince the Presidents, Prime Ministers, Ministers of Finance. Throughout the discussions held it became clear that the focus shall be shifted from inpatient care towards PHC and outpatient care and integrated PH at this very first level of the health systems.

Dr. Jakab took the opportunity to thank the Swiss partners for investing so much in health at the regional level. She also mentioned the good example of partnership, spotted out by the Minister of Health of Romania.

In addition, Dr. Jakab listed several successful initiatives by expressing gratefulness to the EU and emphasized that the EU can be influenced to provide structural funds, such as IPA for PH matters. This shall be further explored. Gratitude was extended to the IOM joint workshop in Sri Lanka and recently the meeting in Greece. Huge work was mentioned on the Resolution on migration that was endorsed and supported by the Member States in the January, which allows bringing the matter to the global

health agenda and the upcoming negotiations in New York. In conclusion, the Regional Director said: *“good work means more work although this shall be the aim towards strengthening UHC and PH in the health systems”*.

By closing this session, **Ms. Ruxanda Glavan** invited all the participants to the official dinner to celebrate the 15 years anniversary of the SEEHN.

PLENARY SESSION 5: INTERNATIONAL HEALTH REGULATIONS, CROSS-BORDER PUBLIC HEALTH, EMERGENCIES PREPAREDNESS AND RESPONSE

The second day first session of the Chisinau Forum was chaired by **Dr. Kenan Hrapović, Minister of Health of Montenegro**, who started the day by thanking the host, Minister of Health of the Republic of Moldova, Dr. Ruxanda Glavan for the kind hospitality offered the evening before, for the wonderful time and the great reception.

He introduced the Plenary Session 5 by saying (quote): “...defining new challenges for our health systems that are not limited to one particular country but are of relevance to the whole SEE region”.

With an appreciation, he introduced the **Facilitator of this session**, another expert and leader, **Dr. Nedret Emiroglu, Director, Division for Health Emergencies and Communicable Disease**, WHO Regional Office for Europe.

At the end of his welcoming words, Dr Hrapović, gave the floor to **Dr. Adil Osmanović, Minister of Civil Affairs, Bosnia and Herzegovina** to make his introductory presentation on the topic.

Taking the floor, Dr. Osmanović specified that BIH, as a WHO Member State, is completely implementing the International Health Regulations (IHR) since 2008. Dr. Osmanović informed that in the same year the decision of the Council of Ministers established the National Contact Points for Bosnia and Herzegovina, as well adopted a Plan of Action, above the existing Surveillance System in BIH, for strengthening capacities, for successful implementation of the IHR. He also listed several other relevant documents for ensuring public health preparedness.

In addition, Dr. Osmanović listed activities that with WHO Europe’s support have significantly contributed to building and strengthening institutional capacities for the implementation of the IHR and raising the efficiency in the field of prevention and control of infectious diseases, such as:

- Assessment and reporting of relevant public health events;
- Management of entry points;
- Management of emergencies and responses to emergencies.

With this intervention, describing the progress made in BIH, he invited the audience to open the floor for discussion.

The **Chair**, thanked Dr. Osmanović for his very informative and clear introduction and overview of the challenges faced by the health systems in BIH and the challenges that the health systems are facing in this regard in the SEE region. He then passed the floor to Dr. Nedret Emiroglu to continue with the subject and the discussion in a larger format with the panel.

Dr. Emiroglu, thanked Dr. Hrapović and Dr. Osmanović for the presentation and also expressed her gratitude to Minister Glavan for the excellent evening.

She started reminding Member States about their experiences with the increasing emergencies with not only health consequences but also social, economic and other ones by mentioning diseases outbreaks, such as Ebola, SARS, and others, , natural disasters, such as flooding which are more and more frequent in the Balkans lately, etc.

She also mentioned the very important experience from last year, the large influx of population movement, which also resulted in an important refugee and migrant crisis. In this context, Dr. Emiroglu emphasized the importance of the SEE, which with its own 15 years of experience for health and wellbeing of the population, can be a great platform for advancing the WHO work in health emergencies. Linked to this, she specified some of this work on pandemic influenza area and acknowledged the work of the SEE RHDC “SECID” in Tirana as extremely useful.

To describe the magnitude of this work, the facilitator shared some numbers registered by WHO during the past years. WHO has worked with 168 countries addressing more than 1000 epidemics; during the Mediterranean crisis the numbers have been the largest in the population history (more than 120 million globally requiring aid, 65 million displaced and 200 million affected with some sort of emergencies). In Europe at the WHO Regional Office, which operates 24/7 shifts on emergencies, about 15 thousand signals are detected per year and it is tried to identify those that could be of the public health threats. Followed by the description of the transformative process that the WHO Health Emergencies Program has undergone, as a result of the Ebola events, for taking more operational role and prospect to support the Member States (MS) in all aspects of preparedness and hazards, the facilitator mentioned several very important documents. Besides the SDGs Agenda, Health 2020 and the SEE 2020 Strategy, she also mentioned the specific frameworks for emergencies, such as the Sendai Framework for Humanitarian Crisis and the IHR, which is a legally binding document for all countries globally.

With this extensive introduction, Dr. Emiroglu invited the guest panelists to take their places on the panel and to share information and their experiences in terms of what opportunities can be used as common ground for further cooperation between the countries of the SEEHN for better use of the IHR as an important tool to ensure human security, as well as cross-border activities and preventing, preparing, responding and recovering from emergencies.

To focus the discussion better on how to develop further the core capacities at National and Sub National levels, by reminding about the important role that IHR National Focal Points and their institutions are playing, she also mentioned how more and more countries want to assess their capacities independently through an external evaluation. In this context, she mentioned Albania as one of the SEE countries that had experienced it and started a national plan, which is going to address the identified gaps.

The panelists around the table invited to join the facilitator at the podium, were: Dr. Čerkez and Dr. Bogdanić as representatives from BIH, Prof. Florian Bodog from Romania and Mr. Andovski from Macedonia with the objective to review the progress and challenges of the SEEHN countries in applying the IHR and emergencies preparedness and response and to identify the common SEEHN challenges and potential mechanisms to strengthen the capacities.

Firstly, she gave the floor to **Professor Florian Bodog, Minister of Health of Romania** to share some of the experiences and lessons learned that Romania is facing, particularly experiencing the current measles outbreak or other diseases as well as from the simulation exercises. Professor Bodog discussed the high interest of the Government of Romania in the reporting and information sharing under the IHR, preparedness and health security which has been of great value for strong and timely response to various events. He mentioned the establishment of the National Emergency Disaster Management Authority, a multisectorial mechanism within the Ministry of Administration and Interior, with main tasks to coordinate the implementation of the IHR action and measures. He presented, an example of the recent enteric-hemorrhagic Escherichia Coli outbreaks which demonstrates the very important good regional collaboration and intersectorial success of different

Ministries and levels of authority in the prevention, preparedness and recovery from disasters.. He mentioned the ongoing outbreak of measles in Romania as a real time show case and the importance of the WHO communication and technical assistance, where he used the opportunity to thank WHO Europe's RD in advance for the forthcoming high level event, under the auspice of the Prime Minister.

Dr. Emiroglu congratulated Dr. Bodog for this snapshot of the extensive work undertaken in Romania and used the opportunity to mention the new Monitoring Framework related to the annual reporting commitment of the Member States and their requirements for examination of their factual capacities (especially after the Ebola outbreak). This package includes: (i) an element for annual reporting, (ii) a simulation exercises tool, after action review (which is a retrospective reviewing after an event - outbreak) and (iii) the joint external evaluation, which is a voluntary process examining 19 areas of relevance to the IHR for defining the capacities and gaps. Once more, she mentioned Albania as one of the countries that has undertaken this external evaluation among others in the pipe line (Finland, Switzerland, Turkmenistan, Belgium, and Kyrgyzstan). This gives the countries the opportunity to review their national preparedness and the opportunity for further strengthening of their capacities. In this regard Dr. Emiroglu offered WHO Europe's assistance and guide to the SEE countries which should consider undertaking this external evaluation endeavor jointly.

The next speaker, she invited to make an intervention within this session, was **Dr. Bogdanić from BIH**. He underlined that the rapid technological developments in all spheres of life have brought many benefits but have also increased the risks to human health. The rapid spread of infectious diseases, a broader antimicrobial resistance, environmental factors that cause changes in biodiversity, the industrialization, storage and food distribution, are risks, which in short term may threaten large numbers of the people. The IHR are providing guiding principles, provisions and actions to these threats, to which the answer should be a common and well-coordinated, timely risk assessment and quality management.

Dr. Bogdanić listed a number of policies that the Government of the Republic of Srpska (RS/BIH), has adopted for improving the health of the population until 2020 and strengthening the health capacities and preparedness for emergencies of the country, such as: improving control system for public health threats and the system of health and well-being of the population, improving the monitoring of the response to PH threats, etc. He assured the audience that the Health Care Law in the RS/BIH are in line with the IHR and the European Commission Decision and the Council for Cross-Border Health threats, which enabled the approval of the Action Plan for Preparedness and Response to Pandemic Influenza and other operational plans.

Finally, he concluded his intervention by expressing his gratitude for the assistance provided during the catastrophic flood in 2014, particularly to WHO Europe and the resilient cross border collaboration with Croatia, which sustained the health of the population and remained without epidemics.

The facilitator thanked Dr. Bogdanić for his speech and the particular focus he made on the joint preparedness during the flooding, as a great challenge for all and specifying the multisectorial work with the Veterinary Institute as a good example for addressing zoonotic diseases and their consequences to health.

Furthermore, she invited Dr. Goran Čerkez, Assistant Minister of Health, Federation of Bosnia and Herzegovina, BIH to share his perspective.

Dr. Čerkez emphasized the important lessons learned during this catastrophic disaster in BIH in terms of the coordination between all levels, all sectors and with the International Organizations. He pointed out this experience as a good lesson learned in terms of: (i) diseases' threats, (ii) organizational challenges, (iii) coordination with other sectors and (iv) he underlined especially the excellent coordination and collaboration with the neighboring countries and international organizations. In this context he recommended to undertake a regional mapping of all resources at all levels and capacities of the SEE countries. He stated that it is the best way to promote health in all policies by sharing the SEE own experiences in the region.

Dr. Emiroglu thanked Dr. Čerkez for raising such priority as an important issues: sub-regional, regional, national and international coordination and collaboration and, in that context, she underlined the WHO Europe commitment to support and establish mechanisms for cross border collaboration and recognized the SEEHN as such a mechanism.

The facilitator also underlined another action, that WHO Europe is supporting, e.g. the development of linkages between PH emergency preparedness and the PH systems.

The floor was given to the next speaker, **Mr. Andovski**, the **Deputy Minister of Health of Republic of Macedonia**. He also shared similar experiences that MKD has witnessed in the past years, wars, refugee crises, floods, and other weather disasters.

Mr. Andovski described the situation in the region and his country, which has brought to large number of natural disasters that have cost lives, lost property and all this has burdened the health care system. The recent floods in August 2016 in the Republic of Macedonia were responsible for 23 deaths and disturbed the lives and health of thousands. He also mentioned the large-scale arrivals of refugees and migrants in 2015, which represented another great public health concern and challenge for the country and for the region. In this respect, he described how the Government of MKD had and is still is actively working on strengthening national capacities and functions in the area of all-hazards crisis preparedness and implementation of the International Health Regulations (2005).

" This is how we will achieve coherence of what we are doing at national level, while following the processes and protocols that we have adopted at regional level", Mr. Andovski said. .

In this regard, Mr Andovski called for WHO Europe assistance in the development of a package that will fit in the EU reforms and national systems and invited all the SEE countries to to strengthen the partnership in the region in the crisis preparedness and response arena.

In response to the above mentioned Mr. Andovski's request, the facilitator emphasized that WHO Europe is currently mapping vulnerabilities and public health risks that countries can face and will support firstly the ones with highest vulnerability and low capacity. Related to the WHO Europe's strategy on refugee and migrant health, Dr. Emiroglu shared information about the projects supported by WHO Europe in Ukraine in the conflict areas, the health interventions at the northern part of Syria and the joint efforts with the government of Turkey in increasing access to health services for the refugees. She underlined the importance of the member states' collaboration and that with all other partners to the network in this regard.

Then, the facilitator opened the floor for discussion to all the delegations and partners and the first speaker to take the floor was.

Dr. Natasa Djurasinovic, Alternate to the SEEHN National Health Coordinator **of the MOH, Republic of Serbia** was the first to share some experience from the floods in Serbia in 2014, where the Ministry of Health (MOH) recognized the importance of the issue of capacity building of the PH institutions and the importance of strengthening the resilience in similar situations. The MOH, in cooperation with the WHO, has initiated the development of the National Health Emergency Response Plan, which will be integrated in the National Response Plan of the Government of Serbia and which has foreseen the establishment of an Emergency Operational Center. She also underlined that more than 300 officers from different sectors have been trained in this regard with the support of the WHO and that they will undertake a simulation exercise to test the plan.

Dr. Emiroglu acknowledged the work done together with the Serbian Government and agreed that lessons learned in the real time are the most valuable ones. She committed to WHO Europe's further support to them.

She passed then the floor to **Minister Glavan** to share the experience of the Republic of Moldova. In her statement, Dr. Glavan emphasized that it is absolutely critical for the global health security agenda to continuously build the countries' core capacities under the IHR. In this regards, she underlined that the Republic of Moldova has been taking the work on IHR very seriously over the past years and has put a lot of efforts in building its capacities, such as the Biorisk Management (BRM) training courses in 2016 or the planned Infectious Substance Shipment Training (ISST) course scheduled for May 2017 with WHO Europe's support. She shared the plans of Moldavian government to engage in a joint external evaluation of core capacities as a supplement to the small-scale simulation exercise conducted with the health, veterinary and local public authorities at national and sub-national levels in early 2016. She also mentioned that new standard operational procedures are being developed for outbreak investigation.

The Moldavian Minister expressed her gratitude for the ongoing WHO reforms and encouraged the use of SEEHN as a platform to support the newly-created WHO Health Emergencies Program.

"In a complex world we all live now, very timely came the WHO decision on establishment of emergency medical teams to be deployed to affected countries in case of need and this is extremely important to mitigate the impact of potential emergencies and save lives" she stated.

In the end she thanked the Regional Director for the continuing support to the preparedness efforts at regional and country levels and for helping the countries to frame the agenda in the context of the SEEHN collaboration.

The facilitator thanked Minister Glavan for sharing the excessive experience of the Republic of Moldova for the honor and gratitude she expressed for this good collaboration. The facilitator then emphasized two points: (i) the appeal for joint external evaluation for which WHO Europe will start immediately the preparations needed and the legislative and regulatory processes within the countries which feature rapid response by deploying experts, providing guidance for medical interventions, medicine supplies and other areas that WHO is developing in order to ensure regulatory frameworks for response.

Minister Hrapović made his final comment by highlighting, as a best answer to these challenges, the strong platform the IHR are in place and the experience from practices. He mentioned the Romanian experience with vaccination, experiences from the Republic of Serbia with floods and reminded the audience about the good suggestion previously made by Dr. Čerkez for mapping different levels of country responses to threats, including migrant crisis, as it was in MKD. In this context he mentioned

also the MNE's experience in strengthening the laboratory capacities for responding to crisis situations.

Dr. Hrapović requested the SEEHN Member States to share experiences, to improve and secure timely information flow in order to adapt the systems for response and for harmonizing and complementing the regulations. As a last point, he emphasized the good vaccination coverage in MNE in the past which has been jeopardized with the actual strong anti-vaccination campaigns and, in this regards, he requested WHO Europe's support.

Dr. Emiroglu thanked all the speakers for touching different very important aspects, sharing lessons learned, detection of laboratory capacities for quality assured network, the commitment to immunization etc., and expressed WHO Europe's commitment to support the SEEHN, specifying the number of tools to address vaccine hesitation and anti-vaccination groups.

The next speaker was the **Deputy Minister of Health of Bulgaria, Dr. Kamenov** who addressed the importance of the swift response in the context of the growing epidemic of measles in Bulgaria and some neighbouring countries. *"An epidemic develops in a situation of deficit of time because it has to deal with many issues: to diagnose the epidemic, to detect patients, to treat them, to make vaccine prophylactics and this happens in extraordinary conditions under the pressure of the press and the public"*, he highlighted.

He also pointed out at the meaning of the preliminary information, in terms of preparedness during such an epidemic. The information on specific cases should be directed to the political leadership, he stressed, because the measures on mass immunization, public mobilization, communication with the media, etc. depend on the leadership of the Ministry of Health.

Dr. Emiroglu thanked Dr. Kamenov for touching upon this area. Risk communication requires different approach and different skills, therefore, WHO Europe would like to build the countries' capacities in this regard, she stated.

After all the delegations made their interventions and comments, Dr. Emiroglu asked the Partners to take the floor and invited IOM, as a very good collaborator to intervene.

Dr. Jaime F. Calderon Jr., Regional Migration Health Advisor for IOM Regional Office for South-Eastern Europe, Eastern Europe and Central Asia explained how health is an integrated component of IOM's overall humanitarian response, how IOM assists crisis-affected populations, governments and host communities to strengthen and re-establish primary health care systems, particularly in natural disasters. He listed the IOM deliverables, such as the health care and psychosocial support for displaced persons, medical evacuations and how it assists in rebuilding community-based services and in strengthening crisis-affected health care systems.

Dr. Calderon spoke about the IOM approach to supporting IHR capacities at country's level, the cross-border public health, the Roma population and vulnerable groups and in supporting various programmes, etc. He took the opportunity to remind of the outcomes of the 2015 TAIEX Multi-Country Workshop on Public Health and Migration Health organized by the network (SEEHN), in cooperation with the SECID and the Ministry of Interior, Ministry of Health and Institute of Public Health of Albania. Finally, he underlined that the IOM looks forward to work with the SEE Health Network in realizing the agreed decisions of the *"Public health policies on migration and health"* document.

Dr. Emiroglu concluded the session by thanking the IOM for being such a collaborative partner. She acknowledged its real impact at country, national and sub-national levels and expressed her impression for willingness and commitment shared and by calling upon better use of the SEEHN platform, she handed back the panel to Dr. Hrapović for closure.

Dr. Hrapović appreciated Dr. Emiroglu's highly professional facilitation and brilliant conclusions and also thanked all the speakers and participants for their very open discussions.

For the next final, but very important session, he handed over the chairing of the session to the fellow minister, and the Forum President, Ms. Ruxanda Glavan, Minister of Health of the Republic of Moldova, and to the Session Chair, Dr. Mira Dasic, Director of the SEEHN Secretariat.

He invited participants to the coffee break and announced that Dr. Nicolae Jelamschi, Chair of the SEEHN Executive Committee will be the master of ceremonies for the signing of the Chisinau Pledge.

During the Coffee break, bilateral meeting between the Director of the Secretariat of the SEEHN, Dr. Mira Dasic and the Technical Officer Dr. Arta Kuli and the delegations of Romania, Bosnia and Herzegovina and Bulgaria took place. Forthcoming visits and discussions for further collaboration were decided.

PLENARY SESSION 6: THE SEE HEALTH NETWORK FUTURE TOWARDS “HEALTH, WELL-BEING AND PROSPERITY IN THE SEE UNDER THE FRAMEWORK OF THE UN SDGs 2030”

Dr. Dasic welcomed back the delegates from the coffee break and started the next agenda item, the approval and signing procedure of the main outcome documents of the Fourth SEE Health Ministerial Forum namely:

- The Chisinau Pledge, and
- The SEEHN MoU and Standard Operating Procedures (SOPs).

She invited Ms. Ruxanda Glavan, in her capacity as President of the SEE Health Network Presidency and Minister of Health of the Republic of Moldova to present the Chisinau Pledge before endorsement.

Ms. Ruxanda Glavan reiterated her willingness, commitment and honor to witness a new historical moment as the Fourth SEE Health Ministerial Meeting since the commencement of the SEE Health Network. The SEEHN's history of regional collaboration will turn over 16 years on the 8th April since 2001 it was established in Sofia, she said. She mentioned last evening the 15th Anniversary celebration and many accomplishments to be remembered and to be further developed.

Ms. Glavan took a moment to honour the professional that has established and created the Network, namely **Dr. Maria Ruseva**, who has been with the network since the beginning through all the negotiations and challenges along the way. Everybody appreciated the caring style, emotions that that has nurtured a great work to date. Minister Glavan emphasized the enormous gratitude expressed to Dr. Ruseva on behalf of the Network for her great work and endless dedication.

Further, Ms. Glavan thanked Dr. Nicolae Jelamschi for the excellent work through the latest months of negotiation on the Chisinau Pledge during the intra-governmental and multi-governmental consultation processes. She also mentioned that the delegates received the final version of the documents from the excellent SEEHN Secretariat, although some amendments were introduced in last moments. *“This Pledge is a very broad 4th strategic document, that leads the SEEHN towards 2030, aimed to improve health and well-being of the citizens and as a natural continuation of all the SEE efforts in the past 16 years, solidly based on several founding principles and international policy documents”,* she highlighted.

She listed the Pledge focuses on the following commitments:

- Sustaining and strengthening the regional cooperation in public health in South-eastern Europe;
- Achieving the SDGs 2030;
- Achieving UHC for the SEEHN populations;
- Further upgrading public health services and capacities;
- Further strengthening the mutual regional and national actions in cases of regional emergencies and the migration processes;
- Working more closely and efficiently with the SEEHN partners to make the best use of their unprecedented support.

In conclusion, Minister Glavan thanked all those who developed the Chisinau Pledge, the SEEHN Executive Committee and Secretariat together with the National Health Coordinators, as well as WHO Europe. She invited all Authorized Officials of the nine SEE countries, as well as the partners to sign the Chisinau Pledge.

She handed over to the session Chair for inviting all Ministers and Heads of the SEE delegations to a “Tour de Table” to express their commitment.

Dr. Jelamschi intervened with short explanations on the changes recently added to the final text of the Chisinau Pledge by the Drafting group he has chaired.

There have been no major changes to the content of the Chisinau Pledge. Dr. Jelamschi, however, listed all the minor corrections presented to the Drafting Group page by page, together with an explanation and arguments that determined the changes to be approved or not. He mentioned the new action on NCD that has been requested to be incorporated. He recognized the importance of this proposal. Based on the unanimous suggestion of the Drafting Group on the Chisinau Pledge, he suggested that this is included as a formal action outcome from the Forum in the Forum’s Report, but not in the Pledge.

Dr. Dasic invited all the delegations’ Heads to express their commitment to and endorse of the Pledge in the alphabetical order of the countries’ names within the SEEHN.

All the delegations congratulated the SEEHN and expressed their full support to the Chisinau Pledge with the exception of the Republic of Serbia who committed to sign although due to national legal procedures this will most probably happen at a later stage after coordination with the Ministry of Foreign Affairs of the country.

Dr. Dasic handed over the floor to **Dr. Professor Florian Bodog**, Minister of Health, Republic of Romania, to present the next core documents of the SEENH, namely the Memorandum of Understanding on the Statutes of the SEE Health Network of 2017 (MoU/2017) and the SEEHN Standard Operational Procedures (SOPs).

In his introduction to the MoU and the SOPs Professor Bodog emphasized several SEEHN’s future perspectives. He presented that the political consensus at regional level is one of the greatest achievements of the Network. Health represents one of the main triggers for economic growth and social development and obtaining optimal population health is not an isolated responsibility of one Ministry of Health, but is a responsibility of the whole Government, he highlighted.

He mentioned that, the Network succeeded to advocate for health in the region, to raise the issue higher on the political agenda of the governments from the region and to include health as a specific dimension.

Minister Bodog underlined the importance of being the best example of a functional professional organism that contributed to strengthen solidarity, partnership and collaboration in the Region. *“It is also a good example of sharing knowledge, information and good practices between EU and non-EU countries, between countries with different cultures, languages and values, but facing very similar situations and problems”,* he said (quote) .

He, however, mentioned that in order to maintain and improve the status quo, continuous steps need to be followed. Networking and advocating for enlargement of the SEEHN with countries like Hungary, Turkey, Greece, together with partnerships and flag initiatives, represent the main instruments for a successful implementation of the SEEHN goals and for the future development of the Network’s Health Strategy, when medium and long-term objectives shall be set, he said.

Dr. Bodog emphasized that the Memorandum of Understanding, together with Standard Operating Procedures, will be of special value and importance for the future of the regional collaboration, as they reflect the new realities. Furthermore, he concluded that these two main documents can be seen as a renewal of the commitment of all SEE member states to continue working together within the network and that they have been revised in such a manner, that they can be approved by all SEEHN countries and act as the next milestone towards consolidation and enlargement of the network..

Finally, Dr. Bodog stated that this Forum aims to mark the opening procedure for signing the Memorandum of Understanding and encourage all member states to express their willingness to sign and pursue all internal approving procedures in an efficient and accelerated way. Then, Dr. Bodog invited the Heads of the Delegations to have a tour de table and shortly express themselves on the SEENH fundamental documents: the SEEHN MoU and SOPs to be endorsed.

All the SEEHN delegations representatives expressed in principle their support to the SEEHN's MoU, though some mentioned to have to complete the internal national procedures in their countries before their official approval and signing.

Dr. Bodog passed the floor to Dr. Jelamschi in his capacity as Master of the signing procedure of the Chisinau Pledge.

Dr. Jelamschi reiterate the greatest coordination work done in order to finalize the current final version of the Chisinau Pledge and firstly invited Ms. Ruxanda Glavan, as the SEEHN President, to sign the Pledge. Consequently, all SEEHN Member countries were called by in the alphabetical order of their countries' names to sign the document.

Subsequently, Dr. Jelamschi called the partners to signed the Chisinau Pledge as follows: WHO Europe, the RCC, the IOM, the Institute Superiore de Sanita (Italy), the European Health Forum Gastein, Project Hope, the Swiss Agency for Development in Moldova and the United Nations Population Fund. Other partner namely the EuroHealthNet, the European Center for Peace and Development (ECPD), the Northern Dimension Partnerships for Health and Social Welfare Network (NDPHS), Health Promoting Hospitals - WHO Collaborating Center, SEE Network on Workers' Health (SEENWH) and Centre for Regional Policy Research and Cooperation "Studiorum" will sign the Pledge through correspondence.

All the signatory parties were invited in front of the table for a family photo.

Minister Glavan concluded the session by expressing special thanks to Dr. Lucianne Licari for her tremendous support provided through the entire organization of the Forum and invited Dr. Zsuzsanna Jakab, WHO Regional Director for Europe, for her final address.

Dr. Zsuzsanna Jakab congratulated the SEEHN Ministers for signing the Chisinau Pledge and for holding the 4th Forum, which comes with 15 years of experience of a regional cooperation in public health, *"as a nice age – the age of adolescence. As with any adolescent, it is constantly evolving, exploring new things and setting high expectations"*, she said.

She confirmed, sharing these expectations, that the global 2030 agenda for sustainable development is defining the global environment for health and well-being development. She emphasized that health is an outcome, but also a determinant and an enabler to the SDGs and it is the time to contribute to these global processes and a way to enhance the regional cooperation on public health matters in the future.

Dr. Jakab highlighted the strong political commitment necessary for a functioning network with a broader and deeper agenda, at all levels: policy, strategic and technical. She recognized the efforts made for drafting a comprehensive pledge, sustaining and strengthening regional cooperation in public health in South-eastern Europe; towards achieving SDGs, achieving UHC for our populations, further upgrading PH services and capacities and regional and national action in emergencies and migration, while fully appreciating the importance of inter-sectoral work, whole-of-government and whole-of-society approaches.

She stressed that achieving UHC and the ultimate goal of leaving no one behind requires well-financed and adequately staffed patient-centred integrated quality health service delivery systems, with a stronger emphasis on primary health care, community involvement, disease prevention, and the social, economic and environmental determinants of health.

She highlighted, further, the building of the core countries' competencies to implement the IHR, including joint external evaluations with WHO support, for resilient health systems able to cope with existing challenges, as particularly important. To better respond to new challenges, Dr. Jakab stressed that WHO Europe is committed to fully operationalize its health emergencies program, being now a single program, one budget, one workforce, one set of rules and procedures and, above all, one clear line of authority.

In conclusion, Dr. Jakab declared that WHO Regional Office for Europe stands ready to continuously support the SEE Health Network and provide policy and technical support to the WHO Member States in South East Europe and beyond. *"The commitments laid down in the Pledge are huge, but so is also our determination to rise up to those tasks"* she said (quote).

The Regional Director extended special thanks to Minister Ruxanda Glavan, all SEEHN Ministers, Dr. Maria Ruseva, Dr. Alexandre Berlin, Prof. Alex Leventhal, the SEEHN Secretariat, Dr. Lucianne Licari, WHO Country Heads of Offices, the Forum Chairs and the partners. She commended all for the valid and interesting case studies, WHO Europe staff for all effort and support provided throughout the years to the SEEHN.

Minister Glavan thanked Dr. Jakab for her presence and tremendous support and gave the floor to **Ms. Oxana Domenti, Chair of the Parliamentary Commission on Health, Social Protection and Family.**

Ms. Oxana Domenti underlined the importance of hosting such a high level Forum and thanked the audience for their contribution. She also extended special gratitude to Dr. Jakab for her support to the SEEHN and the regional voice to be heard at the international level.

Ms. Domenti stressed the importance of the ambitious agenda and goals of South Eastern Health Ministerial Forum, which aims to set joint sub-regional and national commitments and actions by 2030, in the context of the SDG 2030 Agenda. She mentioned that in order to achieve the UN SDGs politicians and policy makers must build on countries health history, taking into account the best international examples and practices, share good experiences, understand the crucial link between health and wealth and develop new opportunities and mechanisms to transform all into realities. Ms. Domenti called for well-coordinated actions between all national and international partners for health: parliaments, governments, international organizations, donors, civil society

In conclusion, Ms. Domenti congratulated the SEEHN on its 15th anniversary, wishing new perspectives and new partnerships, comprising the national parliaments, quoting Henry Ford: *“Coming together is a beginning; keeping together is progress; working together is success.”*

Ms. Ruxanda Glavan closed the Forum and thanked all participants for their presence, fruitful discussions but also those who were behind the scene that made this event successful. The Minister also extended thanks to Dr. Maria Ruseva, Dr. Alexandr Berlin, Prof. Alex Leventhal, Dr. Nicolae Jelamschi, all the members of the Executive Committee, the SEEHN Secretariat staff, WHO Europe staff, WHO Heads of Country Offices for all their support, the technicians and the hotel staff, the designer, photographer, interpreters, her own Ministry’s staff.

Ms. Glavan wished all to have safe flights and thanked them finally for contributing to make history in Chisinau.

CONCLUSIONS AND RECOMMENDATIONS

1. The 4th Forum of the Ministers of the SEE Health Network, convened under the Presidency of the Minister of Health of the Republic of Moldova, Dr. Ruxanda Glavan, held in Chisinau, on 3-4-April 2017, completed its objectives successfully;
2. The Ministers of Health, the SEEHN Country Delegations and the SEEHN Partners, expressed their sincere appreciation and gratitude to the Moldovan Presidency for the political leadership and professionalism of performing its duties in the period 01 July 2016 – 30 June 2017;
3. The 4th Health Ministerial Forum held at the invitation of the Minister of Health of the Republic of Moldova and WHO Europe Regional Director completed and achieved the expected outcome: the political commitment of all SEE governments to an expanded sub-regional cooperation for introducing and/or strengthening the principles, priority areas and actions towards achieving better health, well-being and prosperity in the region in the context of the 2030 SDG Agenda.
4. A fourth political document of the SEE Health Network, the Chisinau Pledge, was endorsed and signed to that effect.
5. The SEEHN Ministerial Representatives and the National Health Coordinators and partners requested the SEE Health Network Presidency, Executive Committee and Secretariat to circulate the text of the draft Memorandum of Understanding (MoU) and the Standard Operational Procedures (SOPs), with the latest changes incorporated, for formal governmental consultation prior to its approval, to be signed by the SEEHN Member States;
6. The Moldovan Presidency, the SEEHN Executive Committee, the Secretariat and all Delegations wholeheartedly thanked her Excellency, Dr. Zsuzsanna Jakab, WHO Regional Director for, Europe for her personal political and professional commitment to the SEEHN during all these years and her true belief in the SEEHN potential;
7. The SEE Ministers of Health acknowledged highly the significant political, technical and administrative support of WHO Regional Office for Europe and the WHO Country Office in Moldova for organizing and supporting successfully the 4th SEE Health Ministerial Forum;
8. The SEE Ministers acknowledged highly the significant technical and administrative support of SEEHN Secretariat for organizing and supporting successfully the 4th these Health Ministerial Forum;
9. The 4th these Health Ministerial Forum acknowledged with appreciation the role and continuous unfailing support of the Regional Cooperation Council in the process of

- implementing the health dimension of the SEE 2020 Strategy and highlighted the opportunities for fundraising through the European Commission instruments;
10. The SEE Executive Committee held a closed meeting during the 4th Ministerial Forum in Chisinau, on April 2nd and took the following decisions :
 - a. The SEEHN Memorandum of Understanding of 2008 and its Addendum of 2011 revised in view of the current and future developments of the SEE Health Network and its governance and institutional mechanisms to be signed through correspondence in the nearest future in 2017 in line with the national legal requirements;
 11. The SEEHN may wish to consider establishing specific health information collaboration, similar to the so called “Small Countries Health Information Network” which is supported by WHO Europe, to serve the health information SEE Country’s needs.
 12. The progress achieved on both levels, political and technical, was recognized, together with the work of the RHDC as an executive instrument, including the existing Hubs in the SEE countries. Establishment of a roster of various expertise from the RHDCs and Hubs, for providing technical knowledge and practice, in order to move the agenda forward, was agreed to be recommended and introduced.
 13. A change of the membership status of the SEEHN Executive Committee, in terms of participation of only representatives of the Member States and Partner’s representatives, has been recommended. The mandate of the Executive Committee should be changed and limited to a period between two consecutive forums as a maximum to follow the policies adopted at one Ministerial Forums until the next one. This requires changes in the Statutes to be approved by all the Member States.
 14. The Republic of Serbia, as the current Chair of the UNECE Protocol on Water and Sanitation Control, is encouraging countries in the region, particularly countries that have not yet acceded, to actively engage in the Protocol.
 15. All RHDCs were urged to submit regular activities Reports to the Secretariat;
 16. The Secretariat was invited to collect EC TAIEX applications and follow the TAIEX implementation process.
 17. The Forum recognized the high importance of the SEE RHDCs and different Ministerial meetings to be considered as opportunities for exchanging information.

18. The Forum agreed to better use the evidence and health policy frameworks in order to attract investments for improving the health of the population and to address the Social Determinants of Health.
19. The Forum acknowledged the importance of the participation of the European Commission to the Ministerial Forums as one of the most important actors in international public health as well as the main donor for this region.
20. The Forum underlined that better prioritization of health within the countries and regionally, and strengthened and improved negotiations of the health envelop with partners and with the EC is essential in order to influence opening the IPA funds for health.
 - 11,3 billion EUR have been allocated for 7 years for IPA II, but not for the health component.
21. The Forum recommended that the SEEHN governing and administrative bodies, together with the respective RHDC, finalize the set of indicators for monitoring the progress on chronic non-communicable diseases control, requesting WHO EURO support as well.
22. The forum recommended that the SEEHN organizes multi-sectorial gatherings in the region to discuss health from different sectoral aspects.
23. The European Health Forum Gastein (EHFG) was thanked for offering a platform for exchange of policy issues, show case and sharing practices at the European and trans-Atlantic levels by arranging bilateral meetings or round table workshops for the SEE Ministers.
24. The Forum expressed appreciation for the Call for proposals by the Gastein Young Initiative for young professionals from the SEE region and the Call for applications for cross border care projects Award made by the EHFG.
25. The Forum appreciated the offer made by the the Council of European Directory of Medicines and Health Care in relation to the possibility of inviting experts from the SEE Ministries of Health or Agencies to participate in the Committees at EU level for drafting technical project that lead to high level potential savings.
26. The Forum recognized and acknowledged the new agenda 2030 as an opportunity for countries to ensure their active participation in this process and to put well-being high when localizing the SDGs.
27. The Forum recognized EHFG as a very good platform for bringing the Network together with the EU and WHO Europe.
28. The Forum recommended that the SEEHN undertake studies to show the fiscal effect of public health in order to advocate with and convince governments to support public health strategies

- and approaches as well as by requesting WHO Europe's support and other countries' experiences.
29. The Forum recommended for SEE countries' join applications for IPA and/or other EU related funds.
 30. The Forum recommended as a possible topic of discussion at the next SEEHN Plenary Meeting, the so called "taxes of sin", which is the theme of the forthcoming meeting in October in Banja Luka 2017, organized by the WHO Europe.
 31. The Forum concluded and recommended that a political commitment to a broad public health policy with a concrete financing behind needs to be discussed and put in place as a mid-term objective and action.
 32. IOM was welcomed for its willingness for more engagements with the SEEHN for cooperation and exchange of information on matters of common interest in the domain of migrant health, Roma health, mobility of health workers and other topics in the field of migration and health, as well as the development and implementation of projects including research, reports and publications.
 33. In the framework of the Chisinau Pledge, member states are urged to recommit to addressing health needs of vulnerable populations (migrants, refugees, Roma..etc) including securing of resources.
 34. The Forum acknowledged the WHO Europe offered assistance and guidance to the SEE Member States for undertaking Joint External Evaluation Assessment on the IHR capacities and implementation.
 35. The Forum recognised the importance of the exchange of lessons learned from disasters, in terms of coordination at all levels, all sectors and with the International Organizations and urged the SEEHN governance bodies to work in this direction.
 36. The Forum agreed and recommended a regional mapping of all resources at all levels and all capacities of the SEE countries with regards to the emergency preparedness and response. WHO Europe's commitment to support cross border collaboration, involving the SEEHN as a mechanism, was welcomed and welcomed.
 37. The Forum requested WHO Europe's assistance in developing tools for fighting strong anti-vaccination campaigns.
 38. The Forum invited and urged all other partners, namely the EuroHealthNet, the European Centre for Peace and Development, the Northern Dimension Partnership for Health and Social Welfare, the SEE Network on Workforce and Studiorum to sign the Pledge through correspondence.

39. The Forum urged the SEEHN governing and administrative bodies to look for new perspectives and partnerships, involving the national parliaments, other countries, international organizations and networks and non-governmental organizations for public health.

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<p align="center">SEE HEALTH NETWORK SECRETARIAT 50ta Divizija 6, 1000 Skopje, Macedonia Tel/Fax: +389 2 3125 310; +3892 3125 235 Web site: www.seehn.org</p>			
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¹ Throughout this document, Minister of Civil Affairs, on behalf of Bosnia and Herzegovina's health authorities shall be understood as Ministry of Civil Affairs of Bosnia and Herzegovina, Federal Ministry of Health of the Federation of Bosnia and Herzegovina, Ministry of Health and Social Welfare of the Republic of Srpska and Department of health and other services of Brcko District of Bosnia and Herzegovina

PROGRAMME

FOURTH SOUTH-EASTERN EUROPE HEALTH MINISTERIAL FORUM

“HEALTH, WELL-BEING AND PROSPERITY IN SOUTH-EASTERN EUROPE BY 2030 IN THE CONTEXT OF THE 2030 AGENDA FOR SUSTAINABLE DEVELOPMENT”

03-04 April 2017
Chisinau, Republic of Moldova

Monday, 03 April 2017

08:00 – 09:00 **Registration**

09:00 – 10:30 **Plenary Session 1: Opening** - Dr. Nicolae Jelamschi, Chair of the SEEHN Executive Committee welcome and introduction of the top panelists.

Welcome addresses by:

- *Prime-Minister, Republic of Moldova (tbc),*
- *Dr. Ruxanda Glavan, Minister of Health, Republic of Moldova, President of the SEE Health Network Presidency*
- *Dr. Zsuzsanna Jakab, WHO Regional Director for Europe*

Opening interventions:

- *Mr. Gazmend Turdiu, Deputy Secretary General, RCC*
- *Mr. Tolpiu, EU Ambassador*
- *Dr Mira Jovanovski-Dasic, Director, SEE Health Network Secretariat*

Nomination of Meeting Officers
Adoption of the programme

Key-note speeches by:

- **Health improvements in SEE: a guarantee for prosperity and**

achieving the SEE 2020 goals

Mr. Gazmend Turdiu, Deputy Secretary General, RCC

- **Achieving the UN Sustainable Development Goals 2030, Health 2020 and the SEE 2020 goals: how to make it a reality?**

Dr. Zsuzsanna Jakab, WHO Regional Director for Europe

Approval of Drafting Groups on the Forum's outcome documents:

Draft Chisinau Pledge

Draft MoU on the Statutes of the SEE Health Network

Family photo

Coffee Break

10:30 – 11:00

11:00 – 12:30

Plenary Session 2: Sub-regional cooperation for public health in SEE

Session Chair: Professor Florian-Dorel Bodog, Minister of Health of Romania

- **15 Years of Alliance for Health and Well-being in SEE: Report on the sub regional cooperation for public health in SEE, 2001 – 2016**

Presenter: Mr. Kosta Barjaba, Member, SEE Health Network Executive Committee, National Health Coordinator, Ministry of Health, Albania;

Round Table of all SEE Ministers of Health

Facilitator: Dr. Claudia Stein, Director Information, Evidence, Research and Innovation; WHO Regional Office for Europe

Discussions with ministers and partners

Facilitator: Dr. Claudia Stein, Director Information, Evidence, Research and Innovation; WHO Regional Office for Europe

Conclusions

Facilitator and Session Chair

12:30 – 14:00

Press-conference

Lunch

14:00 – 15:30

Plenary Session 3: Health, Well-being and Prosperity in South East Europe by 2030 in the context of the 2030 Agenda for Sustainable Development

Session Chair: Dr Zsuzsanna Jakab, WHO Regional Director for Europe

Facilitator: Dr. Christine Brown, WHO Regional Office for Europe

- **Introduction to the topic and the draft Chisinau Pledge**

Presenter: Dr. Mira Jovanovski-Dasic, Director, SEE Health Network Secretariat, former member of the SEEHN Executive Committee, former National Health Coordinator of Montenegro, former Director General, Ministry of Health of Montenegro

Video: Acting Together for Health Wellbeing and Prosperity in the SEE

Region

Round Table of SEE Ministers of Health:

Facilitator: Dr. Christine Brown, WHO Regional Office for Europe

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Open floor discussions with all participants and partners

Facilitator: Dr. Christine Brown, WHO Regional Office for Europe

Conclusions

Session Chair

15:30 – 16:00

Coffee break

16:00 – 17:30

Plenary Session 4: Universal Health Coverage and Public Health

Session Chair: Mr. Adil Osmanović, Minister of Civil Affairs, Bosnia and Herzegovina

Facilitator: Dr. Hans Kluge, Director, WHO Regional Office for Europe

Introduction

Presenter: Dr. Ruxanda Glavan, Minister of Health, Republic of Moldova, President of SEE Health Network Presidency

Panel of SEE Ministers of Health

Dr. Kenan Hrapović, Minister of Health, Montenegro;
Professor Florian-Dorel Bodog, Minister of Health of Romania
Dr. Galin Kamenov, Deputy Minister of Health, Republic of Bulgaria;

Discussions of the SEE ministers and partners

Facilitator: Dr. Hans Kluge, Director, WHO Regional Office for Europe

Conclusions

Facilitator and Session Chair

17:30 – 18:30

SEEHN Drafting Groups

20:00 – 22:00

Official Ceremony for celebrating the 15th Anniversary of the SEEHN
Official dinner of the Minister of Health of the Republic of Moldova

Tuesday, 04 April 2017

09:00 – 10:30

Plenary Session 5: International Health Regulations, cross-border public health, emergencies preparedness and response

Session Chair: Dr. Kenan Hrapović, Minister of Health, Montenegro

Introduction

Presenter: Dr. Adil Osmanović, Minister of Civil Affairs, Bosnia and Herzegovina

- **Panel of the SEE Ministers of Health**

Dr. Dragan Bogdanić, Minister of Health and Social Welfare, Republic of Srpska, Bosnia and Herzegovina;
Professor Florian-Dorel Bodog, Minister of Health of Romania
Mr. Jovica Andovski, a.i. Minister of Health, the former Yugoslav Republic of Macedonia

- **Discussions of the SEE ministers and partners**

Facilitator: Dr. Nedret Emiroglu, Director, WHO Regional Office for Europe

Europe

- **Conclusions**

Facilitator and Session Chair

10:30 – 11:00

Coffee break

11:00 – 12:30

Plenary Session 6: The SEE Health Network future towards “Health, well-being and prosperity in the SEE under the framework of the UN SDGs 2030”

SEEHN President: Ms. Ruxanda Glavan, Minister of Health, Republic of Moldova, President, SEE Health Network

Session Chair: Dr Mira Jovanovski-Dasic, Director SEE Health Network Secretariat

Endorsement of the Chisinau Pledge

Presenter: Dr. Ruxanda Glavan, Minister of Health, Republic of Moldova as The Moldavian Presidency of the SEEHN

Tour de table: SEE Ministers of Health confirmations

Endorsement of the SEEHN MoU with SOPs

Presenter: Professor Florian-Dorel Bodog, Minister of Health of Romania

Tour de table: SEE Ministers’ of Health confirmations

Signing ceremony for all documents

Facilitator: Dr. Nicolae Jelamschi, Chair of the SEEHN Executive Committee

Photo of signatories

Closure of the meeting

12:30 - 13:30

Lunch

14:00 – 16:00

Departure of SEE delegations
Departure of all participants

FOURTH SOUTH-EASTERN EUROPE HEALTH MINISTERIAL FORUM

Version: 22 April 2017

“HEALTH, WELL-BEING AND PROSPERITY IN SOUTH-EASTERN EUROPE BY 2030 IN THE CONTEXT OF THE 2030 AGENDA FOR SUSTAINABLE DEVELOPMENT”

03-04 April 2017, Chisinau, Republic of Moldova

THE CHISINAU PLEDGE

We, the ministers of health of the Republic of Albania, Bosnia and Herzegovina,³ the Republic of Bulgaria, the State of Israel, Montenegro, the Republic of Moldova, Romania, the Republic of Serbia and the former Yugoslav Republic of Macedonia, member countries of the South-eastern Europe Health Network (hereafter referred to as the SEE Health Network), have gathered at our Fourth Health Ministerial Forum: “Health, Well-being and Prosperity in South East Europe in the Framework of the UN Sustainable Development Goals 2030”, commemorating 15 years of regional cooperation in public health in SEE, in Chisinau, Republic of Moldova on 3–4 April 2017 to discuss the progress made and to promote continued enhanced cooperation on public health in the SEE region.

WE, THE MINISTERS,

Recalling that the SEE Health Network has developed, promoted and supported regional cooperation and technical activities in public health in SEE for the past 15 years and that this regional cooperation in public health was formalized with the commitment of all the ministers of health of the SEE member countries to the Dubrovnik, Skopje and Banja Luka pledges, endorsed at the health ministers’ forums in 2001, 2005 and 2011, respectively;

Recalling that regional cooperation in public health remains of the highest priority to support political cooperation and economic development in the SEE region, to facilitate confidence-building and to support the European and Euro-Atlantic integration processes;

Recognizing that the SEE Health Network has had to adapt to recent political changes and emerging challenges, including: the signature of a memorandum of understanding between the 10 (now nine) member countries of the SEE Health Network and the Regional Cooperation Council in 2010, to frame, take forward and partner cooperation in health with political, economic and other health-related initiatives in the SEE region, and the current status of the SEE countries in relation to the European Union (EU) (Bulgaria and Romania having been EU Member States since 2007 and

³Throughout this document, health authorities in Bosnia and Herzegovina shall be understood as the Ministry of Civil Affairs of Bosnia and Herzegovina, the Federal Ministry of Health, the Ministry of Health and Social Welfare of Republika Srpska and Department of Health and Other Services of Brcko District of Bosnia and Herzegovina.

the political commitment of the most of the rest to accession to membership), while the EU has emphasized public health as a tool for economic and human development;

Recognizing the commitments in the Memorandum of Understanding on the Future of the South-eastern Europe Health Network in the Framework of the South-East European Cooperation Process,⁴ signed in 2009, and the agreement among the member states of the SEE Health Network on the host-country engagements concerning the seat of the secretariat of highest importance, as well as the continuing efforts by the European community to provide political, technical and financial support and human resources to the SEE Health Network, especially:

- the World Health Organization (WHO) Regional Office for Europe, the Council of Europe, the Council of Europe Development Bank, the Stability Pact for South Eastern Europe (2000–2007) and the Regional Cooperation Council (since 2008);
- a number of European countries, particularly Belgium, Croatia (since 2015), France, Greece, Hungary, Italy, Norway, the Netherlands, Slovenia, Switzerland, Sweden and the United Kingdom; and
- since 2010 many international and nongovernmental organizations acting as partners: the Technical Assistance and Information Exchange instrument of the European Commission, EuroHealthNet, the European Health Forum Gastein, the International Organization for Migration, the Istituto Superiore di Sanità (National Institute of Health) of Italy, the International Network of Health Promoting Hospitals and Health Services, the Northern Dimension Partnership in Public Health and Social Well-being, Project HOPE, the SEE Network for Workers Health, the Centre for Regional Policy Research and Cooperation “STUDIORUM”, the United Nations Children’s Fund (UNICEF), the United Nations Population Fund (UNFPA), and the European Center for Peace and Development (UN ECPD); and

Finally, recognizing the vital role and partnership of the SEE Regional Development Centre on Communicable Diseases Surveillance and Control, and the Centers for Disease Control and Prevention, United States of America; the Skoll Global Threats Fund; the Bill & Melinda Gates Foundation; the Rockefeller Foundation; the global network Connecting Organisations for Regional Disease Surveillance; the European Centre for Disease Prevention and Control; and the Robert Koch Institute, Germany;

WE, THE MINISTERS, ACKNOWLEDGE THE MOMENTUM BUILT.

Accordingly, we recognize that this Fourth Health Forum takes place alongside contemporary developments in society, economy and health, and there is a need:

- to facilitate stronger regional collaboration in public health in SEE, building on the achievements of 15 years of cooperation (2001–2016);
- to acknowledge and further support the economic and societal returns on investments in and for health through intersectoral collaboration, and whole-of-government and whole-of-society approaches;

⁴ Memorandum of Understanding on the Future of the South-eastern Europe Health Network in the framework of the South East European Co-operation Process. Copenhagen: WHO Regional Office for Europe; 2009 (http://www.euro.who.int/__data/assets/pdf_file/0006/108663/SEE_MoU.pdf, accessed 27 January 2017).

- to create new opportunities for achieving better health, well-being, prosperity, equity and accountability in health, thus building on major global and European resolutions, charters, treaties, frameworks and action plans, and the European health policy, Health 2020;⁵
- to implement global and European policies and action plans for strengthening public health and health systems' capacities and services for the control and prevention of communicable and noncommunicable diseases; and
- to implement the United Nations Sustainable Development Goals.

WE, THE MINISTERS, UNANIMOUSLY RESOLVE TO WORK TOWARDS:

1. sustaining and strengthening the regional cooperation in public health in South-eastern Europe by:

- a. establishing a SEE Health Network regional platform for health for inclusive growth;
- b. taking advantage of the United Nations 2030 Agenda for Sustainable Development to renew countries' commitments to health and to seek intersectoral action to advance the priorities of the Health 2020 health policy framework in Europe towards 2030;
- c. taking deliberate action to influence governance in other policy arenas to promote and protect health, including education, trade and intellectual property, sustainable energy, income inequality, social protection, water and sanitation, migration, food security and quality, environmental protection and sustainable consumption and production;
- d. harmonizing cross-border public health and health services, including health legislation, standards and procedures, and information exchange;
- e. establishing a SEE public health professionals/workforce observatory;
- f. establishing a SEE health information network;

2. achieving the United Nations Sustainable Development Goals (SDGs) by:

- a. positioning health as a major contributor to all SDGs, recognizing that over half of the SDG targets have a health focus or address major determinants of health such as poverty, education, gender, equity, employment, food, water and sanitation, cities, energy, climate change and ecosystems, and sustainable consumption and production;
- b. recognizing that integration across all SDGs means that progress on one cannot be achieved if there is no progress on the others;
- c. recognizing that the overarching goal in the 2030 Agenda means focusing on advancing equity and gender and human rights as a key cross-cutting development need;
- d. establishing a SEE Health Network regional platform for learning exchange and problem solving on investment for health and development; and

⁵ Health 2020: the European policy for health and well-being [website]. Copenhagen: WHO Regional Office for Europe; 2017 (<http://www.euro.who.int/en/health-topics/health-policy/health-2020-the-european-policy-for-health-and-well-being>, accessed 27 January 2017).

- e. acknowledging that systematic monitoring of SDG indicators requires high-quality information and strong collaboration among responsible agencies at the level of member countries of the SEE Health Network;

3. Striving universal health coverage (UHC) for our populations by:

- a. increasing both health funding and efficiency; ensuring financial risk protection (including the reduction of out-of-pocket payments); ensuring access to high-quality essential health-care and public health services and to safe, effective, efficient, high-quality and affordable essential medicines and vaccines for all; and recruiting, developing, training and retaining the health workforce⁶;
- b. recognizing that achieving UHC requires action to reduce the root causes of the different needs and risks of those falling behind in health, and that multisectoral and health-in-all-policies approaches are essential strategies to equalize life chances that affect health and to ensure the sustainability of health systems for current and future generations;
- c. acknowledging European initiatives to strengthen health services and move towards people-centred care; strengthening of primary health care, health promotion and disease prevention; creating an appropriate continuum of care; and fostering a culture of continuous quality improvement based on the best available evidence and involving local communities and wider social movements as partners to deliver better health for all;
- d. ensuring an adequate level of public financing for the health system;
- e. establishing a SEE Health Network platform to strengthen human resources for health and to promote cross-border mobility of public health and health care professionals;
- f. helping local governments to create conditions that will strengthen the capacity of human resources in the public health service, such as preventing the emigration of young specialists;
- g. working to promote health literacy and empower citizens and patients as key elements in improving health outcomes, and the performance of and satisfaction with health systems;
- h. implementing the Action plan for the prevention and control of noncommunicable diseases in the WHO European Region⁷;

⁶EUR/RC65/13 Priorities for health systems strengthening in the WHO European Region 2015–2020: walking the talk on people **centeredness**

⁷EUR/RC66/11 the Action plan for the prevention and control of noncommunicable diseases in the WHO European Region, Copenhagen: WHO Regional Office for Europe; 2016
(http://www.euro.who.int/_data/assets/pdf_file/0011/315398/66wd11e_NCDActionPlan_160522.pdf?ua=1, accessed 4 April 2017).

- i. Implementing evidence based actions linking health systems strengthening with sustainable communicable diseases prevention and control measures; through integrated, people centered health service delivery, engaging relevant stakeholders, including affected communities and civil society

4. further upgrading public health services and capacities by:

- a. establishing a SEE Health Network platform on cross-border collaboration for public health services, including all-hazard preparedness and response, and services at Points of Entry designated under the IHR;
- b. implementing and monitoring the implementation of the WHO European Action Plan for the Strengthening of Public Health Capacities and Services;⁸
- c. delivering on the public-health and health-system requirements for strengthening the core capacities to implement the International Health Regulations (IHR);⁹
- d. focusing on improving the delivery of health-promotion services and disease-prevention activities, including establishing an intergovernmental SEE Health Network platform on health promotion and health;

5. further strengthening our mutual regional and national action preparedness and response to regional emergencies and related population movement and migration by:

- a. developing regional approaches to routine and emergency surveillance, preparedness and response, as indicated in Health 2020 and the IHR;
- b. responding to the current influx of populations, including refugees and asylum seekers, according to the policies, principles and processes outlined in the recent outcome document Strategy and action plan for refugee and migrant health in the WHO European Region;¹⁰

6. working more closely and efficiently with our partners to make the best use of their unprecedented support by:

⁸ European Action Plan for Strengthening Public Health Capacities and Services. Copenhagen: WHO Regional Office for Europe; 2012 (http://www.euro.who.int/__data/assets/pdf_file/0005/171770/RC62wd12rev1-Eng.pdf, accessed 27 January 2017).

⁹ International Health Regulations (2005), 3rd edition. Geneva: World Health Organization; 2016 (<http://www.who.int/ihr/publications/9789241580496/en>, accessed 27 January 2017).

¹⁰ Strategy and action plan for refugee and migrant health in the WHO European Region Copenhagen: WHO Regional Office for Europe; 2016 (http://www.euro.who.int/__data/assets/pdf_file/0004/314725/66wd08e_MigrantHealthStrategyActionPlan_160424.pdf, accessed 4 April 2017).

- a. recognizing that new forms of governance for health are needed in today's diverse and horizontally networked, information-based societies, requiring multisectoral and multifaceted policy responses and interventions;
- b. implementing whole-of-government, whole-of-society and health-in-all-policies approaches in policy development, which lie at the heart of Health 2020, to advance governance for health through intersectoral governance with other policy arenas to promote and protect health;
- c. advocating healthier policies in and across all sectors, thereby reducing the use and costs of health services, and encouraging better communication between patients and health professionals; and
- d. working within the "One United Nations" process in the WHO European Region, with health serving as the basis for an issue-based coalition for the implementation of health across the SDGs, involving advocacy, partnerships, resource mobilization, and monitoring and evaluation, with strong leadership of WHO.

WE, THE MINISTERS, ACKNOWLEDGING THE NEED FOR EUROPE-WIDE RECOGNITION OF REGIONAL COLLABORATION IN SEE, CALL ON:

8. the governments of the SEE Health Network's member countries:

- a. to achieve policy coherence between global goals and the SEE Health Network member countries' contexts, among international agendas, among economic, social and environment policies, among difference sources of financing and among the diverse actions of multiple actors and stakeholders;
- b. to integrate health into wider development approaches, defining necessary priorities and the needs for accountability, resources, innovation and research as key to success;
- c. to align the goals/targets and approaches of health and SDG development plans of the SEE Health Network member countries, using the "one country health development" concept, and based on the whole-of-government, whole-of-society and health-in-all-policies approaches;
- d. to develop and implement effective policies and interventions through new forms of governance that overcome sectoral boundaries and enable integrated joint resource mobilization, planning, delivery, accountability and review;
- e. to advance the implementation of Health 2020 with priority setting guided by information on the national or local burden of disease, the scale of the problem, trends, public and sector-specific policies, the solutions available, the financial costs and societal interests;

- f. to strengthen the knowledge and evidence gathering on the economic and societal returns on investments in and for health, well-being, prosperity and equity for all, which will showcase the role of health in social and economic development, and will depict the role already played by other sectors and stakeholders in better health and well-being;
- g. to strengthen the capacity of health institutions and public health services, including human resources for health; and
- h. to strengthen health information and research systems, as they are vital policy and operational resources for health planning, implementation, monitoring and evaluation.

9. We look to partner organizations:

- a. to focus on shared responsibility and accountability for the equitable improvement of health and well-being within whole-of-government, whole-of-society and health-in-all-policies approaches;
- b. to establish policy and regulatory frameworks that enable business and industry to advance sustainable-development initiatives, taking account of the importance of corporate social responsibility;
- c. to facilitate the exchange of information and lessons learned and to build knowledge and best practice on health across the region and beyond through participation in congresses, meetings, conferences and symposia organized by the SEE Health Network; and
- d. to support the increased visibility of the SEE Health Network and identify associated opportunities for exchange within the Network and at the EU level.



WE, THE MINISTERS OF HEALTH OF THE NINE COUNTRIES, MEMBER STATES OF THE SEE HEALTH NETWORK, HEREBY, ENDORSE AND COMMIT TO THE IMPLEMENTATION OF:

this Chisinau Pledge;

WE, THE MINISTERS, ARE CONVINCED THAT OUR COMBINED EFFORTS AT NATIONAL, SUBREGIONAL (SEE) AND EUROPEAN LEVELS WILL BRING ABOUT CHANGES THAT WILL CONTRIBUTE TO ACHIEVING BETTER HEALTH, WELL-BEING AND PROSPERITY IN OUR COUNTRIES AND THE SEE REGION.

Signed in Chisinau, Republic of Moldova, 04 April, 2017

ANNEX 4

Drafting Groups
For the two outcome documents of the
Fourth South-Eastern Europe Health Ministerial Forum
As per Decision of the 47th Meeting of the SEEHN Executive Committee
02 April 2017, Chisinau

Drafting group for the Chisinau Pledge:

1. Dr Nicolae Jelamschi, Chair, Executive Committee, SEE Health Network
2. Ms Christine Brown, Programme Manager, Social Determinants & Health Equity
3. Prof. Plamen Dimitrov, Alternate, SEEHN National Health Coordinator, Deputy Director of the National Centre of Public Health and Analyses
4. Mr. Kosta Barjaba, SEEHN National Health Coordinator, Advisor to the Minister of Health

Drafting group for the Memorandum of Understanding:

1. Dr. Mira Jovanovski Dasic, Director of the SEEHN
2. Dr. Maria Ruseva, International Expert on Public Health and Co-opted Member of the SEEHN Executive Committee
3. Prof. Dr. Alex Leventhal, SEEHN Executive Committee co-opted member
4. Mr. Razvan Vulcanescu, SEEHN National Health Coordinator, Vice president of the National Health Insurance House
5. Dr. Draženka Malićbegović, SEEHN National Health Coordinator, Assistant Minister, Ministry of Civil Affairs of Bosnia and Herzegovina
6. Dr. Lucianne Licari, Executive Manager, Country Relations and Corporate Communications, Special Representative of the Regional Director to the SEEHN