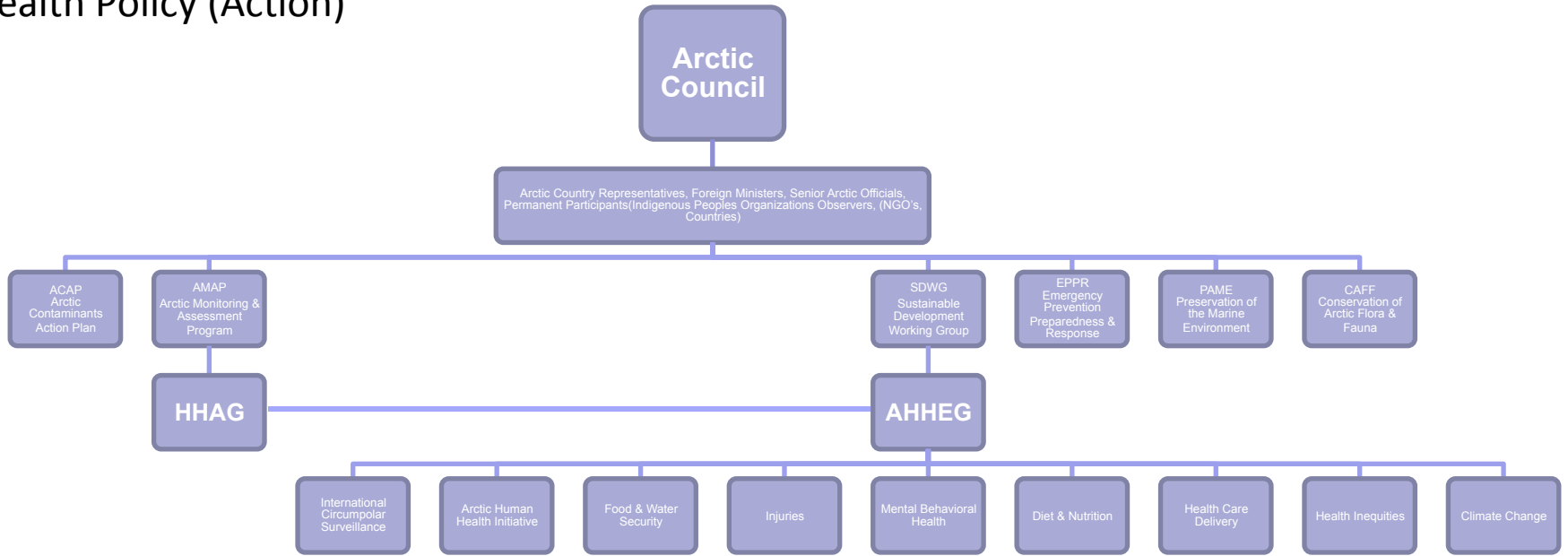


Knowledge to Action
Workshop Queen's University,
Kingston

Birgitta Evengard

The Arctic Council and other Circumpolar Health Relationships

Health Policy (Action)



Research (data collection)

International Union for Circumpolar Health

Members

- American Society for Circumpolar Health
- Canadian Society for Circumpolar Health
- Danish/Greenlandic for Circumpolar Health
- Nordic Society for Circumpolar Health
- Siberian Branch Russian Academy Medical Sciences

Working Groups

- Birth Defects & Genetics
- Infectious Diseases
- Maternal & child Health
- Arctic Health Policy
- Indigenous Peoples Health
- Tobacco & Health
- Food security

ICCH15

International Conference on Circumpolar Health 15
Fairbanks Alaska August 2012

International Network of Circumpolar Health Researchers (INCHR)

Participants:


- representatives from Permanent Participants, Canada, US, Greenland, Iceland, Denmark, Norway, Sweden, Finland. There is no officially appointed representative of Russia.
- (6 official PPs in the Arctic Council: Inuit Circumpolar Council (ICC), Sami Council, Arctic Athabaskan Council (AAC), Gwich'in Council International (GCI), Aleut International Association (AIA), Russian Association of Indigenous Peoples of the North (RAIPON))

AHHEG


- *“The AHHEG is responsible for framing the SDWG human health agenda, proposing priorities and projects assessing proposals for actions which will contribute to the advancement of a knowledge base on circumpolar human health.”*
- **Chairs 2011-2013:** Sweden (Birgittta Evengård, MD, PhD, prof infect dis, Umeå University) and Sami representative (Ann Ragnhild Broderstad, MD, PhD, Tromsø University, Norway)

Ongoing projects:

- **ICS:** International Circumpolar Surveillance, Prevention and Control of Emerging Infectious Diseases in the Arctic
- Participation of United States, Canada, Greenland/Denmark, Iceland, Norway, Finland, Sweden, Russian Federation, RAIPON, ICC, International Union for Circumpolar Health, Northern Forum.
- Brief summary of activities since the beginning of the Swedish Chairmanship :
- -A presentation on the ICS was made at the first Arctic Health Ministerial meeting held in Nuuk, Greenland, February 2011, as an example of circumpolar cooperation on health in circumpolar regions.

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- -An ICS Steering Committee meeting was held in Milan Italy May, 2011 in conjunction with the European Conference on Clinical Microbiology and Infectious Diseases. The committee reviewed ongoing project progress, and debated the addition of new initiatives, and reviewed plans for 2011-2012.
 - -A meeting was held in Khanty Mansysik April, 2011, to strengthen collaborations with the partners in northern regional of the Russian Federation. The purpose of the meeting was to formalize an information exchange between ICS-Tb working group and tuberculosis subject matter experts from northern regions of the Russian Federation.

An outcome was an agreement in principle to share data.

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- -A follow-up meeting of the ICS –Tb working group was held in September 2011 at the Danish Polar Centre, in Copenhagen.
 - This meeting focused also on a review of activities in the fields of Hepatitis B, Hepatitis C, Helicobacter pylori including gastric cancer.
 - Also a surveillance and research working group on climate sensitive infectious diseases at a meeting at the Danish Polar Centre September 19, 2011 (potential linkages with AMAP, CAFF) was established .


- **AHHI:** Arctic Human Health Initiative. At the end of the IPY, 28 active projects: Expansion of Networks (5); Infectious Disease Research (6); Environmental Health Research (7); Behavioural and Mental Health Research (3); and Outreach Education and Communication projects (5). Details of these projects can be found at www.arctichealth.org . The AHHI projects will continue through 2011 and 2012. The AHHEG will continue to monitor project progress and provide periodic updates which will be placed on the AHHI website.
- Representative from AHHEG chair a human health session at the IPY meeting in Montreal April 22 – 27, 2012. The main themes are food security, climate change, human health and contaminants

- **Health Care delivery:** CircHSR is being managed by the Institute for Circumpolar Health Research [www.ichr.ca] on behalf of the AHHEG.

A comparison of circumpolar health systems will highlight the different responses to similar challenges and focus on the effects of differing governance and organization

- **Health Inequities;** CircHOB is an international collaborative health information system housed in Yellowknife, Canada, monitors trends and patterns in health status, health determinants, and health care. CircHOB is being managed by the Institute for Circumpolar Health Research [www.ichr.ca] on behalf of the AHHEG.

The website has been launched and is fully interactive, with graphing/mapping capability. All data for 2000-04 has been uploaded. The data upload for 2005-09 is underway. Additionally, two data briefs have been uploaded and an online repository is being developed.

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- **Mental Behavioral health:** a conference was held in Greenland 2010
 - **Diet & Nutrition:** Studies performed were published as a supplement in the Intern J Circumpolar Health
 - **Injuries**

Climate change


- This new working group will share information on climate sensitive infectious diseases in the North and allow for potential cross border collaborative surveillance or research activities that will enhance our knowledge of the health impacts of climate sensitive infectious diseases of concern in the Arctic and inform prevention and control measures.


The agenda will include a review and catalog by country, any climate change and infectious disease surveillance and research activities being undertaken in the circumpolar north and will seek to identify potential collaborative cross border surveillance or research activities.

- -A presentation was made at the first Arctic Health Ministerial meeting held in Nuuk, Greenland, February 2011

Projects with work in progress:

- **Food & Water Security:** a preliminary working plan has been produced by PP and the representative from Greenland. This work will continue in collaboration from the co-chairs and representatives from AHHEG and from HHAG.
- **Cancer surveillance:** Cancer is an emerging health problem among circumpolar indigenous peoples. A review will provide the needed baseline evidence.
- **Ethical guidelines surveillance**

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- **Educational activities based on demand for cultural identity:** In many areas and communities people are not satisfied with health care and one reason is the lack of cultural sensitivity. Therefore, cultural dimensions should be emphasized in the education of health care workers in the north. Cultural pride is strong aspect of many indigenous groups and these people should be met as who they are, which includes understanding the patient and the culture she/he represents.

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- AHHEG will develop a communications strategy to undertake strategic education outreach and communication activities which will focus public and political attention on Arctic human health issues, using a variety of media: print and electronic reports and publications from scientific conferences, symposia, and workshops targeting researchers, students, communities, and policy makers. AHHEG will develop in collaboration with the SDWG Secretariat a 'chat room' within its portal where information on circumpolar health and related information can be posted on a regular basis. (AHHEG Terms of reference 2008). This strategy is developed by the secretariat in Oulu.



Publication:

- Special issue of the open access journal *Global Health Action* – “Vulnerable populations in the North” with 12 scientific papers in different aspects of Circumpolar health was distributed at COP-17 as well as published.



Educational activities since the beginning of the Swedish Chairmanship:

- Summer school Circumpolar health, Oulu, Finland June 2011
- Climate change and health, day of information with AHHEG members for regional stakeholders, Umeå Sweden June 2011




There has been two summer schools, May 2010 in Copenhagen in the connection of International Network of Circumpolar Health Research and in Oulu June 2011.

The two courses (1,5 days each) were at PhD level and a the scientific meeting of INCHR.

30 students, mainly PhD students (15-20) and also post docs and Master's students from all circumpolar countries.

The next PhD level summer school will be in the connection of IUCH meeting in Fairbanks August 2012.

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- Winter Schools (one week) for PhD students in the field of health and well-being
 - The first was in Oulu (November 2010, second in EALAT UArctic Institute in Kautokeino March 2011, and the next will be in Abisko, March 2012.

Winter Schools are funded by Norden top-level-initiative money. In the Winter school the focus is People in the changing environment - climate change program.

15 PhD students + some (5-8) Master's students who are going to continue to PhD studies.

AHHEG – HHAG Collaboration, Future Directions

- **Food - Water Security / Environment**
- SDWG AHHEG:
- Food and Water Quality – Access / Quality / Security

- AMAP HHAG:
- Trends studies for human exposure to pollutants: dietary / human exposure
- Emerging contaminants
- Indoor / outdoor pollutants

- Joint HHAG – AHHEG:
- Climate Change – effects on food / water security

- **Health Status – Health Effects / Research and Assessment**
- SDWG AHHEG:
- Surveillance systems
- Social determinants – sustainable societies, qualitative methodology
- Education – relation to health issues and cultural identity

- AMAP HHAG:
- Effects of Contaminants

- Joint HHAG – AHHEG:
- Arctic Change – Zoonotic disease



Actions

As AHHEG has listed priority areas with regards to health it is now time to move forward, accumulate relevant data to be translated to actions, examine supporting organizations and forward concrete projects up to the level of decision makers at SDWG and the different health ministers.

Action: Examine interest for financial support from AC. Assess opportunities for funding from members states possibly through shared funding.

Action: AHHEG indicated a wish to forward the issue of the Russian representative in the next meeting of SDWG in September 2011.



Good examples - Alaska Native Tribal Health Consortium
Jim Berner, Michael Brubaker

Sustainable observation systems needed in order to identify long term trends
-leverage the capacity of existing systems

Village-based assessment, adaptation and monitoring systems

Community-based research w direct benefits for the residents

Inexpensive, benefit researchers from different organisations

Monitoring incorporated into the roles of local environmental managers,
funded by EPA, water operators (funded by local governments) and
Community health aides (funded by IHS)