

**Dear Reader,**

this newsletter offers you all the latest project news from the International Development Collaboration at STAKES.

The newsletter is also available at our website at <http://idc.stakes.fi>

# News

December 2008

## Season's greetings!

*The year 2008 has been quite different to any other in the entire period of STAKES' 16 years of operations. Apart from our "ordinary work" we have spent significant amounts of time preparing for an upcoming organizational transition: The new National Institute for Health and Welfare (THL) is set to start operations on 1 January 2009, following a merger between the National Research and Development Centre for Welfare and Health (STAKES) and the National Public Health Institute (KTL).*

We have welcomed our "new sibling" KTL with open arms, and we look forward to soon emerging from this transition process together as the new National Institute for Welfare and Health (THL). International co-operation was a significant factor in the merger of the two organizations and will continue to be essential to the activities of THL. The new Institute will maintain and promote a close contact with European Union bodies, the World Health Organization and numerous scientific and public

institutions and agencies as well as its sister organizations and partners around the world. The merger brings together 1300 healthcare and welfare experts "under the one umbrella" and will thus significantly improve our capacity to participate in international development collaboration. The newly appointed Director General Professor Pekka Puska has strong international experience and is highly motivated to support the international collaboration activities of THL. The ongoing social and health sector reform in Finland extends beyond simply this merger and is itself a useful learning experience for experts working under the conditions of transition. This is what international development collaboration projects are also very often about!

Our team is in good spirits after yet another busy and productive year and is ready to welcome new colleagues on board early next year. To our regret we had to say thank you and farewell to our dear colleague and a Russia-expert Marja Tuomi, who continues her career in a new setting.

I would like to take this opportunity to thank our staff, our partners and all the



Photo: Teemu Toivonen

**Last year was fortunately not all about work. Our colleague Johanna and her husband are now the happy parents of an extremely sweet pair of twin boys. With Johanna's kind permission, I include a picture of Jaakko and Joonatan.**

stakeholders for the good and positive collaboration during 2008 and send everybody our Season's Greetings and best wishes for a Happy New Year.

Looking forward to seeing you again in 2009!

Text: Jutta Immanen-Pöyry, Director, IDC at STAKES

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## National Institute for Health and Welfare to be launched 1 January 2009

*The new National Institute for Health and Welfare (THL) is set to start operations on 1 January 2009, following the merger of the National Public Health Institute (KTL) and the National Research and Development Centre for Welfare and Health (STAKES).*

*As a key actor both in Finland and internationally, THL will be committed to promoting the health and well-being of the population, preventing disease and social harms, and developing health and social services.*

THL pursues and carries out its objectives by means of research, development, information guidance and some national services. Official tasks of the institute include monitoring of infectious diseases and acting as the statutory statistics authority for the field of health and welfare. THL maintains a strong knowledge base within the field, steering policy making through evidence based information.

In addition to the scientific community, THL seeks to serve the broader society, including professionals in the fields of health and social services as well as decision-makers in central government

and municipalities. One of its key objectives is to help municipalities develop their health and social services through expert guidance and monitoring. The Institute will help to improve these services in terms of availability, quality, productivity, efficiency and impact. It will also be used to provide citizens with information for making health and welfare promoting choices in their life and to promote healthy changes in the environments. For this purpose the Institute cooperates with NGOs and develops new e-health services.

International cooperation had a significant role in both merging organisations and will continue to be essential to the activities of THL. The new institute will maintain and promote a close contact with European Union bodies, World Health Organisation and numerous scientific and public institutions and agencies as well as sister organisations around the world.

### Greeting from the Director General

“I am proud to lead this new institute with its important mission in the area of great importance to people and to the society, with both national and international roles and with highly professional staff. I look forward to great collaboration with old and new partners in our area of work.”, says Pekka Puska

The National Institute for Health and Welfare will be located in Helsinki, with

offices also in Jyväskylä, Kuopio, Oulu, Tampere, Turku and Vaasa. The new Institute has a total staff of over 1300. THL is subject to the performance guidance of the Ministry of Social Affairs and Health.

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Director General Pekka Puska  
Photo: Ilari Järvinen

## STAKES supports the development of integrated services for drug users in Romania

*STAKES and the National Anti-Drug Agency began their co-operation in Bucharest by officially launching the EU Twinning project ‘Strengthening the integrated system of medical, psychological and social care for drug users in Romania’ on November 12, 2008.*

The existing services in Romania are concentrated on detoxification and substitution treatment, but no long-term rehabilitation currently exists. The referral chains of the services need strengthening

and there are considerable differences between geographical areas.

The project will last 12 months. During that time, 3 main activities will take place with the support of the Finnish team. The team is being led by the Resident Twinning Advisor Mr. Timo Mutalahti and will utilize the skills of a number of leading Finnish short-term experts from, for example, STAKES, The Helsinki Deaconess Institute, the A-Clinic Foundation and the Kalliola settlement

First, a Therapeutic Community will be set up to provide long-term psycho-social rehabilitation for drug-users. Second,

Community Service plans will be created in 5 pilot locations: Bucharest, Cluj, Iasi, Brasov and Constanza. The plans will be based on the survey and evaluation of the existing services and participatory workshops in the pilot locations. Finally, the role of the National Anti-Drug Agency as a research and development institute will be strengthened.

Text: RTA Timo Mutalahti and Project Manager Minna Sinkkonen, IDC at STAKES

## The Karelian Medical Conference in the Republic of Karelia: Health promotion is an important task

*The Karelia medical conference gathered together nearly 100 people in October. This year the medical convention was held in Petrozavodsk. The main organiser was the North Karelia Centre for Public Health, which has been organising the conference since 1993 alternately either in Finland or in Russia.*

Nowadays the Karelian Medical Conference is an important meeting point for colleagues from both sides of the border. The Medical Conference gathers together wide range of professionals and representatives: medical specialists, researchers, NGO representatives, officers and other leaders working on neighbouring area issues.

This year, among the themes emphasised at the event were health-promoting social policy and clinical work in health care.

### Health-programme helps

In the opening ceremony the Minister of Health of Karelia, Valeri Boinitsh mentioned that luckily the population breakdown has been stopped.

- Our efforts have brought results, the mortality rate of children is now stabilised.

Boinitsh was also grateful to the national health programme known simply as 'Health', which has been running in Russia. Through the Health- programme, the salaries of the doctors have risen. The programme has also aided multisectoral



Chief of Socio-Economic Development Department at Karelian Governor's Administration Klara Shevchenko, Permanent secretary Kari Välimäki and Project Manager Marja Tuomi having discussion.

co-operation and investment into new equipment.

### STAKES project in Segeza

Project Manager Marja Tuomi of IDC at STAKES reported on the health promotion project in Karelia. The project's pilot has been implemented in the town of Segeza in north-east Karelia.

Good results have been achieved for example in developing welfare strategies. But the people of Segeza are still lacking information about healthy lifestyles.

Text: Anne Vienonen, Communications Officer, IDC at STAKES

*The article was originally published in Finnish in the STAKES' Dialogi magazine in November.*

## Twinning partnership with the Czech Republic continues

*STAKES has been selected to implement the twinning light project 'Strengthening of the Czech Social Security Administration (CSSA) capacity in the field of social security coordination, especially pensions and legislation applicable'. This is a continuation of the work done during a project with somewhat similar contents in 2002-03 before the Czech Republic's accession to the EU. Experts will be drawn from STAKES, the Ministry of Social Affairs and Health, the Social*

Insurance Institution (Kela) and the Finnish Centre for Pensions (ETK). The implementation period will be January–June 2009.

It is not a first time for STAKES to collaborate with the Czech Republic. In 2002-2003 we had an EU Twinning Phare project *Testing the Preparedness for the Application of EC Social Security Legislation*. STAKES was responsible for the project implementation as EU Member State Twinning Partner.

The objective of the project was to enable the Czech Republic to take

obligations of the EU membership by ensuring the preparedness of the Czech administration for implementing the EU social security legislation. The project focused on three most important institutions involved in co-ordination of social security; Ministry of Labour and Social Affairs, Czech Social Security Administration (CSSA) and Ministry of Health.

Text: Timo Sorsa, Senior Expert, IDC at STAKES

## International collaboration on health statistics

*Good governance requires reliable information. National health information systems have a central function in the health system. Decision-makers need a systematic way of increasing their capacity to access and synthesise all public health information. Reliable and timely information is necessary at facility, local, regional and national levels in order to respond to rapidly-evolving health needs, to design and monitor policies and health care reforms, to evaluate the impact of services, and to define budget priorities (Gissler et al. 2005).*

For international comparisons health statistics and health information have been collected for decades. In Europe, the WHO headquarters with its Regional Office for Europe, and OECD were the main actors until the 1990s. Since the Maastricht Treaty (1992), the European Commission has also had a mandate for collecting health data. In due course, the provision of statistics on public health and safety at work by Eurostat, the statistical office of the European Communities, will become mandatory for all EU member states. The provision of data on infectious diseases to the ECDC (the European Centre for Disease Prevention and Control) and data on drugs to the EMCDDA (European Monitoring Centre for Drugs and Drug Addiction) is already obligatory. All other collaboration in health statistics is on a voluntary basis.

International health statistics cover data on mortality, morbidity, hospital discharges, health determinants (including health behaviour and lifestyles), health services, health resources, and health expenditure. Most data is based on routine national data collection systems, which are most often based on registers with information on individual records or statistical systems collecting aggregated data. These are completed by separate health

questionnaire and interview surveys, which give more detailed information for example on health behaviour. Some countries also perform health examination surveys that gather information on diagnoses confirmed by qualified health care personnel and anthropometric measurements.

International data collection on health statistics is done jointly with international organisations. The WHO collects data on deaths and their causes, and shares this information with other international organisations. Health expenditure data is collected jointly with the WHO, the OECD and Eurostat. There are also plans to harmonise data collection on hospital discharges and health care resources to decrease the work load of national data collecting organisations and increase the international comparability. International organisations also assist countries with less developed health information systems. For example the WHO Regional Office for Europe has had several collaboration projects with CEE and CIS countries.

New international health data collections are planned. Eurostat has initiated European Health Interview Survey to gather more comparable health data in all EU countries and even in some of its neighbours. Eurostat also plans to collect more detailed data on morbidity. The new EU Health Programme includes several initiatives to improve public health monitoring in the Europe. The most important initiative is the Joint Action in European Community Health Indicators (ECHIM), which is led by the National Public Health Institute (KTL) in Finland.

Text and photo: Mika Gissler

### Reference:

Gissler M, Dumitrescu A, Addor V: Improving the performance of National Health Information Systems: the 2002-2003 reform in Finland from an international perspective. World Health Organization 2005. EUR/05/5046412. Available at: <http://www.euro.who.int/Document/E88075.pdf>.

*Links to international health information:*

*WHO Regional Office for Europe: European health-for-all database (HFA-DB):*

*<http://www.euro.who.int/hfadb> (free of charge)*

*OECD Health Data:*

*<http://www.ecosante.fr>*

*(licence required, a limited number of tables can be found free of charge at [www.oecd.org/statistics](http://www.oecd.org/statistics) ? List of topics ? Health)*

*EU/EUROSTAT:*

*<http://ec.europa.eu/eurostat> ? Data ? Health ? Public Health (free of charge)*

*EU/DG SANCO/European*

*Community Health Indicators:*

*[http://ec.europa.eu/health/ph\\_information/dissemination/echi/echi\\_en.htm](http://ec.europa.eu/health/ph_information/dissemination/echi/echi_en.htm) (free of charge)*

Dr Gissler is working at STAKES as a Development Manager. He is in charge of reproductive registers, international health statistics and register-based research. He is also Professor at the Nordic School of Public Health, Gothenburg, Sweden.



## Finnish-Russian co-operation to promote independent living and accessibility for people with disabilities

*IDC at STAKES is implementing in Saint Petersburg a project that aims to promote capacity building within the Russian City administration and among rehabilitation professionals in the fields of independent living and accessibility for people with disabilities. The Russian project partners are the Saint Petersburg Committee of Labour and Social Protection and a professional rehabilitation centre on Vasily Island, that is subordinate to the Committee.*

The project Steering Group is chaired by the Deputy Head of the Committee Ms Galina Kolosova, and the project is funded by the Finnish Ministry for Foreign Affairs. The project organizes

information exchange in the form of joint Finnish-Russian seminars and study tours; it also supports the accumulation and dissemination of knowledge in the fields of accessibility and independent living.

There have been rather a few contacts between rehabilitation professionals and experts in disability policy from Finland and the Russian Federation; until now, these contacts have been established and maintained mainly via NGO activists. The STAKES project utilizes these grass-root contacts to prepare and expand the field of co-operation. STAKES has made notable national and international contributions in the fields of independent living and accessibility, which can now be utilized in the Finnish-Russian cooperation (e.g. <http://groups.stakes.fi/ITSE/FI/index.htm>). In the regional legislation of Saint Petersburg

there has been considerable development in the 2000's to date, and there has been increased focus on rehabilitation in all forms, which provides a very good basis for implementing knowledge in practical work. Assistive technologies to support both independent living and participation of paid work are a special focus of interest in Saint Petersburg. Everyday life is, however, yet very far from realizing the ambitious goals set by the City Government. The project started in 2008 and it will end in 2010. The project is funded by the Finnish Ministry for Foreign Affairs.

Text: Simo Mannila, Senior Expert, IDC at STAKES

## Actual development topics from Central and Eastern Europe

*On December STAKES International Development Collaboration organised a Satellite Workshop within the framework of the 8th Aleksanteri Conference of the Aleksanteri Institute of the University of Helsinki. In the workshop there were five internationally acclaimed speakers.*

The topics of the five papers given were of very variable kind, reflecting the multifarious working profile and international contacts of IDC at STAKES. Our unit has since 1995 implemented over 110 projects in approximately 45 countries. At present, the strongest emphasis is laid on the CIS and CEE countries.

Dr Sheila Marnie of the UNICEF Innocenti Research Centre (Florence) described in her paper the living conditions of children and families with

children in the CIS and South-East European countries. Her paper was based on comparative analysis, pointing out also some of the problems of aggregate quantitative data. Child protection topics which presently require additional targeted research and development include e.g. Roma children and the children of migrants. Professor Olli Kangas of the Social Insurance Institution (Helsinki) described the countries and their development stages by means of a number of indices constructed from the UNDP and the European Social Survey data. Natalia Kharchenko, Research Director of the Kiev International Institute of Sociology (Kiev) outlined research on the typical living conditions in Ukraine emphasising gender-specific coping strategies. Professor Elena Marushiakova of the Bulgarian Academy of Sciences (Sofia) described the development of a Roma civil voice in the EU new Member States since the beginning of the 1990s, showing a vivid



Natalia Kharchenko

picture of the situation from within a wide variety of countries. Dr Zaza Tsereteli, International Advisor of the Northern Dimension Partnership on prison health, described on the basis of international work on HIV/AIDS some key problems of development work i.e. how to transform programmes and mission statements into sustainable co-operation.

The seminar was attended by a high-level audience and we see that this form of co-operation with the Aleksanteri Institute of the University of Helsinki, some key organisations in Russian and East European studies will give added value to our development work, as well as to the scientific work of the Institute.

Text: Simo Mannila, Senior Expert, IDC at STAKES

## Children at focus in Karelia

International Development  
Collaboration at STAKES

### NEWS

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*The welfare of children and families has been the main focus when developing the health and social services of the Republic of Karelia over the past 10-15 years.*

Several national and international actors have implemented child protection projects all over the Republic. The Ministry for Foreign Affairs of Finland has channeled its financial support, via the neighboring area collaboration, into different child protection activities, which have been implemented by Finnish governmental and nongovernmental organizations. IDCs' experience has been widely used when consolidating and developing child and youth friendly services in Karelia.

The interest in improving the life of children in Karelia can also be seen in the decision of the Government of Karelia made on July 5th 2007 and in which the Government decided to set up a special post on the protection of children's rights. The Republic became the 21st Russian region to have such an official post. Ms Galina Grigorieva from the Ministry of Education was nominated to the post of the ombudsman. She also acts as the Karelian project leader in the STAKES project "Support to Social Work Addressing Families and Children in the Republic of Karelia". Several seminars and activities have been organized that are targeted at uniting different Karelian authorities in working for a better future for Karelian children.

### Study Visit to Finland

As part of the projects' second year of activities, a study visit to Finland was made by Karelia's leading child protection experts. The visitors were from Petrozavodsk City and the Prjaza region. The delegation was led by Galina Grigorieva. The objective of the study visit was especially to familiarize with the early intervention measures used in health and social care to improve the welfare of children and families in Finland.

The visit started at STAKES where the theory and practice of Early Intervention as an instrument of child protection was presented. The participants were also encouraged to compare the methods already used in the child protection units in Karelia with those methods used in

Finland and on that basis to develop and improve their practices where needed. During the visit to Matinkylä School the everyday methods of early intervention in a school environment were presented.

During the visit to the Helsinki Deaconess Institute, the Child and Family Work Section gave a presentation on rehabilitative and non-institutional family work. The Karelian experts also visited the family home "Maininki", where Finnish experts told about the work they do with youngsters.

In the City of Espoo the participants had a possibility to get information about the program "The Family Centre - a partnership with families and children in Espoo". The activities implemented in the program focus on involvement of families with children, prevention of problems, early support and communal co-operation. Thus the essential goal is to increase the families' sense of belonging to the community in their residential area, and to increase their social capital, which can strengthen the health and welfare of the entire community in addition to individual families. Today immigrants are a growing part of the Finnish population. On that basis Finnish society needs new kinds of services. In the Finnish Family Federation's Kotipuu programme, activities are targeted towards multicultural families and children. The importance of client-based, flexible working methods was highlighted.

During the visit of the Karelian experts, the Finnish work targeted towards families and children was presented from different levels. The multiprofessionalism of the Finnish experts as well as the diversity of the services providers was presented. Several of the discussions emphasized that all Finnish service providers work on an equal basis and on common principles, with professionalism geared to improving the life of children and families. The lessons learnt will be discussed during the Project seminars in Karelia. The Finnish-Karelian project continues until the end of 2009 and the experiences and best practices from Finnish child and family care will be taken into consideration when implementing similar activities in Karelia.

Text: Anne-Marie Groue, Project Manager,  
IDC at STAKES



Visit also our webpages: <http://idc.stakes.fi>

### Correction

The original electronic version of the June newsletter included the article "The implementation of capitation payment in primary health care in Serbia". The article was not authorized by the Contracting Authority EAR, and was subsequently removed from the Stakes website. TS

Information about Karelian  
ombudsmans activities will be  
disseminated via a website :  
<http://ombudsman.ru>