Meeting Summary IPY Arctic Human Health Initiative International Advisory Group WHO EURO Copenhagen, Denmark April 7, 2005 Scherfigsvej, 8 2100 Copenhagen Ø Denmark Committee Room 1 (CR1) 9:00-15:30

Meeting co-coordinators Alan J. Parkinson (907) 729 3407 ajp1@cdc.gov

Neil Murphy (907) 729 3154 nmurphy@scf.cc

Purposes of the meeting are to explore potential linkages and areas of cooperation between Human Health Activities proposed to be undertaken during IPY by researchers in other circumpolar countries. Develop an Arctic Council IPY Arctic Human Health Proposal.

Draft Agenda April 7:

- 9:00 Welcome /Introductions (Alan Parkinson/Neil Murphy)
- 9:15 Background to IPY and the Arctic Council's Arctic Human Health Initiative
- 9:45 Brief Discussion of submitted "letters of intent" by country (All) Arctic Council (US)
 - Finland Canada Sweden Denmark/Greenland Norway Iceland Russian Federation

10:30 Coffee

Discussion and planning "The IPY Gateway" ICCH 2006 (Neil Murphy/Sergi Krivoschekov)

Specific activities How to involve working groups Potential Deliverables Discussion and planning "The IPY Legacy" ICCH 2009 (Neil Murphy/Earl Nowgesic) Potential Deliverables

- 12:00 Lunch at Canteen
- 1:00 Discussion of specific IPY projects/areas of circumpolar cooperation/collaboration. (All)

Projects/Areas suggested include: International Circumpolar Surveillance International Network for Circumpolar Health Research Telemedicine/Tele-health & Translational research Zoonotic Infectious diseases/Climate change Diabetes/Obesity, Coronary Heart Disease Mental Health/Behavioral Health Intentional Injury Domestic Violence Non Intentional Occupational injury Contaminants-AMAP Phase 3 Climate change-monitoring Data Standardization/Accessibility/Health Communication

2:00 Coffee

FUNDING issues Outline of AHHI Proposal to be submitted to the IPY Joint Committee June 2005 Next Meeting ? Quebec fall 2005

3:30 Adjourn

Attendees

Canada

Earl Nowgesic, BScN, RN, MHSc Assistant Director Canadian Institutes of Health Research Institute of Aboriginal Peoples' Health Victoria, British Columbia Canada nowgesic@uvic.ca

Denmark

<u>Peter Bjerregaard</u>, Professor Professor of Arctic Medicine and Director, Centre for Health Research in Greenland, National Institute of Public Health Copenhagen, Denmark <u>p.bjerregaard@dadlnet.dk</u>

Preben Homøe President Danish Greenlandic Circumpolar Health Society Copenhagen Denmark <u>phom@rh.dk</u>

Mette Uldall Naver Indigenous Peoples Secretariat ips@ghsdk.dk

Greenland

Gert Mulvad, M.D. Center of Primary Health Care Nuuk, Greenland GM@gh.gl

Finland

Juhani Hassi, MD, PhD Research Professor at the Centre for Arctic Medicine, University of Oulu, Finland Oulu, Finland juhani.hassi@oulu.fi

Iceland

No representative

Norway

Dr. Jon Øyvind Odland Institute of Community Medicine, University of Tromsø Tromsø, Norway jon.oyvind.odland@ism.uit.no

Elisabeth Gerhardsen Sami National Center for Child and Adolescent Health elisabeth.gerhardsen@helse-finnmark.no

Tove Nystad Center for Sami Health Research Tove.nystad@ism.uit.no

Sweden

Ingvar Holmér, Professor Thermal Factors Laboratory Division of Ergonomics and Aerosol Technology, EAT Department of Design Sciences Lund University Lund, Sweden ingvar.holmer@design.lth.se

Russian Federation

Sergei G.Krivoschekov, Professor, M.D. Russian Academy of Medical Sciences Novosibirsk, Siberia S.G.Krivoschekov@iph.ma.nsc.ru

Andrei Tulisov Medical Epidemiologist State Sanitary and Epidemiology Surveillance Center Arkhangelsk Region tandr@atnet.ru

United States of America

Neil Murphy, M.D. President, International Union for Circumpolar Health Alaska Native Medical Center Anchorage, Alaska <u>nmurphy@scf.cc</u> Jim Berner MD Director of Community Health Services Alaska Native Tribal health Consortium Anchorage Alaska jberner@anmc.org Charles Clements Vice President for Communication and Information Southcentral Foundation Anchorage Alaska cclement@scf.cc

Monique Petrofsky US Centers for Disease Control and Prevention Office of Global Health Atlanta GA <u>MPetrofsky@cdc.gov</u>

Alan J. Parkinson Ph.D US Centers for Disease Control and Prevention Arctic Investigations Program Anchorage AK ajp1@cdc.gov

Michael Bruce MD US Centers for Disease Control and Prevention Arctic Investigations Program Anchorage AK zwa8@cdc.gov

Background

The impetus for this meeting has largely been the recognition by the Arctic Council(AC) at the 2004 Ministerial meeting that was held in Reykjavik Iceland, that the IPY 2007-2008 represented a unique opportunity to stimulate cooperation and coordination on Arctic research and raise awareness and visibility of the Arctic region and to underline the role of the Arctic Council as a high level intergovernmental forum in providing political support for the IPY in the Arctic and that the Arctic Council would develop proposals to the IPY joint committee. Under the directive of the Arctic Council, the US agreed to take the lead on developing a proposal, to further stimulate circumpolar cooperation and coordination, to promote the health and well being of Arctic residents, and to build on human health work already underway within the Arctic Council's Arctic Monitoring and Assessment Program(AMAP) and Sustainable Development and Utilization (SDU) working groups.

A second impetus has been the knowledge that other Arctic countries are also recognizing the possibilities for IPY for promoting their own Arctic Health research agendas and that in the spirit of cooperation it would be good to meet and discuss what other human health programs or projects other Arctic countries are considering for the IPY.

The purpose of this meeting there for is to explore the possibilities of developing an integrated Arctic Human Health Initiative that would build on ongoing Arctic Council working groups in human health activities, and secondly to explore other opportunities for arctic human health research activities that could be undertaken collaboratively during IPY.

Expressions of Intent

The US for the Arctic Council-Alan Parkinson

The US together with support from other AC countries, submitted an EOI aimed at promoting health and well being of Arctic residents, building on activities already underway in the AMAP and SDU working groups. The concept will be to advance the human health research agenda's of the Arctic Council in the areas of the environmental protection and sustainable development in the areas of infectious disease prevention and control, the human health effects of environmental pollution UV radiation, climate variability and tele-health innovations. Specifically the intent would be to extend the International Circumpolar Surveillance activities to include the Russian Federation and to include other infectious diseases of concern (Tb/HIV, Hepatitis), injuries, and birth defects, to continue to monitor containments levels in blood of Arctic residents and monitor their long term human health effects-to integrate biomarkers research and molecular epidemiology within these monitoring programs

Extend circumpolar cooperation in tele-health in Arctic Regions particularly RF Explore new research areas of human genomics, biomarkers, hypothermia, hibernation, mental health and climate sensitive infectious diseases. An important component of this proposal will include a program of community outreach and public education focusing on the promotion of good health for Arctic residents and better dissemination of information and integration of findings into Arctic Health Research. As part of this proposal is the promotion of IPY using the IUCH, which will make the triennial Congress in 2006 available to facilitate IPY activities, and the 2009 congress to promote the IPY legacy.

The EOI was discussed at the AC SDWG meeting held in Moscow April 2,3, 2005. **Gert Mulvad** from Greenland attended as the IUCH observer. Comments included the suggestion that SDWG human health projects should be consolidated into a single cluster, that the SDWG wanted a written summary of the current meeting that would outline what the structure of the health cluster would be, and that a verbal report be presented at the next SDWG meeting. We discuss the importance of bringing the Russian Federation human health proposal and the need to incorporate elements into the Arctic Human Health Initiative.

Juhani Hassi summarized a Russian Federation human health proposal currently being considered as a SDWG human health proposal. The proposal has eight major elements each to be funded by Russian federation resources.

- harmonisation of methods for international Arctic health research
- noncommunicable surveillance
- Adapatation of new comers to Arctic living
- immune protection against environment related immunodeficiency
- genetics of indigenous and nonindigenous inhabitants related to work in the Arctic regions
- vitamin status and its immune and genetic components in high lattitudes
- balanced diet especially for children and youth in the North
- prevention approach to socially important diseases for high lattitutdes
- Treatments and prophylactic actions will be developed on the basis of Arctic Center for Preventive Medicne (organisation and fuctioning supported by Yamal-Nenetsky region in Russia)

The authors were encouraged to seek consulutation with other AC country collaborators and to that he proposal will be considered again at the next SDWG meeting.

Finland-Juhani Hassi

- 1) No National Initiative; National multidisciplinary projects for IPY linked with international plans. Participation in international projects priorities based on national strategy, Arctic means north of 60N; Includes scientific and educational activities.
- 2) Health Projects: Continue the Research program of circumpolar health and well being and adaptation 2006-2010 and educational projects coordinated by Center for Arctic Medicine University of Oulu; Projects are interdisciplinary and international in scope; basic funding from University of Oulu, supporting from external sources.
- 3) Climate change and health in the north: mortality related to extreme weather events. Human adaptation to cold and temperature extremes: impact on

physiological and psychological performance and well being; mental health of children and society in the North; Health care and nursing of elderly in northern regions; Well being of northern linguistic minorities; e-health; multilingual heath portals, tele-education

- 4) Graduate School for programs in Circumpolar Well being health and adaptation
- 5) International Masters program for circumpolar health & wellbeing
- 6) International J. Circumpolar health. Special issues and supplements in IPY-topics; Purpose increase knowledge and understanding in circumpolar health; contents based on collaborative actions; based on expert meetings arranged by IPY actors; scientific special issues practice oriented supplements, editorial costs from Nordic Council of Ministers.

Canada- Earl Nowgesic

Canadian research and education initiatives are being identified through an ongoing preproposal submission process. Nearly 250 proposals have been submitted almost 50 can be related to health. These can be arranged into 7 categories

- 1) Traditional Knowledge and practices
- 2) Healthy Communities
- 3) Policy and Governance
- 4) Exploitation of resources
- 5) Sustainable communities
- 6) Social context of research
- 7) Archeology

Canadian Steering committee has reviewed these and submissions can be sorted into a number of themes. Healthy and Sustainable Communities was one primary thematic networks that has emerged. The Secretariat will host a meeting in Whitehorse April 12-13 to discuss existing health research related pre-proposal concepts to increase potential for regional, national, indigenous and international collaboration.

One EOI submitted was the International Network for Circumpolar Health Research. Goal of this initiative is to conduct collaborative research across boarders (Canada, Greenland, Alaska, the Nordic countries and Russia).

Topics/ideas proposed by the Canadian federal ministry of health (Health Canada) included (1) radio-nuclei monitoring, and (2) a health impact assessment methodology for community decision-making. Health Canada also proposed that the *Arctic Human Health Initiative* should include a component to ensure that new knowledge is applied to improve the health of populations vis-à-vis knowledge dissemination.

Sweden- Ingvar Holmer

Not much activity as yet. Expects a long list of projects to be submitted within the year but expects that 99% will <u>not</u> be health related. Some interest in risk assessment of workers in extreme cold together with Finland, and Norway. Possible interest in occupational health and epidemiology.

COMAAR: This Swedish EOI was not specifically discussed at this meeting but was presented at the Arctic Council's SDWG meeting in Moscow as a Swedish lead SDWG

initiative. COMAAR proposed to bring together networks, projects and observations that monitor and observe the living conditions and the environment of the Arctic to advance capacity for research and assessment of changes such as climate change. Scope to include human health and community based monitoring.

Greenland-Peter Bjerregaard

Four health related proposals submitted.

- Survey of Living Conditions in the Arctic (SLiCA). Began in 1998. Objectives i) to develop a new research design for measuring living conditions and individual well being among Inuit Sami peoples of Arctic; ii) carry out survey. Data collected Canada, Alaska, and to be collected in Greenland Norway Sweden Finland, and Russian Federation (Chukotka and Kola) by 2005. Data to be published 2005-2006. Objectives for 2007-2008 i) Establish accessible SLiCA data base; ii) Document methodology; iii) Establish SLiCA as model to allow other researchers in arctic to replicate surveys in other regions.
- 2) Inuit Health in Transition. A study of the impact of changing environments society and climate on health and disease among the Inuit and Yupik in the circumpolar north. Baseline survey to be undertaken to examine diet, physical activity, lifestyle factors such as smoking, contaminants socoal and cultural factors. This will give a cross-sectional look at associations between environment, living conditions, lifestyle, risk factors and existing disease.
- 3) Crisis and Welfare in the Arctic. Investigation in Greenland and Chukotka to determine how people perceive crisis and risk and how does this influence action; How strategies for welfare are negotiated and established; How historical factors influence welfare strategies; the significance of welfare and crisis on cultural identity; how this study can contribute to the welfare and crisis management in the Arctic as a whole.
- 4) Global Change and Social Challenges: an inter generational and gender perspective on ongoing social process.

Denmark -Preben Homøe. From a National Perspective there are three IPY themes. Arctic Climate, Greenland Ice-Cap, and Human Nature and Arctic Science

Greenland-Gert Mulvad. Focus on encouraging young scientists and investigators and getting the word out via media coverage.

Norway-Jon Øyvind Odland. At this time there is no national policy on IPY. However it is proposed to continue established projects in Northern Norway, and Barents Region of the Russian Federation. These include established Birth Registries and Epidemiology projects through the University of Tromso in the Barents region and Education/Cooperation program specifically a Masters in Circumpolar Health involving Norway, Finland and the Russian Federation.

Norway- Tove Nystad. The Sami Center for Health Research conducts cross-sectional surveys among adolescents covering language, ethnicity, self health, disease, alcohol,

diet, adolescent well-being, language, smoking, physical activity. Over 600 participants. Data analysis should begin in one year.

Norway- Elizabeth Gerharden. The Sami Center for Psychological Health conducts psychological studies on children and adults. School delinquency rates are high (also in Finland). Rates on intentional injury also high in this population in adolescent girls.

Iceland- No representation

Russian Federation- Sergi Krivoschekov

Siberian Human Health project. Plans to conduct basic medical research in the field of human adaptation in circumpolar regions. Applied research in human health and productivity in cold climate conditions, and to conduct an educational expedition to medical universities and research centers located along the Ob river system.

Funding

Recurrent discussion throughout the meeting was the issue of funding of IPY human health initiatives. No country represented could positively identify specific IPY funding for human health projects. It was thought was that while the IPY proposal submission process had begun, federal governments had not had time to consider special funding options for the IPY 2007-2008, and it was hoped that eventually federal funding would be available. Currently funding should be sought through existing sources.

Discussion and planning "The IPY Gateway" ICCH 2006 Sergi Krivoschekov

Sergi provided overview of ICCH Venue via web site www.IUCH.org

Specific IPY projects/areas of circumpolar cooperation/collaboration.

Each project to have education (general public, new investigators), health communication, and outreach components, as well as indigenous peoples organizations and circumpolar partner participation.

13th ICCH "The IPY Gateway" 2006. Novosibirsk

Setting the stage for IPY. Opportunity to bring together AC and IUCH Arctic Human Health activities and to utilize IUCH working groups.

The ICCH 13 Conference Proceedings will help showcase many of the initial IPY related projects that will be further developed during the 2007 -2008 IPY. In addition, the ICCH 13 Proceedings will help disseminate circumpolar health collaborative information to both the research community and the public

The IUCH has been collaborating with the Northern Forum to develop a program to facilitate teenage students interested in attending the ICCH13. This project will serve as a means to increase young students' involvement in circumpolar health education.

14th ICCH "The IPY Legacy" 2009 Yellowknife

Setting the stage for future Arctic human health activities

International Journal of Circumpolar Health

Publish ICCH proceedings and special supplements on IPY Arctic Human Health Activities

Jens Peder Hart Hansen Fellowship

International Circumpolar Surveillance

Expand ICS to include non infectious disease conditions such a injuries, birth defects, chronic diseases. Establish an ICS Fellowship program for young scientists, and epidemiology training program. Use ICCH to encourage participation from Arctic Regions of the Russian Federation.

AMAP Human Health Working Group-Conference

This conference will include an assessment of human health and contaminants research completed in eight circumpolar countries from 2002-2008

Survey of Living Conditions in the Arctic

Objectives for 2007-2008 i) Establish accessible SLiCA data base; ii) Document methodology; iii) Establish SLiCA as model to allow other researchers in arctic to replicate surveys in other regions.

Inuit Health in Transition.

A study of the impact of changing environments society and climate on health and disease among the Inuit and Yupik in the circumpolar north.

Zoonotic Infectious Diseases/ Climate Change and Human Health

Determine prevalence of zoonotic diseases in marine mammals important to subsistence population. The prevalence data could be used to design a monitoring program, operated by communities to follow trends in diseases prevalence, to assess the impact of climate induced ocean changes, and help communities make public health decisions, perhaps change consumption practices. Potential Funding via NOAA Oceans and Human Health

Outline of AHHI proposal to be submitted to the IPY joint Committee June 2005

Key elements will include international participation, individual and regional projects from several nations, has a clear time focus associated with the IPY years of 2007-2008 and is managed and or coordinated by a self-organized project steering committee. The June 2005 submission will be seeking evidence of a viable management plan and

organizational structure, a well developed data management plan and outreach and educational components especially with respect to engaging local Arctic and indigenous people.

Next Steps

Summary of the meeting to be developed and circulated to all members present and others invited but unable to attend.

Generate a report of the meeting to be submitted to the Arctic Council SDWG meeting in the fall of 2005.

Develop full proposal by June 30 2005. Drafts to be circulated to members

Develop structure for the Arctic Council SDWG human health project cluster. Drafts to be circulated to members

Next meeting suggested: occurring October 27-29, 2005, (date to be decided) in association with the Canadian Society for Circumpolar Health meeting in Quebec City Quebec Canada.