Overview of the work of
the Social Affairs Committee of the Baltic Assembly in 2011

Under the Estonian presidency in the Baltic Assembly, the BA Social Affairs Committee focused on the following priority areas:

- **quality of life: family and social policies.** This area included the issues of development of human resources, migration of labour force, and solutions for improving demographical situation.

- **follow-up of the work of the Baltic Council of Ministers’ Task Force for Health on the following spheres:**
  - common system for state-funded procurement of medicines and medicinal equipment;
  - joint specialised medical centres for more efficient use of professional skills;
  - efficiently functioning human organ transplant system of the Baltic States;
  - coordination of emergency help in the border towns of the Baltic States.

The three Baltic States have had similar fates in terms of the reforms implemented in their economic systems, political institutions, healthcare and social insurance systems, education systems and language policies over the past two decades. The entire civilized world is looking for solutions to the debt crisis proceeding from globalisation, changing economic conditions and demographic processes. Many believe that the crisis signals the failure of the welfare state model that came into operation in the free world after World War II and has been increasingly financed by borrowing from future generations. The serious economic crisis of 2008 dealt a heavy blow to the Baltic States, which have open economies and social protection networks that are still relatively weak. The economic crisis helped to understand that economic growth cannot be the primary objective of the state. It is more of a necessary prerequisite for ensuring the way of life and life satisfaction, the sustainability of society, or in other words – the quality of life.

**The BA Social Affairs Committee regards that discussions about demographical problems** from the perspective of social security, economic welfare and regional sustainability demography must be complex – involving not only issues about material gains and benefits, but also values, psychological, moral, cultural aspects, and migration. The problematic situation in demography in the Baltic States can be explained by the demographic behaviour and the two world wars, the Soviet occupation, repressions, deportations. As a result of personal liberty, the number of divorced marriages has increased. Nowadays the concept of self-realisation, i.e. family is blessed if it has children, does not necessarily include having children. It is connected with modern consumerism – consumption trends of a family are oriented towards saving money, but the modern metrosexuals are oriented towards spending money. Changes in partner relations have taken place with women more tended to create careers, which directly affects creation of families and child-bearing.

Low fertility leads to aging of population, which goes hand in hand with decline in population. With the decline in population, also infrastructure declines; unsustainable pension system, bigger need for care system for the elderly. Less people mean also declining cultural and social life. With the tension between generations and the lack of funds there will be continuous emigration. Low fertility is a threat to national security: it is the decline of the state and weakening the country’s position internationally.
It is important that government and the society acts together and is able to agree on fundamental concepts regarding the future. Solutions in tackling the demography problems are changing the value system in favour of a family, children and responsible way of life, and in ensuring that families are not economically discriminated. Also - introduction of family values at school curricula, promoting family values in media campaigns, monitoring the content of entertainment programmes, commercials. Society is being coded and brain-washed by the exaggerated sexuality, while there are no or little sources that remind how important it is to keep values. Another possible solution is immigration alongside with a precondition that immigrants come from the neighbouring countries and are subjected to strong integration tools.

The role of family policy is to help adults to have the number of children they desire, offer all children the chance to develop their talents, and when designing the policy measures it is necessary to take into consideration the diversity of families and their needs. Increasing of fertility rate also needs creating conditions for reconsolidating work and family life, ensuring employment and job security of specific target groups (women, youngsters, the underpaid, lone parents), ensuring gender equality in family with legal provisions in labour market and reducing gender pay gap, gender segregation in labour market, providing child support services (childcare facilities) and ensuring housing support schemes.

As a result of these discussions and in order to find out what is the situation in the field of family policy in each of the Baltic country, the committee sent letter to the ministries of social affairs of the Baltic States asking answers to the following questions:

1) what are Estonia’s, Latvia’s and Lithuania’s short- and long-term goals of the family policy;
2) what political and financial instruments are being used or planned to be used by the governments of Estonia, Latvia and Lithuania in order to achieve the short-term and long-term goals of the family policy;
3) which of these instruments and means used can be regarded as the most effective in implementing family policy;
4) what are the indicators of effectiveness and what are the economic benefits of the instruments used in implementing family policy in Estonia, Latvia and Lithuania;
5) is any joint action and mutual cooperation by the Baltic States possible in the field of family policy? Is it necessary to define common position, seek political instruments and take action by requesting support from the European Parliament and/or the European Commission?

All Baltic countries confirmed the willingness and necessity for cooperation in the area of family policy, especially emphasising the interest in information exchange and sharing of experience.

Each Baltic state has defined its short-term and long-term goals in regard to the family policy:

- **in Estonia** the Development Plan for Children and Families for 2012 – 2020 defines both short-term, both long-term family policy goals.
- **in Latvia** the main family policy goals are formulated by the State Family Policy Guidelines 2011-2017.

**As regards political and financial instruments** there is a variety of them in each Baltic State (*refer to the overview, point 2*). Sole economic impact on demographic situation is probably overestimated. It means that the combination of different measures, a mix of benefits and services can be effective. Basic principles state that every child is important, stability of policies is necessary, and prevention is more effective than the alleviation of consequences. There has to be complexity, employment of women, accessible child care services, support to families during the whole period of child-raising, housing support, positive attitude by the society to family, and financial assistance.

Regarding the **indicators of effectiveness and economic benefits of the instruments** used in implementing family policies in the Baltic States, they are numerous and detailed (*refer to the overview, point 4*).

**Attachment 1: Overview of the answers of the relevant ministries in regard to the family policy**

In the letter to the ministers of internal affairs of the Baltic States, the Committee has sought answers to the following questions:

1) what are the cornerstones of migration policy in Estonia, Latvia and Lithuania;
2) how have the short-term and long-term goals of migration policy been defined in Estonia, Latvia and Lithuania;
3) have timely and sustainable solutions for the development of migration policy been worked out in Estonia, Latvia and Lithuania;
4) what are the main political and financial instruments used by the governments of the Baltic States in order to achieve short-term and long-term goals of the migration policy;
5) is a common position necessary and what are the possible joint solutions and actions of the Baltic States regarding the migration policy?

A thorough description of the answers received by the relevant ministries is depicted in the overview. **Attachment 2: Overview of the answers of the relevant ministries in regard to the migration policy.**

**BA Social Affairs Committee has also thoroughly followed the work of the Baltic Council of Ministers’ Task Force for Health.** As regards the results in the area of **common system for state-funded procurement of medicines and medicinal equipment**, the current task is to finalize the text of the Partnership Agreement (Agreement on Joint Procurement of Medicinal products and Medical Devices and Lending of Medicinal products and Medical Devices Purchased Centrally) by the end of 2011, continued by fulfilled national procedures in order to sign the Agreement. Signing of the Partnership Agreement should take place in the beginning of 2012, and...
the first common procurement of BCG and DTPa-IPV vaccines between Latvia, Lithuania and Estonia should take place for the stocks of 2013.

The activities of the expert group working with the possible establishment of joint specialized medical centres for more efficient use of professional skills in the Baltic States will continue via meetings of narrow specialization in order to find, continue, and/or facilitate cooperation. The main objectives were to analyze the flow of patients of the three Baltic States and identify the need of elaboration of agreement on such cooperation. It was also suggested to include the issue on health technology assessment (HTA), and Directive of the European Parliament and of the Council on the Application of Patients’ Rights on Cross-border Healthcare (2011/24/EU). It was noted that specialization in the sphere of health care is needed; each country should analyze possibilities for cooperation in health care and decide which diagnostic and treatment technologies will be developed nationally and which are needed to look for cooperation with other countries. It has been agreed that it is not reasonable to establish new specialized medical centres, instead – the potential of existing Baltic specialized centres according to the established flow of patients should be used. The following areas for cooperation were introduced: Latvia: Centre for stereotactic radiotherapy; Centre of Plastic, Reconstructive and Microsurgery; 3rd bio-safety level laboratory (Latvian Infectology centre); Estonia: Ophthalmological services; Rehabilitation services, for those suffering neurological and orthopaedic problems (GAIT); Innovative services, such as deep brain stimulation for movement disorders, clinical and neurophysiological diagnosis of epileptic seizures and nonepileptic attacks, genetics; Hematology and bone marrow transplantation. Lithuania: Bone marrow transplantation and advanced hematology; cardiosurgery.

Regarding the issue of coordination of emergency aid in towns and inhabited areas located close to the borders of the Baltic States, Latvia and Estonia already have the bilateral Agreement on Mutual Aid for Providing Ambulance Services in Border Areas (signed 24 September 2010), therefore the main objective was to set up the cooperation for providing emergency ambulance help for people living or staying in the areas along Lithuanian-Latvian common borders. There are only small towns and villages alongside and there are also existing objective differences in legal regulation, organisation and infrastructure of the ambulance services between Lithuania and Latvia which require essential preparatory work-phase for the purpose to set up real cooperation (preferably starting it in a limited agreed area(-s) along the border).

The results of the work in establishment of an efficiently functioning human organ transplant system of the Baltic States and establishment of a common sperm bank and treatment of infertility are that international cooperation in transplantation area is important in order to achieve the best quality and accessibility of transplantations. It will also lead to more rational use of resources. There is a need to review the agreement between the Baltic States, but it was also noted that every country may separately cooperation with international counterparts, organizations and networks. It would be effective to organize joint training for transplantation coordinators. In spring 2011 visits to transplantation centres of all three countries started. In May 2011 experts and officials visited Vilnius University Hospital Laboratory, Nephrology centre and Lithuanian National Bureau of Transplantation. In Vilnius each country presented its achievements in transplantation and discussion was
held for possible cooperation agreement. In September 2011 Estonian experts prepared the questionnaire for organ transplant specialists in the Baltic States in order to get an overview about the needs for Baltic cooperation. Visiting Transplantology Centre in Tartu and making conclusions of this expert group are planned in winter 2011/2012.

Concerning common sperm bank and infertility treatment sub-group agreed that there is no need to plan activities in this field today. First we deal with transplantation area and then we come back to this topic when there is a need discuss it.


In 2012 the BA Social Affairs Committee will focus on the issue of quality of life: food safety, and continue the follow-up of the activities by the Baltic Council of Ministers’ Task Force for Health in the four outlined areas:
- common system for state-funded procurement of medicines and medicinal equipment;
- joint specialised medical centres for more efficient use of professional skills;
- efficiently functioning human organ transplant system of the Baltic States;
- coordination of emergency help in the border towns of the Baltic States.
Attachment 1: Overview of the answers of the relevant ministries in regard to the family policy

1. What are Estonia’s, Lithuania’s and Latvia’s short-term and long-term goals regarding family policy?

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| - In 2011 the **new Development Plan for Children and Families for 2012 – 2020** will be approved in which short- and long-term family policy goals have been formulated. | **Long-term family policy goals**
- Government approved the long-term (2004-2015) national demographic strategy (28.20.2004). The main strategic goal is to encourage the establishment of an independent and vital family, based on mutual care and responsibility of family members. 
- To implement strategic goals, a 3 year plan of measures is developed every 3 years. 
- Programme of the Government (9.12.2008) states as a long term goal 4 Million people living in Lithuania by 2050. | - **Main family policy goals** are to promote the establishment of families, stability and wellbeing, to facilitate birth-rate and strengthen marriage institute and its value in the society (State Family Policy Guidelines 2011-2017, 18.02.2011).
- Under the general goals of the national family policy there are several **specific targets**:  
  1) to promote the opinion that family founded in marriage is a value; 
  2) to increase material support for economically active families; 
  3) to decrease risks of reproductive health; 
  4) to promote child adoption; 
  5) to diversify the possibilities of reconciliation of work and family life; 
  6) to reduce the obstacles to access to goods, services and built environment; 
  7) to decrease the risks of a child’s physical and emotional integrity; 
  8) to decrease family destabilising factors; 
  9) to ensure that after out-of-family care a child has acquired social skills and is able to |
| - Family and children policy has been addressed together as a whole. | **Short-term family policy goals**
- The Plan of measures for the implementation of the 2011-2013 National demographic strategy (27.01.2011): 
  1) implementation of the employment support measures aimed at the establishment of young persons in the labour market; 
  2) implementation of the pre-school and pre-primary education development measures for improving the organisation of education; | |
| - **Short-term goals** regarding children and family policy:
1) sustainable and need-based development of child and family policy; 
2) to increase knowledge and shape valued to support positive parenting skills; 
3) to promote children’s rights; 
4) to make the early intervention and child protection system more efficient; 
5) to offer and develop cost effective intervention, based on people’s needs; 
6) to develop an operative social protection system; 
7) to develop services that will enable families | | |

to be self-supporting;
8) to create equal opportunities for men and women to reconcile work-, family- and private life.

- **Long-term goals** regarding children and family policy:
  1) to make knowledge based and comprehensive child and family policy that will support the sustainability of society;
  2) to support positive parenting-families need an ever increasing amount of advise on how to be good parents and positive role models for their children;
  3) to further develop children’s rights and the child protection system;
  4) to support the financial wellbeing of families by complementing universal family benefits with targeted support and services;
  5) to create equal opportunities for men and women to reconcile work-, family- and private life.

3) establishment of the groups of an extended day at schools of general education and establishments of pre-school education;
4) providing for the compensation of the rental or a part of it to young families raising up children (preparing the legal basis);
5) preparation and participation in the implementation of measures encouraging entrepreneurship, incl. the entrepreneurship of families;
6) preparation and participation in the implementation of measures encouraging the development of family friendly employment.

**Strengthening of family policy is among the priorities of the Government in 2011 (14.10.2010)**

**Priority areas and the expected outcomes:**

1) Formation of positive attitudes towards the family in the society. **Expected outcomes:** the number of families participating directly in projects carried out by non-governmental organisations in the sphere of family welfare will increase up to 2 800 (in 2010 – 2 500); the number of prepared new guardians (curators) and foster-parents will increase up to 600 (in 2010 – 250); the number of children in children’s care homes will decrease by 2% of the total number of children in care; the number of children in care placed in the families of
2) Enhancement of family friendly environment. **Expected outcomes:** 500 unemployed persons, employers and municipality employees were trained through the implementation of the Priority 1 Measure “Reconciliation of family and employment responsibilities” under the 2007-2013 Action Programme on Human Resources.

3) Development of services for families and the accessibility thereafter. **Expected outcomes:** day care centres for children will cover 22% of children from social risk families (in 2010 – 21%); the number of children receiving social care services at children’s day care centres will increase to 5 000 (in 2010 – 4800); support through the tendering procedure will be provided to 70 groups of pre-school education following the financial principles on funding the pre-school education basket; support through the tendering procedure will be provided to 130 groups of pre-school education following the financial principles on funding the pre-school education basket; the number of children in the age from 1 to 6 participating in the programme of pre-school education will increase by 2000 in comparison with 2010.

4) Encouragement of family business. **Expected outcome:** prepared and implemented proposals concerning measures of support for family business
2. What political and financial instruments are being used or are planned to be used by the governments of Estonia, Lithuania and Latvia in order to achieve these short-term and long-term family policy goals?

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<th>Estonia</th>
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<td>To achieve the goals the following instruments are being used and will be used:</td>
<td>- Financial instruments: state social assistance provided to families raising children:</td>
<td>Political instruments</td>
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<td>- <strong>Political instruments:</strong></td>
<td>1) benefits for children raised in families: lump-sum child benefit (birth or adoption grant); child benefit; benefit to a conscript’s child;</td>
<td>Action Plan for the implementation of the conception “State Family Policy” (2004-2013) provides for the following activities:</td>
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<td>1) Action Plan of the Government 2011-2015;</td>
<td>2) benefits for children under guardianship: a guardianship benefit; a lump-sum settlement benefit.</td>
<td>- development of services for families (improvement of the accessibility of pre-school education or as alternative – child care centres for pre-school (aged 0-4) and primary school children and nanny services);</td>
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<td>2) Population Policy principles 2009-2013;</td>
<td>3) Lump-sum pregnancy grant.</td>
<td>- construction of playgrounds;</td>
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<td>3) Development Plan for Reducing Violence 2010-2014;</td>
<td>- As of 01.08.2008, the amount of benefits has been related to the basic social benefit (BSB) (amounting to LTL 38 EUR).</td>
<td>- provision of free school meals and sufficient number of textbooks free of charge, financial support for students acquiring higher education;</td>
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<td>4) Development Plan for Children and Families 2012-2020 (to be approved in August 2011)</td>
<td>- As of 01.01.2009 an increased lump-sum child benefit equal to 11 BSB i.e. 414 EUR has been paid at birth or adoption of a child. The child birth benefit is paid for each born child therefore at the birth of twins or triplets the amount of the benefit is subject to the number of children born. In cases of adoption for baby under one year of age, family receives both a birth benefit and adoption benefit.</td>
<td>- involvement of private entrepreneurs in the implementation of family friendly policies;</td>
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<tr>
<td>- <strong>Financial instruments</strong></td>
<td>- Due to financial crisis, at the end of 2009</td>
<td>- improvement of support measures for family members seeking work;</td>
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<td>1) State Budget;</td>
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<td>- instruments for provision of support for families regarding housing issues (support for families borrowing money from a bank for the purchase of their own home);</td>
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<td>2) European Social Fund;</td>
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<td>- review of taxation policies and state social</td>
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<td>3) Norwegian Financial Mechanism;</td>
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payment of a child benefit was limited with due to regard to financial resources of the state: a child benefit shall be paid to children taking into account the amount of family income, the age of children and the number of children on the family.

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<th>Financial instruments</th>
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<td>- support for families regarding child care issues and positive parenting.</td>
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The State Family Policy Guidelines (2011-2017) are the main policy planning document defining the tasks to be implemented in order to achieve the aforementioned policy goals. At the moment the Government is drafting a set of activities that should ensure efficient implementation of the policy guidelines (the draft plan for the implementation of State Family Policy Guidelines (2011-2017) in 2011-2013 has been announced at the Meeting of State Secretaries, and it will replace the current action plan).

**Financial instruments**

Financial support measures for families are implemented by means of state social allowances and social insurance benefits as well as by tax relief.

**State social allowances:**
- childbirth allowance (a lump sum allowance of 421 EUR);
- childcare benefit - 71 EUR per month for unemployed parents until a child is one year old;
- 42 EUR per month for parents of a one to two...
years old child;
- additional payment for twins or more children – until the age of one year – 71 EUR per month for each additional child, from the age of one to two years – 42 EUR per month for each additional child;
- State family allowance 11 EUR per month for a child from the age of one year.

Additionally there are state social allowances for children with disabilities and children in out-of-family care (living with guardian or foster family) and in case of adoption.

**Social insurance benefits (paid when a person is making use of family leave arrangements):**
1) maternity benefit is granted during the period of maternity leave. A maternity benefit shall be granted and disbursed for the entire period of maternity leave if a woman is absent from work and thereby loses income to be gained from paid work or if a self-employed woman loses income. A maternity benefit shall be granted in an 80 % amount of the average wage of a benefit recipient that is subject to insurance contributions. There is a ceiling on the amount of maternity benefit applied from 3.11.2010 to 31.12.2014 when maternity benefit shall be paid in the following amount: 1) if the amount of the granted benefit per one calendar day is up to 16,37 EUR (incl.), – in the amount
granted; or 2) if the amount of the granted benefit per one calendar day exceeds 16.37 EUR, – per one calendar day 16.37 EUR and 50% of the amount of the granted benefit, which in one calendar day exceeds 16.37 EUR, shall be paid. Article 154 of the Labour law provides for a prenatal (pregnancy) leave of 56 calendar days and a postnatal leave of 56 calendar days. Both parts of maternity leave shall be summed and 112 calendar days granted irrespective of the number of days prenatal leave has been used prior to child-birth. A woman who has started pregnancy-related medical care at a preventive medical institution by the 12th week of pregnancy and has continued for the whole period of pregnancy shall be granted an additional leave of 14 days, adding it to the prenatal leave (70 calendar days in total). In case of complications during pregnancy, childbirth or postnatal period as well as if two or more children are born, a woman shall be granted an additional leave of 14 days, adding it to the postnatal leave (70 calendar days in total).

2) paternity benefit shall be granted and paid to a father for ten calendar days of the leave granted to a father of a newborn child. Paternity benefits are calculated and granted in the same amount as maternity benefits (80% of the average wage of a benefit recipient, subject to ceiling). Paternity leave – Paragraph one of Article 155 of the Labour law provides that a father of a child is entitled to a leave of 10 calendar days. Such leave shall be granted
immediately after the birth of a child, but not later than within a two-month period from the birth of a child.

3) parental benefit – paid during parental leave for taking care of a child until the age of 1 year. A parental benefit shall be granted in a 70% amount of the average wage of a benefit recipient that is subject to insurance contributions, but not less than in the amount of 70% of double the amount of the State social security benefit in force on the day of requesting a parental benefit.

Until 31.12.2014 a socially insured person who is on parental leave or does not earn income as a self-employed person due to taking care of a child, shall be granted a parental benefit for taking care of a child (born after 2.11.2010) in the following amount: 1) if the amount of the granted benefit per one calendar day is up to 16,37 EUR (including), – in the amount granted; or 2) if the amount of the granted benefit per one calendar day exceeds 16,37 EUR, – per one calendar day 16,37 EUR and 50% of the amount of the granted benefit, which in one calendar day exceeds 16,37 EUR, shall be paid.

According to Article 156 of the Labour law every employee has the right to parental leave in connection with the birth or adoption of a child. Such leave shall be granted for a period not exceeding one and a half years up to the day the
child reaches the age of eight years.

Relief for a payer of personal income tax:
The state provides relief for a payer of personal income tax for the maintenance of dependent persons. This measure is applied to persons who acquire certain kind of income (salary, self-employed person’s income etc.). Currently the tax rate of the personal income tax is 25% of the monthly taxable income and from the income of economic activity. The monthly amount of the relief is 99 EUR. State Family Policy Guidelines (2011-2017) provide for the increase in the rate of the relief for a payer of personal income tax so that it reaches 50% of the minimum monthly wage (currently – 284 EUR). As alternative to this measure the policy guidelines provides introduction of a differentiated personal income tax policy, taking into account the number of dependent persons in a family.

Relief for a payer of vehicles exploitation tax:
The government also has provided relief for a payer of vehicles exploitation tax. A person – parent of three or more minor children – is entitled to pay 80% (for the respective calendar year) of the tax for one of his vehicles.

3. Which of these instruments and means used can be regarded as the most effective in implementing family policy?
### Estonia

Combination of different measures, mix of benefits and services gives the effect. Policies must be integrated and certain principles must be followed: every child matters; stability of policies, prevention is more effective that the alleviation of consequences etc.

### Lithuania

- According to research of Kaunas University on experience of Lithuania and other countries in regard to the family policy, the following measures can be notes as most effective: complexity, employment of women, accessible child care services, support to families during the all period of child raising, positive approach of society to the family, financial assistance.

- Pursuing to enforce the system of legal provision, appropriate integrity and coordination of actions, the *Draft law on the Fundamentals of Family Policy* was prepared and submitted for debate. This Law aims to strengthen cooperation and coordination of actions between the state and municipal authorities and institutions participating in the formation and implementation of the family policy.

### Latvia

It has been found that not only financial support is important for families with children but most importantly accessibility to services and families’ ability to earn sufficient income to ensure their wellbeing. Therefore State Family Policy Guidelines (2011-2017) were developed in a way that the main focus was drawn on the creation of family friendly environment by facilitating the accessibility and provision of services, for example full provision of pre-school education (to cope with the demand for services for children aged 0-4), services for solving housing issues, reconciliation of work and family life. The most significant challenge for implementation of new activities is lack of financial resources. However, at the Demographic Affairs Council the line ministries have been recently asked to reconsider their budgetary possibilities and, within limits, review their priorities in order to put forward additional activities (for the draft plan for the implementation of policy guidelines) that would be significant for the improvement of the demographic situation. This question will be included in the agenda of the Council’s next meeting in August 2011.
4. What are the indicators of effectiveness and what are the economic benefits of the instruments used in implementing family policy in Estonia, Lithuania and Latvia?

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<td>There are 14 different indicators for the long-term goals in the Development Plan for Children and Families 2012-2020: Use of knowledge based and comprehensive child and family policy indicators:</td>
<td>- National Demographic Strategy defines the following efficiency indicators: increase or decrease of the population in percents; increase or decrease of childbirths in percents; the average number of childbirths per woman during her lifetime; the share of extramarital children in the number of children born in wedlock, in percents; increase or decrease of the indicator of marriages, in percents; increase or decrease of divorces, in percents; the employment level of young persons by gender, in percents; the share of part-time employed persons in the number of full-time employees, in percents; increase or decrease of the number of children attending pre-school establishments, in percents; increase or decrease of the number of social risk families, in percents; the change in the level of relative poverty of families raising up children, in percents; change in any other related demographic factors, such as emigration, health status of the population, etc.</td>
<td>Policy guidelines provide for the indicators of effectiveness of the instruments used. Considering the economic benefits of the instruments (policy guidelines), due to the consolidation of state budget, it has not been possible to allocate additional financing for the implementation of the new policy guidelines. Therefore, at least from 2011 to 2013, the policy guidelines will be implemented by making use of the currently available state budgetary resources. Starting from 2013, the question regarding allocation of additional budgetary resources for the implementation of the policy guidelines shall be reviewed by the Cabinet of Minister in the process of drafting the law on annual state budget.</td>
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<td>1) Total fertility rate;</td>
<td>1. Increase of the number of marriages (indicator: Number of marriages per 1 000 inhabitants)</td>
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<td>2) Desired number of children and actual number of children;</td>
<td>2. Increase of number of children born in registered marriages (indicator: Percentage of newborns in registered marriages)</td>
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<td>3) The number of evidence-based social programs and services for families and children;</td>
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<td>4) Share of social protection on children and family in GDP calculated by the ESSPROS methodology;</td>
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<td>Indicators for support positive parenting:</td>
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<td>5) Parents’ lack of knowledge’s: where to get help and advice if you have parenting problems;</td>
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<td>6) Accept corporal punishment of children;</td>
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<td>Indicators for further development of children’s rights and child protection system:</td>
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<td>7) The number of children aged 0-17 per child protection worker;</td>
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<td>8) The number of children separated from</td>
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9) The attitude: children’s opinion can ask but no need to take it into account;

Indicators for support for the financial wellbeing of families:
10) At-risk-of-poverty rate of children aged 0-17;
11) The effect of social transfers (incl. pensions) to decreased at-risk-of-poverty rate of children aged 0-17, % point;

Indicators for creation of equal opportunities for men and women:
12) The percentage of children aged 0-2 and 3-6 involved to formal childcare;
13) Employment cap of men and women aged 20-50 with children aged 0-6;
14) The percentage of men among the receivers of parental benefits.


- Indicators of priorities in the 2011 activities of the Government for the enhancement of family policy:

1) The number of neglected children decreased by 1% in comparison with the previous year.
2) The number of social risk families decreased by 3%.
3) The number of children in the age of 3 to 6 children living in the rural areas and attending educational establishments increased by 5% in comparison with the year of 2010 (32% in 2010, and 37% in 2011).

3. Decrease of the number of children to whom paternity has not been established (indicator: percentage of newborns who have been entered in the birth register without indicating a father and Percentage of newborns who have been entered in the birth register with the recognition of paternity)

4. Increase in the birth rate (indicator: number of newborns per 1 000 inhabitants and number of children born due to in vitro fertilisation)

5. Increase in the birth rate in economically active families (indicator: number of persons receiving parental benefit (average per year))

6. Decrease in the number of abortions (indicator: number of artificial abortions per 1 000 newborns)

7. Increased support for families with children for the purchase of a housing (number of guarantees issued by the Mortgage bank to families with children for the acquisition of mortgage credit for the purchase or construction of a housing; number of long term rental agreements that have been signed)

8. Increase in the number of adopted children (number of adopters; proportion of adopted children in Latvia; proportion of children
9. Improvement of conditions for children’s development and upbringing (proportion of cases when a child (0-17) has had a traumatic accident at home; number of nanny services at local governments, attracting state financing)

10. Increase of satisfaction of families as regards state provided support for families with children (indicator: proportion of inhabitants (%), who are satisfied with the state support for families with children)

11. Increase of satisfaction of families with children as regards the quality of life (indicator: Proportion of interviewed inhabitants caring for children (%), who are satisfied with the household conditions)

12. More “family friendly” companies (indicator: number of companies, that have received the status “Family Friendly Company”)

13. Decrease in the proportion of families subject to poverty risk (indicator: at risk of poverty rate for households with dependent children)
5. Is any joint action and mutual cooperation by the Baltic States possible in the area of family policy? Is it necessary to define a common position, seek political instruments and take action by requesting support from the European Parliament or the European Commission?

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<td>Family policy is within the competence of EU member states, Estonia is mainly interested in sharing good practices and learning from the experiences of other countries as well as participating in projects that support information exchange.</td>
<td>The Baltic States meet similar demographic challenges in implementing family policy, therefore, we are of the opinion that primarily it is important to share good practices, and the attention of the Baltic Assembly given to the family and demographic issues is greatly welcomed. It is also very important to pursue that all decisions taken on the EU level in various spheres of activities (including the issues concerning the handling of the EU funds) were favourable for families and contributed to the improvement of the demographic situation, and the question of addressing demographic problems was placed on a relatively high position on the EU agenda.</td>
<td>that Latvia has been very much in favour of the strengthening of such cooperation between the Baltic States regarding issues related to family policy. So far most of the cooperation has been achieved by informal contacts in order to exchange with up-to-date information regarding the best practices introduced to support families and to compare the provided support services and instruments in each of the Baltic States. The cooperation in the family policy field should be promoted in the future by all kinds of available means. Latvia would be in favour of promoting this cooperation that would allow to better cope with the common challenges that our welfare systems currently face related to demographic challenges and support to families with children.</td>
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Attachment 2: Overview of the answers of the relevant ministries in regard to the migration policy.

1. What are the cornerstones of migration policy in Estonia, Lithuania and Latvia?

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| - Estonia follows comprehensive and common EU migration policy.  
- The cornerstone of migration policy is the Stockholm Programme and Action Plan implementing Stockholm Programme. | - In accordance with the governance areas, defined by the decision of the Lithuanian government of, the sphere of public security, including migration (except economic migration) is within the competence of the Minister of the Interior, sphere of labour policy falls under the competence of the Minister of Social Security and Labour, while sphere of economic policy, including issues of human resources, is within the competence of the Minister of Economy. The Seimas, by the decision of December 9, 2008 approved the Programme of the Government for the period of 2008-2012, including main provisions of the activity strategy of the Government on migration policy. | Migration issues are regulated by the Immigration Law (01.05.2003). Priorities and conditions:  
1) protection of the local labour market, opening the opportunities for the labour migration id such would be necessary (there is no certain quota neither for enrolling the guest works neither other restrictions to admit, for example, low qualified work force);  
2) broad opportunities for consolidating the family (in regard to the citizens of third countries);  
3) transparency of the administrative process and human rights observance). |

2. How have the short-term and long-term goals of migration policy been defined in Estonia, Lithuania and Latvia?

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| - Goals (according to the EU migration policy):  
1) more extensive use of modern technologies to facilitate border crossing of bona fide | - To take purposeful and active participation forming immigration and asylum policy of the European Union. The Lithuanian and European Union policy strategy document for the years 2008-2013 has been approved by the | Ministry of Interior has been instructed to develop the Conception of Migration Policy by 31 December 2012 where all short-term and long-term goals of the state migration policy will be defined. |
travellers and ensure high level of security. Estonia welcomes proposals for new IT-systems (entry-exit system, EUROSUR, EU PNR, RTP and extended use of biometrics).

2) Step by step approach in regard to the legal migration;
3) Strengthening of the FRONTEX agency and swift adoption of relevant amendments to its regulation. Improved cooperation among EU agencies to fight against organised crime;
4) Strengthening of the Schengen system;
5) Strengthened EU visa policy and common system for consular protection;
6) Establishment of the Common European Asylum System;
7) Strengthening fight against illegal migration in cooperation with third countries.

- As comes to external borders, the underlining principle that each of the EU member states is responsible for efficient control over its part of external borders.

Government on September 24, 2008. It states the aim to support the European Union occupation policy and goals to increase the investment into human resources; to promote mobility of workers, ensure positive effect of the economic migration in pursuance of sustainable labour market; to achieve effective cooperation between science and business; it underlines, that forming common European Union immigration policy different economic conditions, demographic situation and labour market needs in the member states should be taken into account, also differentiating migration policy means in the south and east directions, the eastern direction priorities of the European Union neighbourhood policy should be considered.

- To regulate in a more clear manner the order of incoming foreigners seeking employment, subject to participation in the labour market of the citizens of third countries should not encourage Lithuanian citizens to leave; to try to keep national competence in regulation of the economic immigration and asylum grant, to form overall migration regulating policy of the state. The Government by the decision taken on April 25, 2007, approved the Strategy of economic migration regulation (for the 2007-2012 period). It states that labour market balance should be maintained by encouraging internal labour force mobility, securing relations

Currently, Latvia continues to implement the requirements of the EU (Stockholm Programme).

Due to the temporary absence of any document of policy planning related to the migration area, the Ministry is not able to give a comprehensive answer to this question.
with the residents of Lithuania, who have left for work in foreign countries, a possibility is also foreseen to meet the needs of labour force by using its resources from third countries, though using it only in sectors where the lack of labour force in Lithuania and the European Union member states limit the possibilities of enterprises activities, and for a limited period of employment contract, taking into account returning flows of the local labour force that had emigrated before. **Guidelines of the Lithuanian immigration policy**, approved by the decision of the Government of December 3, 2008, define the principle goals and principles of the Lithuanian immigration policy, immigration policy development trends. One of the defined goals of the Lithuanian immigration is to seek that Lithuania will not lack labour force and to avoid negative effect of the emigration of citizens of Lithuania and aging society on economic and social development of the State and public finances, and in this way contribute to strengthening of the competitiveness of economy. The principle of compensation of the lacking labour force is established by this document – workers from the third countries should be invoked to compensate for the lack of labour force only when this lack cannot be compensated by returning from emigration citizens of Lithuania, or implementing the principle of free movement of persons – the citizens of the European Union member states;
attraction of labour force from the third countries should not encourage citizens of Lithuania to leave. It has been identified, that implementing selectively open and flexible Lithuanian immigration policy answering the changes of the needs of the labour market, preference is given to highly qualified workers, setting the geographic priority to those from Belarus, Ukraine, Moldova and countries of South Caucasus. Immigration of the labour force should be compatible with the possible return of citizens of Lithuania having emigrated earlier, i.e., should be time limited, therefore priority is given to circular migration. Also the principle of integration, as one of the most important basis of the effective and purposeful Lithuanian immigration policy has been established, the expediency to enhance economic competitiveness, demographic policy, immigration policy and development cooperation links has been stressed.

- **To simplify conditions for foreign highly qualified specialists and their families to enter Lithuania.** *Guidelines of the Lithuanian immigration policy*, approved by the decision of the Government of December 3, 2008, underline the necessity to pursue active policy of attracting highly qualified labour, apply more flexible procedures and shorten deadlines of issuing
documents for these persons, especially when their shortage limits enterprises, institutions and organizations in their activity possibilities. The Seimas adopted amendments to the Law of the Republic of Lithuania on Legal Status of Aliens in the year 2009, these amendments facilitated Family reunification conditions, applicable to highly qualified labour, foreigners, entering country for the purpose of lecturing, internships or exchange programs, as well as foreign investors in Lithuania. The term of processing requests of employers to issue working permits to highly qualified foreign specialist or those of lacking professions has been shortened the same year by the rules, regulating issuing permits. Regulations for issuing visas foresee the possibility to flexibly answer labour market needs, while issuing national visas to foreign workers, lacking in Lithuania. Presently the draft of the Law on Amendment of the Law of the Republic of Lithuania on Legal Status of Aliens is submitted to the Seimas of the Republic of Lithuania, which, inter alia, will transpose provisions of the Council Directive 2009/50/EC of 25 May 2009 on the conditions of entry and residence of third-country nationals for the purposes of highly
qualified employment (provisions of this directive had to be already transposed by 19 June of this year). This draft also contains proposals to speed up the procedure of issuance of temporary residence permits to persons of high professional qualifications.

- **To consolidate prevention and control of illegal migration.** To combat illegal employment and transpose to the national legislation provisions of the Directive 2009/52/EC of the European Parliament and of the Council of 18 June 2009 providing for minimum standards on sanctions and measures against employers of illegally staying third-country nationals, draft of the Law on Prohibition of Illegal Employment of the Republic of Lithuania has been prepared and submitted to the Seimas. Resulting from this legal regulation of the prohibition of illegal employment would be achieved by a special law defining characteristics of illegal employment, naming institutions, responsible for the control of illegal employment, providing responsibilities of employers of third-country nationals, stipulated sanctions and measures against employers having allowed working illegally.

3. Have timely and sustainable solutions for the development of migration policy been worked out in Estonia, Lithuania and Latvia?
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| As Estonia follows the Stockholm Programme, timely and sustainable solutions are set in Action Plane implementing the Stockholm Programme. | - Mass emigration of the Lithuanian citizens is the biggest challenge that Lithuania is meeting. About half a million people left Lithuania since 1990. Our concern is that more and more young people from academic communities, scientists, qualified specialists leave for foreign countries in search of better employment and study possibilities (every second emigrant was between 20 and 34 years of age during the last two years). Labour emigration, especially qualified specialists, might become threatful retarder for the economy development. Already nowadays lack of highly qualified labour is encountered. Solutions of economic and social consequences of such emigration are being looked for.  
- One of the goals of the above mentioned Strategy of Economic Migration Regulation approved by the Government on April 25, 2007 is to encourage return of economic migrants to the native country. Measures foreseen in the realization plan of the Strategy of Economic Migration Regulation were taken to achieve this goal. But obviously they have not been effective and sufficient as emigration of the Lithuanian | Due to the temporary absence of any document of policy planning related to the migration area, the Ministry is not able to give a comprehensive answer to this question. |
population is not decreasing.

- The “Global Lithuania” creation program for the period 2011-2019, a program involving Lithuanians abroad into the life of the country, was approved by the Government on March 30, 2011. About 1.3 million persons of Lithuanian origin or born in Lithuania are figured to be residing outside Lithuania, about 300 thousand of them are citizens of the Republic of Lithuania. The realization of the new program would pursue the aim that in the globalized world Lithuanians abroad would secure their national identity, enter into political, economical, scientific, cultural life and sports activities of Lithuania, strengthen their relations with Lithuania and this would encourage their return to the native country.

- In spite of great emigration of Lithuanian inhabitants, third-country labour immigration was decreasing in recent years (comparison of 2010 and 2008 data shows that the number of labour permits issued by the Lithuanian Labour Exchange has decreased more than four times). It should be noted, that labour market test is done before issuance of labour permit for a
Every six months the Minister of Social Security and Labour of the Republic of Lithuania approves the List of Professions Lacking in Lithuania. Though, in the last three years this list decreased from 34 to 4 professions (international freight transport vehicle drivers, ship hull assemblers and welders, restaurant chefs were included on the list of the second half of 2011), Lithuania is also facing high unemployment, this shows the lack of qualified labour in certain sectors.

4. What are the main political and financial instruments used by the governments of Estonia, Lithuania and Latvia in order to achieve these short-term and long-term goals of migration policy?

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<td><strong>Political instrument:</strong></td>
<td>Action Programme of Estonian Government 2011-2015.</td>
<td></td>
<td>Due to the temporary absence of any document of policy planning related to the migration area, the Ministry is not able to give a comprehensive answer to this question.</td>
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<td><strong>Financial instruments:</strong></td>
<td>main EU financial instruments under the framework programme “Solidarity and Management of Migration Flows”: 1) European Return Fund; European Refugee Fund</td>
<td>Answers integrated into answers to questions no.1, no.2 and no.3.</td>
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5. Is a common position necessary and what are possible joint solutions and actions of the Baltic States regarding migration policy?

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<td>Cooperation and information exchange among the Baltic States is good.</td>
<td>Lithuania will inevitably encounter severe lack of qualified labour should emigration of Lithuanian inhabitants not subside. Qualified labour could become one of the most important issues ensuring the development of Lithuanian economy. Therefore it is necessary to analyze possibilities and ways to attract highly qualified specialists from abroad to our labour market. At the same time it is also important to foresee in advance possible problems and impact on other spheres resulting from immigration. These questions would be appropriate to address considering the common context of the Baltic States. We assume that cooperation of the Baltic States both on the regional and the European Union levels is very important seeking common goals in area of migration policy.</td>
<td>Baltic cooperation has to be strengthened in the field of migration policy by arranging common regular events to exchange experience and to elaborate joint proposals for policy planning.</td>
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BACKGROUND

The 1st meeting of the Task Force for Health, established by the Baltic Council of Ministers on the 24 September, 2010 was held in Riga, 21 October, 2010. There was elaborated and agreed an action plan for conduction of analysis on the eventual efficiency of:

a) establishment of a common system for state-funded procurement of medicines and medicinal equipment - responsible State for the coordination of the project was agreed to be Latvia;

b) establishment of joint specialized medical centres for more efficient use of professional skills in the Baltic States - responsible State Lithuania;

c) coordination of emergency help in the border towns of the Baltic States - responsible States Latvia and Lithuania;

d) establishment of an efficiently functioning human organ transplant system of the Baltic States and a common sperm bank and treatment of infertility - responsible State Estonia.

At its first meeting Task Force also decided to include representatives from Baltic Assembly to Task Force’s work.

The 2nd meeting of Task Force took place on the 14th January 2011 in Tallinn and 3rd one on 7th October 2011. At the meeting chairs of the sub-groups presented results of sub-groups work and future activities.

By the end of 2010 each state identified the key person(s) responsible for implementation of the tasks nationally. There have been held following sub-groups’ meetings after establishing Task Force on Health:

Sub-group on common system for state-funded procurement of medicines and medicinal equipment, 3 meetings in Riga:

- 6 January, 2011 – discussion on the procedures and legislative requirements for state procurement;

- 10 March, 2011 – (a) Existing common procurement procedures across the borders (EE); (b) Agreement on “pilot” vaccine(s): (BCG and DTPa-IPV
vaccines); (c) The task given by the Task group to work on the algorithm for the “borrowing” of vaccines in urgent cases of necessity;

- 28 April, 2011 – Discussion on the draft Partnership Agreement between Latvia, Estonia and Lithuania.

- In addition countries have exchanged the lists of vaccines which are procured centrally in each country, indicating details of the procurement agreements.

  – Sub-group on establishment of joint specialized medical centres for more efficient use of professional skills in the Baltic States, 2 meetings in Vilnius:
    - 11 January, 2011 – presentation of situation in each of the country with regard referrals to the EU countries and first insight on the countries specializations;
    - 10 May, 2011 – proposals / presentations of the countries as for specific services provided in the Baltic States.

    - In addition countries have exchanged the lists of services for which they refer patients to other EU countries.

  – Sub-group on establishment of an efficiently functioning human organ transplant system of the Baltic State, 2 meetings:
    - 13 January, 2011, Tallinn – presentation of national systems and ideas for cooperation; decision of postponing the discussions on common sperm bank;
    - 5 May, 2011, Vilnius – visiting Vilnius University Hospital.

THE OVERVIEW OF ONGOING ACTIVITIES AND FUTURE STEPS OF THE TASK FORCE

I Establishment of a common system for state-funded procurement of medicines and medicinal equipment

Objectives of the sub-group stated by the Task Force are (1) to analyze the efficiency of establishment of a common system for state-funded procurement of medicines and medicinal equipment, (2) to identify discrepancies in national legislations and if necessary agree on the date for elimination of discrepancies and (3) establishment of the network for rapid information exchange in cases of toxicology.

States have expressed their willingness to discuss establishment of a common system. There have been exchanged the lists of vaccines that are purchased under centralized procedure and agreed on the “pilot” vaccines for common procurement. Since the legal framework within the Baltic States is in accordance with the EU regulations, it has been agreed that there are no legal obstacles.

In April 2011 Latvia presented the draft Partnership Agreement on Joint Procurements of Medicinal Products and Medical Devices and Lending of Medicinal Products and Medical Devices Purchased Centrally. The objective of this Partnership Agreement is to facilitate the joint procurement of medicinal products and medical devices with the overall aim to decrease state expenditures regarding state procurements of centrally purchased medicinal products and medical devices as well as to ensure continuity of
an access to centrally procured medicinal products and medical devices. States believe that implementation of joint procurements shall ensure the rationalization of procurements and will decrease the necessary time and states administrative resources.

In order to make system more effective Working Group has also noticed Task Force’s suggestion on sharing the information from those EU working groups where experts from all Baltic States cannot be present.

**Future activities of the sub-group**

1. To finalize the text of the Partnership Agreement by the end of 2011, continued by fulfilled national procedures in order to sign the Agreement.
3. First common procurement of BCG and DTPa-IPV vaccines between LV, LT and EE for the stocks of 2013.

**II Establishment of joint specialized medical centres for more efficient use of professional skills in the Baltic States**

Main objectives of sub-group are (1) to analyse the flow of the patients of three Baltic States and (2) to identify the need of elaboration of the agreement on such cooperation. Task Force has later suggested respective sub-group to include an issue on Health Technology Assessment into agenda. It was also decided to include into the discussion the issue on implementation of the *Directive of the European Parliament and of the Council on the application of patients’ rights on cross-border healthcare (2011/24/EU)* but Working Group has agreed that today there is no need to plan common discussion or activities on implementation the mentioned Directive.

Expert group has analyzed the flow of patients treated in another Baltic State and evaluated the need of establishment of new specialized medical centres. Common understanding was reached that specialization in the sphere of health care is necessary. Each country should analyze the possibilities of cooperation in health care and decide which diagnostic and treatment technologies it will develop itself and for which it needs to look for cooperation possibilities with other countries. It has been agreed that it is not reasonable to establish new specialized medical centres. Instead it is crucial to use the potential of already existing Baltic specialised centres according to established flow of patients.

During the second meeting of the Sub-Group leading specialists from hospitals presented their achievements in providing complex health care services and the possibilities for cooperation. Following areas for possible cooperation were introduced at the meeting:

**Latvia:** Centre for stereotactic radiotherapy; Centre of Plastic, Reconstructive and Microsurgery, 3rd bio-safety level laboratory (Latvian Infectology Centre);

**Estonia:** Ophthalmological services; Rehabilitation services – *high-quality rehabilitation for those suffering from neurological and orthopaedic problems (GAIT)*; Innovative services – (*) deep brain stimulation for movement disorders; (*)
clinical and neurophysiological diagnosis of epileptic seizures and nonepileptic attacks; (*) genetics; Hematology and bone marrow transplantation.

**Lithuania:** Bone marrow transplantation and advanced hematology - high resolution HLA typing and unrelated donor search, unrelated donor stem cell transplantation; cell processing/ immunotherapy after transplantation; advanced molecular testing in hematology, oncology and stem cell transplantation; advanced flow-cytometry in hematology; Cardiosurgery, including children cardiosurgery.

It was emphasised that concentration of health care services and technologies is most effective in treatment of rare diseases. The extensive flow of patients results in valuable experience of the personnel, more effective use of infrastructure and also higher quality of services.

**Future activities of the sub-group**

Work of this expert-group will be continued via meetings of narrow specializations in order to find, continue and facilitate the cooperation.

**III Coordination of emergency aid in the towns and inhabited areas which are located close to the borders of the Baltic States**

Main objective for the sub-group is to set up the cooperation for providing emergency ambulance help for people living or staying in the areas along Lithuanian-Latvian common borders.

Latvia and Estonia already have bilateral Agreement on Mutual Aid for Providing Ambulance Services in Border Areas (signed on 24 September, 2010).

Nevertheless, the situation along Lithuanian-Latvian border (more than 500 km) is different – there are only small towns and villages alongside and there are also existing objective differences in legal regulation, organisation and infrastructure of the ambulance services between Lithuania and Latvia which require essential preparatory work-phase for the purpose to set-up the real co-operation (preferably starting it in a limited agreed area(-s) along border).

**Future activities of the sub-group**

Meeting of LT and LV experts. The date of the meeting will be proposed by LT and it is foreseen in the first quarter of 2012, where the first agenda points are:

1. LV informs of the implementation and practical application of the agreement between LV and EE.
2. Experts map the problematic issues to be resolved;
3. Experts set deadlines for drafting the principal Agreement on co-operation.
IV Establishment of an efficiently functioning human organ transplant system of the Baltic States + Establishment of a common sperm bank and treatment of infertility

Main objectives of sub-group are (1) to map the level of transplantation of cells, tissues and organs of human origin in the Baltic States (2) to analyse the legal basis of the present existing cooperation in transplantation area among hospitals of the Baltic States (3) to map the possibilities for co-operation between Baltic countries and also other countries in Europe.

Concerning common sperm bank and infertility treatment sub-group agreed that there is no need to plan activities in this field today. First we deal with transplantation area and then we come back to this topic when there is a need discuss it.

Sub-group has concluded that international cooperation in transplantation area is important for achieving the best quality and accessibility of transplantations. It will also lead to more rational use of resources. There is a need to review the agreement between Baltic States. At the same time it was stated that every country may separately cooperate with international counterparts, organisations and networks. Sub-group also has agreed that it would be effective to organise joint training for transplantation coordinators.

In spring 2011 visits to transplantation centres of all three countries started. In May 2011 experts and officials visited Vilnius University Hospital Laboratory, Nephrology centre and Lithuanian National Bureau of Transplantation. In Vilnius each country presented its achievements in transplantation and discussion was held on conditions for possible cooperation agreement. In September 2011 Estonian experts have prepared questionnaire for organ transplant specialists in Baltic States to get the general picture about needs for Baltic cooperation.

Future activities of the sub-group

In 26th October 2011 transplantology experts from Baltic States will visit Transplantology Centre in Riga. In agenda there will be analyzing the answers gathered with the questionnaire, overview of Balttransplant, Scanditransplant and Eurotransplant activities and research made by Latvian cells transplantologists as well as the visit to their laboratory.

Visiting Transplantology Centre in Tartu and making conclusions of the expert Group are planned to winter 2011/2012.