

4th Meeting of the Working Party on Health and Environment
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ENHIS-2

Establishment of Environment and Health Information System

Supporting Policy-Making in Europe

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ENHIS2 Partners

World Health Organization

European Centre for Environment and Health Bonn Office



SPC 2004124

<http://www.euro.who.int/EHindicators>



ENHIS-2 Partners (1 of 2)

Coordination: WHO/Euro (ECEH Bonn)

Country	Institutions
Austria	Austrian Health Institute (OBIG)
Belgium	FPS Public Health, Food Chain Safety and Environment CAE-Quartier Vesale (V707); APHEIS Brussels
Bulgaria	Ministry of Health
Czech Republic	National Institute of Public Health
Denmark	National Board of Welfare; Depart. of Pharmacology University of Copenhagen
Estonia	Health Protection Inspectorate TKS
Finland	National Public Health Institute (KTL)
France	Institut de Veille Sanitaire (InVS); Agence Francaise de Sécurité Sanitaire Environnementale
Germany	State Institute of Public Health of NRW, Bielefeld (LÖEGD);
Greece	National School of PH NSPH;
Hungary	National Institute of Environmental Health KOZPONT;
Ireland	Department of Health & Children; Health Service Executive



ENHIS-2 Partners (2 of 2)

Country	Institutions
Italy	National Environmental Protection Agency (APAT)
Latvia	Health Promotion and Environmental Health Division Ministry of Health
Lithuania	Environment and Health Division State Environmental Health Centre VASC
Netherlands	National Institute of Public Health and the Environment (RIVM);
Poland	Institute of Occupational Medicine and Environmental Health IMPIZS;
Portugal	Directorate of Public Health, Ministry of Health DGDS
Romania	Institute of Public Health IPHB;
Slovak Republic	Public Health Authority of the Slovak Republic NAPH
Slovenia	National Institute of Public Health, Ministry of Health IZVA; APHEIS Ljubljana
Spain	Escuela Andaluza de Salud Publica EASP; Instituto de Salud Carlos III (ISCIII); Agencia de Salud Publica de Barcelona ASPB;
Sweden	The National Board of Health and Welfare (Socialstyrelsen);
United Kingdom	Robens Centre for Public and Environmental Health University of Surrey; Department of Public Health and Epidemiology University of Birmingham Medical School Edgbaston;

ENHIS2 Objectives

Put in operation:

- A set of EH indicators for children's and general population's health;
- Health impact assessment methods air pollution and noise;
- Inventory of current EH policies and interventions;
- IT tools in order to make indicators, relevant information and analyses up-to-date & accessible on WWW

Assessment Report for IRM

REPORT “Children’s Health and the Environment in Europe: First Assessment” for IRM, June 2007

A baseline analysis along the four RPG using policy-relevant indicators developed through ENHIS projects.

CEHAPE Action Plan: Four Regional Priority Goals to reduce health risks and promote safe and secure environments for our children

1. Improve access and water quality;
2. Injuries and accidents: safety, mobility & physical activity;
3. Air quality indoors and outdoors and respiratory health;
4. Reduce chemical, physical and biological hazards.



ENHIS-2 indicator fact sheet



World Health Organization
Regional Office for Europe

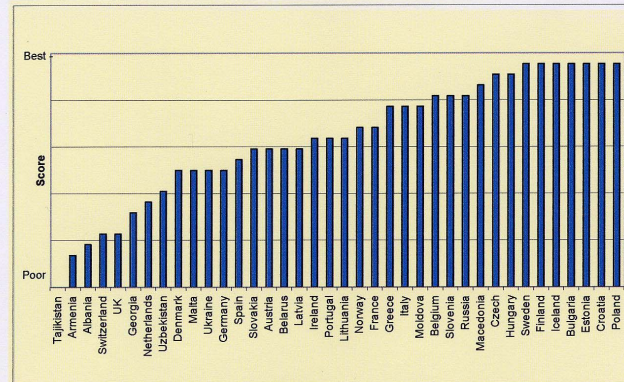
AIR_A1: POLICIES TO REDUCE ENVIRONMENTAL TOBACCO SMOKE EXPOSURE



Capabilities for implementing policies to prohibit smoking in public indoor environment and restrict smoking in designated areas, as reported by countries vary substantially across the WHO European region.

Key message

Figure 1: Composite index of scope and degree of implementation of policies to reduce ETS exposure and promote smoke-free zones as reported by countries



Source: WHO/Europe Tobacco Control Database <http://cisid.who.dk/tobacco/>

Results and assessments

Environmental health context:

Environmental Tobacco Smoke (ETS) increases the risk for a variety of health effects in non-smokers, summarized in WHO Air Quality Guidelines for Europe (WHO Regional Publication, European Series, No 91, 2000).

EH context

Policy relevance:

This indicator provides information for the EU Health Monitoring Programme, WHO initiative for a Tobacco-free Europe, national public health programmes, NEHAP etc.

Policy context

Policy context:

Laws and regulations are essential to provide protection against involuntary smoking. The instruments and measures to prohibit smoking in public places are set by the countries.

Assessment:

The indicator shows the growing capabilities in WHO/ Europe Member States for implementing comprehensive policies to reduce ETS exposure as compared to the situation.

Assessment

ENHIS-2 Indicators and Fact Sheets: RPG I

CEHAPE RPG I: Reduce morbidity, mortality from gastrointestinal disorders & other health effects and improve access to safe, affordable water & adequate sanitation for all children

Indicator Title	Number of Countries with Data			Fact Sheet
	A	B	C	Status
Waste water treatment coverage and access to improved sanitation	16 (89%)	13 (87%)	4 (21%)	😊
Recreational water quality	16 (89%)	9 (60%)	n.a.	😐
Population with public water supply and access to improved water sources	15 (83%)	7 (47%)	15 (79%)	😊
Outbreaks of water-borne diseases	Case studies			😐

A: ENHIS-2 (18 countries) B: Other EU + EFTA countries (15) C: Other WHO-EURO MS (19)

ENHIS-2 Indicators and Fact Sheets: RPG II

CEHAPE RPG II: Reduce health consequences from accidents and injuries and pursue a decrease in morbidity from lack of adequate physical activity, by promoting safe, secure and supportive human settlements for all children

Indicator Title	Number of Countries with Data			Fact Sheet
	A	B	C	Status
Children's mortality from traffic accidents	18 (100%)	14 (93%)	11 (58%)	😊
Children's mortality from external causes excluding traffic	18 (100%)	14 (93%)	12 (63%)	😐
Percentage of physically active children	16 (89%)	12 (80%)	3 (16%)	😐
Prevalence of overweight and obesity children	13 (72%)	10 (67%)	3 (16%)	😐
Policies to promote safe children's mobility	8 (44%)	n.a.	n.a.	😊
Policies to reduce child injuries	8 (44%)	n.a.	n.a.	😊
Policies to reduce and prevent children's obesity	9 (50%)	n.a.	n.a.	😐
Non-traffic injuries	Case Studies			😞

A: ENHIS-2 (18 countries) B: Other EU + EFTA countries (15) C: Other WHO-EURO MS (19)

ENHIS-2 Indicators and Fact Sheets: RPG III

CEHAPE RPG III: Reduce respiratory disease due to outdoor and indoor air pollution, thereby contributing to a reduction in the frequency of asthmatic attacks, in order to ensure that children can live in an environment with clean air

Indicator Title	Number of Countries with Data			Fact Sheet
	A	B	C	Status
Prevalence of asthma and allergies in children	12 (67%)	6 (40%)	3 (16%)	☹️
Infant mortality from respiratory diseases	18 (100%)	12 (80%)	3 (16%)	😊
Children's exposure to outdoor air PM10	18 (100%)	11 (73%)	n.a.	☹️
Children's homes with mould and dampness	9 (50%)	5 (33%)	n.a.	☹️
Children's exposed to environmental tobacco smoke	17 (94%)	13 (87%)	12 (63%)	☹️
Proportion of children living in homes using solid fuel	18 (100%)	14 (93%)	17 (89%)	☹️
Policies to reduce children's passive smoking	Case Studies			☹️
Children in proximity of heavily trafficked roads	18 (100%)	15 (100%)	17 (89%)	☹️

ENHIS-2 Indicators and Fact Sheets: RPG IV

CEHAPE RPG IV: Reduce the risk of disease and disability arising from exposure to hazardous chemicals (such as heavy metals), physical agents (e.g. excessive noise) and biological agents and to hazardous working environments during pregnancy, childhood and adolescence

Indicator Title	Number of Countries with Data			Fact Sheet
	A	B	C	Status
Incidence of melanoma	11 (61%)	5 (33%)	1 (5%)	😊
Incidence of childhood leukaemia	10 (55%)	7 (39%)	2 (10%)	😐
Work injuries in employees under 18 years	9 (50%)	7 (39%)	n.a.	😐
Children's exposure to chemical hazards in food	2 (11%)	4 (27%)	n.a.	😐
POPs in human breast milk	7 (39%)	2 (1%)	2 (10%)	😊
Blood lead level in children (case study)	Case Studies			😐
Policy actions to lower children's UV exposure	6 (33%)	n.a.	n.a.	😊
Radon levels in dwellings	Case Studies			😞

A: ENHIS-2 (18 countries) B: Other EU + EFTA countries (15) C: Other WHO-EURO MS (19)

Products:

The Indicator-based Report



A 'standardized' product developed along a storyline which logically interlinks indicators and processes.

Focusing on 'core' data flows supports countries in defining priorities for data collection -> improved data quality

Enables use and re-use of information for reporting at national, EU scale and other international processes

The Web-based Service

CEHAPE indicators and related analysis and trends

Fact-sheets describing the situation and showing potential health benefits of actions and interventions

Well-structured information – user-friendly with different levels of detail

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