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Environment and Health Information System

Meeting on preparation for the Intergovernmental Mid-term Review Meeting: an EH Information System-based assessment report

Bonn, 27 – 28 April 2006

Meeting Report
ABSTRACT

In accordance with the decisions of the Fourth Ministerial Conference on Environment and Health (Budapest, 2004), the Member States of the European Region of WHO develop a comprehensive environment and health information system (EHIS). The system is designed to serve as an evidence-based tool for health policies in the European Region. The progress of this work will be reported at the Intergovernmental Mid-term Review Meeting (IGM) in 2007. The WHO and the EHIS Working Group will prepare an EHIS-based assessment report to the IGM. The meeting convened by WHO/ECEH Bonn office agreed on the detailed outline and structure of the assessment report, on the roles and responsibilities of each institution and defined a timetable of the activities. The conclusions of the meeting will serve as a blueprint for the preparation of the EHIS-based report and for advancing the process towards a pan-European information system supporting relevant policies.

Keywords

ENVIRONMENTAL HEALTH
INFORMATION SYSTEMS
ENVIRONMENTAL MONITORING
INTERNATIONAL COOPERATION
PROGRAM EVALUATION - organization and administration EUROPE
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INTRODUCTION

Background

In accordance with the decisions of the Fourth Ministerial Conference on Environment and Health (Budapest, 2004), the Member States of the WHO European Region are developing a comprehensive environment and health information system (EHIS). It will be a part of the overall evidence base for health policies in the European Region. The mid-term objective of this process, coordinated by the WHO Environment and Health Information programme based at the WHO/ECEH Bonn Office, is to establish the technical and organizational infrastructure allowing monitoring of the implementation of national and European environmental health policies, in particular those related to the Children Environment and Health Action Plan for Europe (CEHAPE).

The progress in this work will be reported at the Intergovernmental mid-term review meeting (IGM) on EH in 2007. An assessment report of the environmental health situation across Europe based on the EHIS methodology will best demonstrate the usefulness of the information system and the progress in its development achieved so far. The ongoing EC-sponsored project ENHIS-2 (EC DG Sanco Grant Agreement 2004124) will facilitate implementation of this work in the ENHIS-2 partner countries. The remaining WHO European Member States will be able to benefit from the developed system through voluntary participation and use of the system infrastructure.

This meeting was convened by WHO/ECEH, Bonn Office to agree on the most efficient method to advance the system development and to demonstrate at the IGM 2007 the progress achieved. It was supported by the Bonn Office meeting funds, received from the German Government, which are gratefully acknowledged.

Background documents presenting the indicators and methodology used in the ENHIS project were prepared in advance by WHO secretariat in order to facilitate the discussion during the meeting on the indicators and information needed.

33 participants: EHIS WG members from 28 countries, international organizations and WHO staff (Annex 1) attended the meeting. Pierre Biot and Ingrida Zurlyte were elected to co-chair the meeting. Ing-Marie Olsson acted as rapporteur.

Agreements in short

The meeting agreed on the detailed outline and structure of the assessment report. The indicators developed and evaluated in the ENHIS project will be used for the analysis. The report will include case studies on specific environmental health issues related to the CEHAPE Regional Priority Goals and examples of national policy actions. The Member States’ commitments to the preparation of the assessment report, i.e. the tasks, roles and responsibilities of each country, as well as the timetable of the activities, were discussed and agreed upon.
The conclusions of the meeting will serve as a blueprint for the preparation of the EHIS-based report and for advancing the process towards a pan-European information system supporting relevant policies. The process of the report preparation will stimulate building and strengthening the network of national collaborating centres – an important mechanism for the EHIS establishment and maintaining its relevance for the Member States. It will also enhance transfer of the knowledge and achievements of the ENHIS projects to other countries across the WHO European Region.

**Objectives of the meeting**

The meeting had the following objectives:

- To define the EHIS-based products to be presented at the IGM in 2007.
- To agree on the detailed outline and structure of the EHIS-based assessment report on CEHAPE implementation.
- To specify the commitments of the Member States and WHO programme in order to agree on a work plan for the preparation of the EHIS-based assessment report.

**SUMMARY OF THE MEETING DISCUSSION**

Several international organizations and institutions are involved in the EHIS preparation. The review of these activities provided a background for discussion on the best ways to demonstrate at the IGM in 2007 that EHIS is becoming operational. This review was followed by a detailed discussion of the products to be prepared.

**On the progress of Environmental Health Information System: International initiatives**

The WHO ECEH is coordinating the development of EHIS following decisions of the Budapest Ministerial Conference, which has formulated general mechanisms of the collaborative work. The Budapest Declaration (§16) concludes that the establishment of the Environmental Health Information System (EHIS) relies on strong involvement of the Member States using their national expertise, capacities and organizational mechanisms. It also requests WHO and other organizations to coordinate their actions and implement relevant technical projects.

The ENHIS projects on implementation of an Environment and Health Information System are an example of technical work designed and implemented by WHO to support the EHIS system. A core set of indicators to monitor the environment and health situation, methods for assessing information needs of policies across the region and reporting mechanisms (indicator-based fact sheets on environment and health issues, web-based information tools and integration of health impact assessment) have been produced.

The current stage of the environmental health indicators development focussing on the monitoring of the CEHAPE implementation was presented by Adriana Galan, representing one of the work packages of the ENHIS project. Screening of international databases was conducted to assess data availability and accessibility for core indicators defined by the ENHIS project. This review has confirmed that a significant part of the indicators can be retrieved from these
existing databases, allowing calculation of the indicators (see Annex 2). Some indicators, for which data are not available in international databases, are routinely collected by several countries. An immediate task is to identify data sources in countries not regularly submitting their data to international data bases.

D. Dalbokova summarized the main synergies with other ongoing European initiatives. Assessment and reporting within Environment for Europe (The Belgrade Report) will benefit from the existing ENHIS methods and tools. The EHIS system will also contribute to reporting on the Environmental Strategy for EECCA countries at the Fifth Environmental Ministerial Conference in 2007 and on the European Environment and Health Action Plan.

Ongoing work with the European Environment Agency’s (EEA) fourth assessment of Europe’s environmental situation, referred to as the Belgrade Report, was presented by D. Jarosinska. The Belgrade Report is one of the base documents for the Environment Ministerial Conference in Belgrade 2007. The EEA was given the mandate to produce this report in order to improve environmental information and monitoring capacities in the region. The proposed contents of the report will be primarily addressed through the status of implementation of two action strands: the Eastern Europe, Caucasus and Central Asia (EECCA) Environmental Strategy and the implementation of the EU 6th Environmental Action Programme.

S. Brockett made a concise summary of the issues covered at the Consultative Forum on Environment and Health within the EU EH Action Plan in Brussels (April, 2006). The subject for the Consultative Forum was the status of the work on environment and health information to support the EU EH action plan. The draft review of environment and health information proposes how to handle emerging health issues through the SCENIHR (Scientific Committee on Emerging and Newly Identified Health Risks). An assessment of available information, consultation, classification and support of data-linkage, and how identified problems can be handled (exposure routes, HIA, regular monitoring etc.) was also presented at the forum. A proposal for a pan European plan to conduct human bio-monitoring (HMB) was discussed. Funding would come from the 7th Framework Programme (FP7), which will be launched in 2007. Indoor air has been identified as an area where further action is needed and a new expert group is being put together. The Scientific Committee on Health and Environmental Risks (SCHER) will issue an opinion on indoor air in the following months and a green paper on environmental tobacco smoke (ETS) is in preparation and will be submitted for consultation.

**On the EHIS-based products to be prepared for the IGM and their structure**

Participants acknowledged that decision-makers are increasingly recognizing the strong need for better information on environmental health in order to develop adequate policies. However, there are still weaknesses in using the information for decision-making and lack of experience in inter-sectorial cooperation. The EHIS-based products to be presented at the IGM will be a strong example on how to use the information for policy and decision-making and will thus add great value to the information collected previously.

Further discussion focussed on two interrelated products to be prepared for reporting at the IGM in 2007: the indicator-based report “Children’s Health and the Environment in Europe: first assessment” and the web-based information system.
The indicator-based assessment report will demonstrate the current environment and health situation and problems concerning the four areas identified in the Regional Priority Goals (RPG). The web-based information system is the tool needed by policy makers to monitor environmental health problems and to assess the effectiveness of the policies in place.

Both products focus on the results obtained from the system and not on the processes implemented to obtain these results. The goal of the two products is to demonstrate that the EHIS system is becoming operational and can be used for the following purposes:

- Assess environment and health situation and policies in Europe towards the four RPG’s with the help of available and relevant indicators.
- Retrieve information and indicators through the existing publicly available data bases.
- Stimulate countries’ involvement to reduce critical data gaps.

**Product I: Indicator-based Assessment Report**

Participants agreed on the need to use policy relevant indicators supporting the four CEHAPE RPGs. A subset of indicators will be chosen for the report. This selection will be based on the feasibility and availability of data. It was suggested that the report should be as synthetic as possible and well-illustrated with supporting graphs. Key messages should be included and highlighted within the report.

The assessment report and the information and data used for its preparation will provide a baseline for future assessments. Sustainability of the information system is a crucial aspect to be considered throughout its establishment. If the system is successful in attaining sustainability over time, this first assessment will be the baseline for future comparisons adding value to the information generated by the system.

The indicators will enable situation analysis of selected environmental health issues and the assessment of the policies put in place. Standardized presentation of data from various countries will enable inter-country comparisons but the report will not rank or evaluate individual countries. However, each country may use the system for its own in-depth evaluation.

The policy indicators developed within the ENHIS projects measure the implementation of a number of specific policies and action programmes to deal with environmental health problems according to the four RPGs. These policy indicators have been successfully retrieved in the ENHIS project and the relevant information is therefore available in several Member States.

The WHO proposed a tentative structure for the report that was accepted by all meeting participants. This structure centres on the four RPGs with the following main sections under each:

- Public health issue: how big is the problem, situation and trends, use of the indicators.
- Environmental Health indicator based assessment of the situation and trends: causes of the problem and room for improvement.
- Policy and regulation assessment: description and potential health benefits.
- Conclusion: providing key answers to health problems identified, priority data gaps, ability of the system to present the situation.
A brief demonstration of the scientific background of the indicators will be provided to enhance the credibility of the analysis presented in the report. However, it was also pointed out that the report should show existing gaps in information and point to technical problems faced during the data access and processing. Identification of the system’s limitations will not preclude the assessment being based on information and evidence from a successfully developed system.

Participants showed strong interest in the use of the ENHIS methods to adapt their own reporting and assessments and to use the system to produce their country reports. Involvement of the non-ENHIS countries in the report preparation should expand country coverage of the system beyond ENHIS countries to show the potential for a Pan-European information system.

**Product II: Web-based Information System**

The WHO ECEH pointed out that there are currently two web sites used within the ENHIS projects: the SharePoint facility for the strengthening of the network and the indicator web site. These two web sites are related to the technical side of the project. Data exchange and retrieval has started in the ENHIS project and the fact sheets for the indicators will be produced by the end of September.

The web-based information system under way will give access to the most up-to-date indicators for monitoring the most relevant environmental health issues in the European Region. Indicators and fact sheets will be provided in a layered structure according to the level of detail required for different users. The fact sheets from the web-based information system will allow countries to use them in preparation of national fact sheets and national indicator-based reports. The aim of the fact sheets is to present information in a standardized form that is easily understood and that highlights the key issues.

The web-based information system will enable the user to select indicators for a given country or group of countries and for a specific time period. It will present the indicator values and also related graphs and charts. Along with this, additional information will be provided related to the analysis of the indicator (e.g. answering key public health policy questions).

Many participants considered it also important to be able to retrieve data from the web-based tool.

**On the content of the products: indicators, case studies and national inputs**

The ENHIS project has produced a solid methodological and organizational basis for a comprehensive information and knowledge system based on a set of indicators. The discussion on the selection of indicators focussed on data availability in international databases.

Two different types of environmental health indicators are important for the system: exposure to air pollution indicators (Exposure to PM10 and Total Suspended Particles were presented as an example) and policy indicators (Policies to promote safe mobility and transport for children,

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1 https://webcollect.rivm.nl/ENHIS%5Fpilot/
Policies to reduce child unintentional injury unrelated to traffic accidents, Policies to reduce child obesity, Actions to reduce children’s exposure to UV).

The indicators on exposure to air pollution are routinely collected at national level but this information is not available in international databases (e.g. EEA-AirBase) for non-EEA members. For the policy indicators, there is no international data available but participating countries in the ENHIS project have tested them for feasibility and policy relevance.

Templates for data collection for the above mentioned exposure and policy indicators will be used to check for the availability of data at national level and to submit it if available. Countries who don’t report data on the exposure to air pollution indicators to international databases will receive templates for providing this information. For the policy indicators, participants asked WHO to approach all countries and to send the data collection templates, as this data is not available in international databases. Countries will then check the availability of data at the national level and will provide the data if it is available.

The use of templates for data collection harmonizes the data retrieval amongst all countries and provides metadata in a standardized way. Several participants requested these data collection sheets to be translated into Russian. WHO will explore the options available for the translation of these documents into Russian.

The meeting agreed on the usefulness of complementing the indicators analysis with case studies and information from national surveys. Participants from several countries volunteered to provide information for the following indicators:

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Countries that agreed to provide case studies/surveys</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RPG I: Ensuring safe water and adequate sanitation</strong></td>
<td></td>
</tr>
<tr>
<td>Outbreaks of water borne diseases</td>
<td>Croatia, Estonia, Finland, Russia, Serbia and Montenegro and The former Yugoslav Republic of Macedonia</td>
</tr>
<tr>
<td>Management of bathing waters</td>
<td>Czech Republic, Estonia, Bulgaria, Russia, Serbia and Montenegro, The former Yugoslav Republic of Macedonia and United Kingdom.</td>
</tr>
<tr>
<td><strong>RPG II: Ensuring protection from injuries and adequate physical activity</strong></td>
<td></td>
</tr>
<tr>
<td>Domestic injuries in children (from national injury surveillance systems)</td>
<td>Croatia, Hungary, Lithuania, Romania, Russia, Serbia and Montenegro, The former Yugoslav Republic of Macedonia and United Kingdom.</td>
</tr>
<tr>
<td>Obesity</td>
<td>Bulgaria, Czech Republic and Romania.</td>
</tr>
<tr>
<td><strong>RPG III: Ensuring clean air indoors and outdoors</strong></td>
<td></td>
</tr>
<tr>
<td>Children living in the proximity of heavily trafficked roads</td>
<td>Possibly The Netherlands (ENHIS partner), Sweden and the United Kingdom.</td>
</tr>
</tbody>
</table>
**RPG IV: Aiming at a chemical-free environment**

**Incidence of childhood cancer:** Countries should have this information from the National Cancer Registries. Sweden, Romania will try to obtain this information.

**Leukaemia and solid tumours**

**Blood lead level in children** Bulgaria, The former Yugoslav Republic of Macedonia, Sweden and Romania.

**POPs in human milk** Spain and Sweden might have this information. WHO will also check current monitoring programs.

The following process was agreed in order to check availability of case studies or surveys for these indicators in the Member States:

- Explore the availability of surveys and case studies to feed in these indicators, preferably at national level.
- Preparation of templates for compiling case studies → WHO ENHIS project committed to develop a template to harmonize the collection of data. The template would contain short instructions and criteria which Member States should use to select their case studies and surveys.
- The WHO secretariat should make the template available in both English and Russian.
- Selection of the most appropriate case studies and surveys for use in the assessment report.

The meeting decided to nominate an Editorial Group for the selection of case studies and surveys. Participants from Armenia, Belgium, Czech Republic, Italy and the United Kingdom volunteered to be part of the editorial group and work together with the WHO ECEH Bonn in the selection process.

For the selection criteria to be used, the following recommendations were proposed:

- Case studies should be based on data from regular and ongoing monitoring or surveys, allowing production of time trend comparisons.
- For each indicator, case studies from more than one country are preferred.
- A case study or survey could be from local, regional or national level if it provides information relevant to the indicator.
- Case studies and surveys conducted no earlier than in the year 2000 are preferred.

**On the environment and health information networking**

The ENHIS project has set up an international environmental health network of 18 countries across Europe. Participants expressed their strong interest in becoming part of the existing network in order to be able to use the existing tools and information in preparation of country assessments (Armenia, Croatia, The Former Yugoslav Republic of Macedonia, Moldova, Russian Federation, Serbia and Montenegro, Uzbekistan). Participants acknowledged the benefits of joining the network: the possibility to exchange environment and health information...
that is comparable on a European scale and the possibility to upgrade and adapt the system tools to work at a national level.

Countries are welcome to join the network by contacting the ENHIS Network Leader Institution (National Centre for Public Health, Budapest). After registering as a network member, the national focal point will get access to the restricted area web page, working documents and products.

The establishment of EHIS network at the European Region scale relies on the existing national networks and counterparts. Therefore, maintaining and accessing national networks for the exchange of environmental health information is considered of crucial importance. Participants were encouraged to identify national counterparts, potential users of EHIS and national networks in order to expand the existing networks and to adjust the system based on the feedback. Several participants confirmed their support and their willingness to join the EHIS developments (Armenia, Bulgaria, Croatia, Estonia, Lithuania, The Former Yugoslav Republic of Macedonia, Moldova, Poland, Russian Federation, Serbia and Montenegro, Spain, Uzbekistan) and to adapt indicators and upgrade tools for regular monitoring, assessment and reporting in the countries.

Relevant web information sources will usefully complement the ENHIS web-based tool. Participants will inform by the end of summer 2006 on relevant national web-pages and information sources that can be linked with the ENHIS web.

The strong interest to join the ENHIS network and to use the ENHIS expertise at the national level will be conveyed to the upcoming EEHC meeting (Oslo, 15-16 May 2006) and further to The Regional Committee in September 2006.

**CONCLUSIONS AND RECOMMENDATIONS**

- The meeting agreed on the importance of the two products based on EHIS to be presented at the IGM: an indicator-based assessment report and web-based information tool. The proposed outline and the contents of the assessment report were accepted. Participants confirmed their willingness to submit the necessary information along selected indicators and case studies to reduce critical data gaps and to improve the assessments.
- Participants emphasized the benefits of joining the existing environment and health networks such as the ENHIS. They agreed to work on the establishment and further strengthening of the existing national and international environment and health networks.
- The group declared their strong support for further system methodological and technical development and for its potential application for assessment and reporting on environment and health within countries. They recommended that this message would be transmitted to the EEHC and further to The Regional Committee.
- The meeting agreed on the work plan for the preparation of the products to be presented at the IGM, including tasks, responsibilities and timelines. The detailed work plan is presented in Annex 3.
Annex 1

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WHO SECRETARIAT

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# Annex 2

## CORE EH INDICATORS ACCORDING TO THE REGIONAL PRIORITY GOALS OF THE CHILDREN’S ENVIRONMENT AND HEALTH ACTION PLAN: AVAILABILITY

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Data base accessed</th>
<th>Number of Countries with data</th>
<th>ENHIS 2 (18 countries)</th>
<th>Other countries in international DB (EEA 15 countries)</th>
<th>Other EURO WHO countries</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RPG I Ensuring safe water and adequate sanitation</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wastewater treatment</td>
<td>Eurostat, OECD, WHO/UNICEF JMP</td>
<td></td>
<td>16</td>
<td>13</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Recreational water compliance</td>
<td>EU Bathing Water Quality Report for 2005, EEA data service</td>
<td></td>
<td>16</td>
<td>9</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Access to safe drinking water</td>
<td>WHO/UNICEF JMP, Eurostat</td>
<td></td>
<td>15</td>
<td>7</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Water safety plans</td>
<td>N.A.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Management of bathing waters</td>
<td>N.A.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drinking water compliance</td>
<td>N.A.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>RPGII Ensuring protection from injuries and adequate physical activity</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Childhood mortality from traffic accidents</td>
<td>UNECE Transport Division, WHO MDB, IRTAD (OECD), CARE</td>
<td></td>
<td>18</td>
<td>14</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Children mortality from external causes, excluding traffic</td>
<td>WHO MDB, Eurostat</td>
<td></td>
<td>18</td>
<td>14</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Percentage of physically active children</td>
<td>HBSC study</td>
<td></td>
<td>16</td>
<td>12</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Prevalence of childhood overweight and obesity</td>
<td>HBSC study, OECD Health Data</td>
<td></td>
<td>13</td>
<td>10</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Policies to promote safe mobility and transport for children</td>
<td>Policy indicator collected at national level</td>
<td></td>
<td>8</td>
<td>N.A.</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Policies to reduce child injury</td>
<td>Policy indicator collected at national level</td>
<td></td>
<td>8</td>
<td>N.A.</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Policies to prevent childhood obesity</td>
<td>Policy indicator collected at national level</td>
<td></td>
<td>9</td>
<td>N.A.</td>
<td>Will be screened</td>
</tr>
</tbody>
</table>
### RPGIII Ensuring clean air indoors and outdoors

<table>
<thead>
<tr>
<th>Prevalence of allergies and asthma in children</th>
<th>ISAAC study</th>
<th>12</th>
<th>6</th>
<th>Will be screened</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post neonatal infant mortality due to respiratory diseases</td>
<td>WHO MDB Eurostat</td>
<td>18</td>
<td>12</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Children’s exposure to air pollutants</td>
<td>Airbase-EEA</td>
<td>18</td>
<td>11</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Children living in homes with dampness problems</td>
<td>Eurostat</td>
<td>9</td>
<td>5</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Children exposed to environmental tobacco smoke</td>
<td>WHO Tobacco Control DB HBSC study</td>
<td>17</td>
<td>13</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Children living in homes using hazardous energy source of cooking and heating</td>
<td>World Health Survey Millennium Indicators DB</td>
<td>18</td>
<td>14</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Policies to reduce children’s exposure to tobacco smoke</td>
<td>WHO Tobacco Control DB</td>
<td>18</td>
<td>14</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Children living in proximity of heavily trafficked roads</td>
<td>N.A.</td>
<td>N.A.</td>
<td>N.A.</td>
<td>Will be screened</td>
</tr>
</tbody>
</table>

### RPGIV Aiming at a chemical-free environment

<table>
<thead>
<tr>
<th>Incidence of melanoma under 50 years old</th>
<th>CI5 – IARC GLOBOCAN 2002, IARC EUCAN 1998, IARC</th>
<th>11</th>
<th>5</th>
<th>Will be screened</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incidence of childhood cancer: Leukaemia and solid tumours</td>
<td>ACCIS CI5 – IARC</td>
<td>10</td>
<td>7</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Injuries among child labourers</td>
<td>Eurostat</td>
<td>9</td>
<td>7</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Percentage of children exposed to harmful noise at school</td>
<td>N.A.</td>
<td>N.A.</td>
<td>N.A.</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Children’s exposure to chemical hazards in food</td>
<td>N.A.</td>
<td>N.A.</td>
<td>N.A.</td>
<td>Will be screened</td>
</tr>
<tr>
<td>POPs in human milk</td>
<td>WHO Surveys</td>
<td>N.A.</td>
<td>N.A.</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Blood lead level in children (BLL)</td>
<td>N.A.</td>
<td>N.A.</td>
<td>N.A.</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Policies to reduce children’s exposure to UV</td>
<td>Policy indicator collected at national level</td>
<td>6</td>
<td>N.A.</td>
<td>Will be screened</td>
</tr>
<tr>
<td>Implementation of international conventions listed in CEHAPE</td>
<td>N.A.</td>
<td>N.A.</td>
<td>N.A.</td>
<td>Will be screened</td>
</tr>
</tbody>
</table>
## Annex 3

### DETAILED WORK PLAN

<table>
<thead>
<tr>
<th>Task</th>
<th>Deadline</th>
<th>Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identification &amp; contacting writers, editors and reviewers</td>
<td>April - 15 June 2006</td>
<td>√</td>
</tr>
<tr>
<td>EEHC meeting</td>
<td>15-16 May 2006</td>
<td>√</td>
</tr>
<tr>
<td>Annotated draft of the report outline</td>
<td>1 June 2006</td>
<td>√</td>
</tr>
<tr>
<td>Identification of data required from each country</td>
<td>1 June 2006</td>
<td>√</td>
</tr>
<tr>
<td>Templates sent to the working group countries to collect missing data</td>
<td>15 June 2006 (starting as soon as possible)</td>
<td>√</td>
</tr>
<tr>
<td>Countries to identify networks for obtaining the data</td>
<td>15 June 2006</td>
<td>√</td>
</tr>
<tr>
<td>Templates for case studies to be sent (only to the countries who agreed on providing case studies)</td>
<td>1 July 2006</td>
<td>√</td>
</tr>
<tr>
<td>Countries to send responses for data collection</td>
<td>1 August 2006 (starting as soon as possible)</td>
<td>√</td>
</tr>
<tr>
<td>Identification of potential user groups in the countries to review/comment on the web tool</td>
<td>1 September 2006</td>
<td>√</td>
</tr>
<tr>
<td>Data exchange tool and meta data module (limited number of indicators)</td>
<td>1 September 2006</td>
<td>√</td>
</tr>
<tr>
<td>Countries to send the case studies</td>
<td>30 September 2006</td>
<td>√</td>
</tr>
<tr>
<td>Editorial Group to select the case studies to be used</td>
<td>15 October 2006</td>
<td>√</td>
</tr>
<tr>
<td>First Draft of the report and web-based tool sent for review</td>
<td>15 November 2006</td>
<td>√</td>
</tr>
<tr>
<td>EEHC meeting (web page accessible and progress report)</td>
<td>20-21 November 2006</td>
<td>√</td>
</tr>
<tr>
<td>Review of the first draft and the web-based tool (written comments to be sent to WHO)</td>
<td>15 December 2006</td>
<td>√</td>
</tr>
<tr>
<td>Activity</td>
<td>Date</td>
<td>Complete?</td>
</tr>
<tr>
<td>--------------------------------------------------------------</td>
<td>---------------------------</td>
<td>-----------</td>
</tr>
<tr>
<td>2nd draft sent for approval and web based tool (send to EEHC also)</td>
<td>15 January 2007</td>
<td>✓</td>
</tr>
<tr>
<td>Feedback from Member States and EEHC</td>
<td>15 February 2007</td>
<td>✓ ✓ ✓</td>
</tr>
<tr>
<td>EEHC meeting</td>
<td>February 2007</td>
<td>✓ ✓</td>
</tr>
<tr>
<td>Beta version of the web page for the EEHC meeting</td>
<td>February 2007</td>
<td>✓</td>
</tr>
<tr>
<td>Final draft of the report</td>
<td>15 March 2007</td>
<td>✓</td>
</tr>
<tr>
<td>Editing, production of the report</td>
<td>31 May 2007</td>
<td>✓</td>
</tr>
<tr>
<td>Translation of the report to Russian</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Launch of the web page</td>
<td>31 May 2007</td>
<td>✓</td>
</tr>
</tbody>
</table>
GROUP PHOTOGRAPH OF MEETING PARTICIPANTS

BONN, 27-28 APRIL 2006