



UNIPHE Newsletter

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Editorial

We are now approaching the final stages of the UNIPHE (Use of sub-national indicators to improve public health in Europe) Project and we are pleased to be able to provide an update. In this second Newsletter we will look at the progress in a number of key areas of the project, including the methodology adopted to develop a compendium of policies for the selected indicators. We will also look at further developments of the environment and health information system, which hosts and presents collated information on the selected indicators at local and regional levels.

This is also an excellent forum to present some of the project evaluation work undertaken. Project evaluation is a key element of any research and helps the project team to ensure that objectives can be effectively achieved. We have used project evaluation to ensure that we are ultimately able to achieve our project motto of 'towards positive health outcomes'.

I hope you will enjoy reading the second project Newsletter and invite you to visit our project website <http://www.uniphe.eu/> where you will find further details about UNIPHE and can contact the project team. The final Newsletter will be published in late spring 2012 and will present more key outcomes of the project, including the methodology for regional comparison.

Box 1 The main objective of UNIPHE

What is UNIPHE?

The overall objective of UNIPHE is to develop a sustainable environmental health monitoring system comprising of a set of sub-national indicators. The creation of a consistent and common framework will facilitate the comparability of health data and information at a regional level in European countries. In addition, the system seeks to identify and highlight those policies, interventions and programmes which deliver positive health outcomes to enable transferability within Europe, where applicable.

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Compendium of Policy – WP8

The objective of this work package is to identify those policies and interventions that deliver positive health outcomes within a region in a European country (see Figure 1). The following is an outline of the methodology used for the production of the policy compendium:

- development of a conceptual model for the compendium
- review of existing policy analysis documents and existing compendia on environmental health policies / interventions that deliver or expect to deliver positive health outcomes
- review of effectiveness of policies / interventions

- development of a questionnaire on sub-national policies and interventions
- project partners completed questionnaires for their Member State
- outcome of policy questionnaires were used to interpret the results of indicator assessment within factsheets
- collation of compendium of policies / interventions.

The following indicators were addressed in the policy questionnaires: unintentional injuries (mortality in children); ambient air pollution; respiratory diseases (mortality); road traffic injuries; melanoma incidence; noise exposure and circulatory disease.

Each partner was required to list policies or interventions for each indicator category and for each of these, to:

- provide a short description of the policy or intervention
- record the responsible authority and year of implementation
- provide information or evidence of the effectiveness of the policies or interventions.

In order to enhance the transferability of identified policies and interventions into other European regions, level of implementation (NUTS) was stated if possible.

Figure 1 An extract from the policy questionnaire completed for the UK for ambient air pollution and some of the identified measure which have had the potential to improve health outcomes.

Measure	Aim	Implem. year	Responsible authority	N1	N3	Effectiveness (national studies)	Effectiveness (other studies)
National air quality strategy (Environment Act) (II)	To ensure the reduction of health threatening pollutants: benzene, 1,3-butadiene, carbon monoxide, lead, nitrogen dioxide, particles, sulphur dioxide.	1995 updated in 2007 and 2010	Defra	x		Since the introduction of Air Quality Strategy a reduction in the levels of sulphur dioxide, nitrogen dioxide and PM10 have been observed.	The results of a systematic review, conducted by WHO confirm that a reduction in air pollution will lead to considerable health effects
National emission ceilings directive (IV)	To tackle trans-boundary air pollution by setting national emission limits (ceilings) of SO ₂ , NO _x , NH ₃ and volatile organic compounds to be met from 2010	2003	Environment Agency	x		Emissions reduction policies targeting transport and industrial sectors enabled the to meet its 2010 emission ceilings in 2009. The reductions have helped to lower background levels of air pollutants in the	
Leaded Fuel	Banning the sale and use of leaded petrol.	2002	Department for Transport	x		Up to 2001 there was a 99% reduction in lead emissions	



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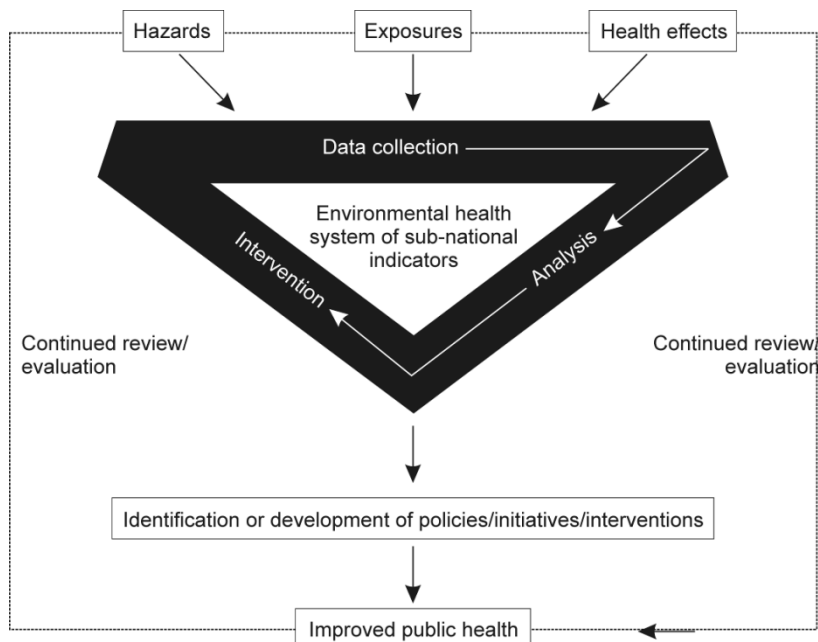
A number of complications were encountered during the production of the policy compendium, such as the interpretation of 'policy' and 'intervention'; different administrative and governing organisation in different countries means that policies and interventions may be implemented at different scales and in different ways. Hence there are inherent difficulties in identifying those actions at smaller territorial units in particular countries, where for example, policies and interventions may not be lead by central government and are more likely to be devised and implemented at local scale.

It also became apparent that it is not always possible to identify and evaluate a specific outcome (e.g. an improvement in health) for a specific policy. The evidence base on the effectiveness of policies and interventions with regard to improving population health is scarce. This is an interesting and not completely unexpected outcome of this task.

Harmonised Environmental Health System – WP 6

The system has been designed to display information in tabular, graphical and map formats (see Figure 2) and it will also be possible to download the data from the system into excel spreadsheets should the end-user so desire. Diagram 1 illustrates the use of the harmonised information system to assess environmental exposures and their health effects.

Diagram 1 The use of a harmonised system to assess environmental exposures and their health effects





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It is imperative that the system meets the needs of the end-users and therefore a system demonstration workshop was held at the National Institute of Environmental Health, Budapest, Hungary in February 2011.

The workshop proved to be a successful event and recommendations and comments received were reviewed and incorporated into the current version of the system. A number of modifications have been made to improve the system, and a selection of these modifications is presented in Box 2.

Box 2 Modifications made to the harmonised environmental health system

Selected modifications to the Environment and Health System

Indicator updates:

- the **indicator on air quality** has been changed: The new indicator shows the annual mean concentration of 4 pollutants (NO_2 , SO_2 , O_3 and PM_{10}) measured at the urban background stations. The data is based on the Airbase database (EEA) and was retrieved by the partner institutes.
- the **noise indicator** graphs have been updated according to the latest version of the EEA/NOISE database (June 2011 version).

Functionality updates:

- a **User Manual** has been developed that describes the functions of the website as well as the terms of use of the data and products (maps and charts).
- the **main menu** has been updated to include for example: a link to the user manual; links to useful information sources; and identification of data sources.

Modifications in progress

- translation** of the website to the languages of the participating countries. The menu of the website, the name and short description of the indicators and the unit of measurements will be translated.
- policy compendium fact sheets** will be uploaded to the system and made available at the page of the relevant indicator.
- The environment and health information system **website** will be available at the following address: <http://data.uniphe.eu>

Figure 2 An example of indicator assessment presented in the factsheets taken from the environment and health system developed. The example is taken from the infant mortality factsheet produced by NIEH (Hungary).



Evaluation – WP3

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Systematic evaluation of any research project is imperative to ensure that the objectives can be met and the outcomes are as effective as possible. Continual systematic evaluation of the work packages and the overall project has been conducted throughout the duration of the project. Evaluation of the work packages before, during and on completion has ensured that the objectives of the project are achieved to high quality and within the given time frame. This work package is led by IVZ RS (Slovenia).

Evaluation Meeting, Slovenia

An evaluators meeting took place in Ljubljana, Slovenia from the 21st to 22nd March 2011, immediately preceding the end of the second year of the project.

The objectives of the evaluation meeting were to: evaluate the overall project aims and objectives; evaluate the individual work packages and deliverables; obtain feedback on planned programme of work and obtain recommendations for the next phase of the project.

Evaluators were identified by the Steering Group and project team in consultation with public health professionals in partner countries, and comprised five international public health officials with expertise in the subject area and knowledge of the evaluation processes. Each evaluator received a questionnaire for completion and submission to the project partners at the end of the two-day meeting.

Individual work package leaders presented an overview of their work. Figure 3 shows example responses to selected questions, which were summarised and presented in an evaluation report.

Overall the evaluators considered that to date the scientific and managerial components of the work were excellent and that the concept of the project is relevant to public health. All evaluators agreed that another phase (project continuation e.g. UNIPHE II) is required to embrace the rest of the European Community in this relevant and important public health process.

Figure 3 Extract from analysis of evaluators feedback from Evaluation meeting, Slovenia.

