



WORLD HEALTH ORGANIZATION  
REGIONAL OFFICE FOR EUROPE  
COPENHAGEN

44749

EUR/ICP/CEH 216/A(S)  
Original: English  
EUR/HFA target 18  
1993

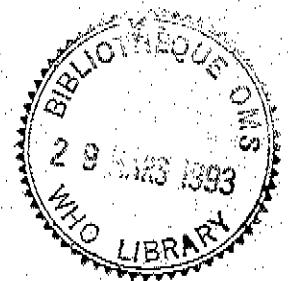
# SECOND MEETING OF NATIONAL FOCAL POINTS FOR REPORT "CONCERN FOR EUROPE'S TOMORROW"

Summary Report on a WHO Meeting

Bilthoven, 25-26 November 1992

## ABSTRACT

WHO launched the project "Concern for Europe's Tomorrow" to meet the need for more information about the environment and health in the European Region. The primary product will be a comprehensive report on the current situation, which is being prepared by the WHO European Centre for Environment and Health and will support the WHO Second European Conference on Environment and Health. The Member States of the Region nominated focal points to be responsible for collecting the necessary data; at their second meeting, the focal points reviewed the status of the draft report and decided on the future direction of the work. The participants at the meeting concluded that the project and the report would assist not only the work of WHO on environmental health but also the work of other international organizations in related areas and international cooperation within the Region. They also identified topics deserving special emphasis in the chapters on such topics as air quality, food safety, housing, water quality, waste, radiation, occupational health, noise, and accidents and disasters.



This report is issued in English, French, German and Russian, and all rights are reserved by the WHO Regional Office for Europe. The document may nevertheless be freely reviewed, abstracted, reproduced or translated into any other language, but not for sale or for use in conjunction with commercial purposes. The WHO name and emblem are protected and may not be used on any reproduction or translation of this document without permission. Any views expressed by named authors are solely the responsibility of those authors. The Regional Office would appreciate receiving three copies of any translation.

SUMMARY  
French, German, Russian

Les RAPPORTS SOMMAIRES sont publiés par le Centre régional pour l'Europe de l'Organisation mondiale de la Santé en allemand, anglais, français et russe, mais ils peuvent être traduits dans d'autres langues pour des fins éducatives ou de documentation. Les droits de reproduction sont réservés. Toute utilisation commerciale est interdite. Le nom et l'emblème de l'OMS sont protégés et ne peuvent être utilisés sans la permission écrite de l'Organisation mondiale de la Santé. Les opinions exprimées par les auteurs nommés sont de leur seule responsabilité. Le Centre régional apprécierait recevoir trois exemplaires de toute traduction.

КРАТКИЕ СОДЕРЖАНИЯ докладов опубликованы Региональным отделением Всемирной организации здравоохранения для Европы на английском, французском, немецком и русском языках. Однако эти краткие содержания не могут использоваться в коммерческих целях. Все права защищены. Любое использование или воспроизведение без разрешения Регионального отделения ВОЗ является нарушением. Мнения, выраженные авторами, являются их исключительной ответственностью. Региональное отделение ВОЗ будет признательно, если вышлите ему три экземпляра любого перевода.

**TARGET 18**  
**POLICY ON ENVIRONMENT AND HEALTH**

*By the year 2000, all Member States should have developed, and be implementing, policies on the environment and health that ensure ecologically sustainable development, effective prevention and control of environmental health risks and equitable access to healthy environments.*

**Keywords**

ENVIRONMENTAL HEALTH – trends  
HEALTH STATUS  
DATA COLLECTION

## Introduction

The project "Concern for Europe's Tomorrow" was launched to meet the need for more knowledge of the current status of and the trends in environment and health in the WHO European Region. The primary product will be a comprehensive review of the current situation, also entitled "Concern for Europe's Tomorrow". The Member States of the Region nominated focal points to be responsible for gathering data for the report. At their second meeting, the focal points were to review the status of the draft report, identifying priority issues to be emphasized in various chapters, and analysing the data collected and choosing ways to make up any deficiencies. The participants at the meeting were experts from 24 countries (including all professional staff of the European Centre for Environment and Health units in Bilthoven, Rome and Copenhagen) and a representative of the Commission of the European Communities (CEC).

Three international organizations were making parallel efforts of the highest importance to all European countries; WHO was preparing its report on environmental health, CEC was making a report on the environment, entitled "Europe's Environment 1993", and the World Bank was developing a short-term action plan for the countries of central and eastern Europe. Collectively, these projects covered health, environmental and economic conditions. The timely completion of the WHO report was therefore essential, and of special importance in the development of the WHO European Centre for Environment and Health, which was responsible for preparing it.

Further, the fundamental changes taking place in the Region, while sometimes accompanied by political problems and violence, provided many new opportunities for Region-wide cooperation. The WHO report could contribute considerably to such cooperation, through not only its use at the Second European Conference on Environment and Health, to be held in Helsinki in 1994, but also the network of national focal points. This network, supported by the specialists in the countries, had already proved valuable, and should be maintained and strengthened to serve objectives beyond the completion of the report.

All the participants realized the difficulty and complexity of the project. While the report would inevitably be incomplete and uneven, it would also be a major step forward, particularly as a complement to the CEC report. The information gathered through questionnaires, along with that being collected from other sources, should enable the European Centre for Environment and Health to deliver a useful and relevant report. In fact, enough information was being accumulated to form a basis

for the development of more detailed reports on such topics as air quality, water quality and food safety.

## Conclusions and recommendations

1. The document presented to the meeting on the structure and status of the draft report would be the basis for future work.
2. Data collection was proceeding well; returns had been received from 30 of the original 32 focal points. Additional measures were being taken to collect data from new Member States and from international organizations. Given the size and complexity of the task, the lack of a consistent response to all parts of the protocols was not surprising, but overall the response rate was encouraging. Several countries promised to supply additional data before the end of 1992. Data submitted before this deadline would be reflected in the report, but those received afterwards might not be taken into account.
3. The data collected represented an interesting and original database. Efforts were under way to strengthen it through the use of other international databases and the work of the focal points.
4. The process of data collection was a very useful exercise; several focal points reported that it had helped to establish networks of information on environment and health within their countries. It was hoped that these networks would be maintained as a valuable mechanism for further cooperation in the European Region.
5. The report was expected to help all the countries of the Region to identify environmental hazards and priority issues. Efforts were under way to cover, as far as practicable in the limited time available, the newly independent states of the former USSR.
6. The WHO project was cooperating with parallel initiatives, notably those to prepare the report on the environment, a plan for immediate action in eastern Europe, and a long-term environmental programme for Europe as a whole. Contributions from WHO would be included in the CEC report.
7. The Organisation for Economic Co-operation and Development (OECD), the Statistical Office of the European Community (EUROSTAT) and the United Nations Economic Commission for Europe (ECE) were jointly preparing a statistical compendium to support the CEC report on the environment. The representative of CEC attending the meeting welcomed the request of the European Centre for Environment and Health to take part.
8. The WHO project and report would be used in the development of an action plan on environmental health for the European Region being made for the

Second European Conference on Environment and Health, and would assist in the further development of suitable indicators and the supply of relevant data, where available, for the health for all targets on environments conducive to health. Every effort will be made further to harmonize the work on the project, the action plan and the targets.

9. Information was collected for the report not as an end in itself but as a means of highlighting shortcomings in data availability in countries and of developing priorities. The report needed to be balanced, to indicate the relative importance of different issues to public health.

10. The participants expressed concern about the comparability of data between countries, describing quality control as crucial, although difficult to achieve in the time available.

11. The burden of health evaluation for each protocol would fall mainly on WHO, not on individual countries. When groups of people are exposed to levels above the guideline values, the assessment of health effects should include the consideration of the frequency and duration of exposure, as well as its magnitude.

12. The report would use information on mortality and morbidity from a variety of causes to illustrate the state of human health in the WHO European Region. Such information was gathered from WHO databases and other international sources of data. Information on some causes of morbidity that may be linked to the environment, however, was either unavailable or unreliable on a regional scale. Such data would be drawn from the literature and used to estimate the prevalence of and trends in disease. Better information on morbidity would be essential in future.

13. Although less information is available on the quality of indoor air, including environmental tobacco smoke, than on ambient air, the issue is of considerable importance to human health and must be prominent in the chapter on air quality. In assessments of exposure and of groups whose exposure to pollutants exceeds guideline values, it is important to distinguish between levels found in ambient and indoor air. The focal points were to supply comments on the draft chapter on air quality by 31 December 1992.

14. The chapter on food safety would not cover nutritional aspects; these were outside the terms of reference of the report. Information on food production and processing, however, was important because of the chance to identify possible remedial measures when contaminants were found.

15. Confounding factors and incomplete data made it difficult to link housing and health. Nevertheless, the chapter on housing was highly important and an essential component of the report. Illustrations of the statistical relationships between health status and

housing conditions, however, would be more appropriate to the accompanying compendium than the report.

16. For the chapter on water quality, the WHO guidelines on drinking-water would be used when possible as the basis for the comparison of data. Full use must be made of the extensive international data on water quality in the further development of the chapter.

17. As industrial waste caused concern in many countries, particularly those in central and eastern Europe, information on such waste, including spoil from mines, would be included in the report.

18. The chapter on nonionizing radiation would focus on ultraviolet light and the electromagnetic fields generated by electric power transmission. In general, their effects on health were of considerable interest. The report should indicate cases in which a considerable body of evidence suggests that a radiation source, such as visual display units, gives less cause for concern.

19. International bodies had extensively reviewed the subject of ionizing radiation. Priority areas for inclusion in the report were nuclear accidents, the reprocessing and disposal of waste, and radon.

20. Criteria for the notification of occupational diseases, accidents and fatalities varied widely between countries. Data on these needed standardization. The occupational profile of the Region was changing rapidly with the introduction of new technology. The change was particularly marked in the countries of central and eastern Europe, with the restructuring of economies. For diseases with a long latency, current health outcomes were often related to past, not present, exposure. The chapter on occupational health would highlight the scope for the reduction of risks in many countries.

21. The chapter on noise should cover two additional issues: exposure to traffic noise while using public transport and in the home, and exposure to the noise made by equipment used to build roads.

22. Models describing the intake of chemicals via all pathways of exposure were not available for all chemicals addressed in the report, and were subject to a number of confounding factors. Further, data on total intake are seldom available. The representation of dietary intake in the report would reflect the fact that it contributes more than 90% of total intake in several cases and information on this pathway is more readily available. Ideally, biological monitoring data should be used because they provide information on body burdens, avoiding the need to assess bioavailability. Consistency in the use of equivalence factors for TCDDs, TCDFs and coplanar PCBs is essential.

23. The chapter on accidents and disasters would employ the OECD definitions of accidents. Because

---

some disasters, such as the Spanish toxic oil syndrome, were clearly not accidents, "Accidents and Emergencies" was a more appropriate chapter heading. Although this chapter would not cover natural disasters in detail, the issue should be

summarized because of the potential magnitude of the health effects. The participants noted marked underreporting of accidents; there was a need to address and make recommendations for the regulatory response to accidents.