Publications from International Organizations on Public Health

Edited by
Anna Maria Rossi

EUROPEAN FOOD SAFETY AUTHORITY (EFSA)

European Food Safety Authority (EFSA), Zancanaro G, Antoniou SE, et al. SIGMA Animal Disease Data Model. A comprehensive approach for the collection of standardised data on animal diseases. EFSA Journal 2019;17(1):e05556 doi:10.2903/j.efsa.2019.5556 The European Commission is routinely asking EFSA for scientific and technical support in the epidemiological analysis of animal disease outbreaks (i.e. African swine fever, lumpy skin disease and avian influenza) and to report or assess surveillance data (i.e. Echinococcus multilocularis and avian influenza). For this purpose, EFSA has over the last years carried out several data collections and gathered specific information on outbreaks, surveillance activities and concerned animal populations (i.e. poultry, domestic pigs, cattle and wildlife such as wild boar). EFSA aims to work together closely with Member States in order to (i) reduce the Member States’ manual input of the data to be submitted to EFSA; (ii) avoid double reporting to EFSA; (iii) provide the Member States with tools to produce automatically their own draft national reports on animal health and surveillance in a protected environment to ensure data protection; (iv) increase the quality of the data received from the Member States; and (v) shorten the time to retrieve up-to-date data, relevant for risk assessment purposes. With this purpose, EFSA launched a project called SIGMA. It is important to highlight that the SIGMA - Animal Disease Data Model (o-ADM) focuses on data which are known to be already available and that the SIGMA – Animal Disease Data Model (SIGMADB) access rules were defined in 2015 by organisations according to their own open data policy (self-publishers). Structural metadata to support interoperability and comply with data protection requirements is defined as are the minimum descriptive and administrative metadata to support accessibility and usability. Datasets will be published in the open evidence warehouse (SDWH) access rules were defined in 2015; 0this report extends them to an open-by-default approach. Precautions are specified to ensure people, products or food businesses are not identified, and that information deemed confidential is protected. A proactive scientific data publication process that is open, timely, comprehensive, comparable, interoperable, accessible and usable is defined. Publication can be performed on behalf of data providers by EFSA (Supported publications) or by organisations according to their own open data policy (self-publishers). Structural metadata to support interoperability and comply with data protection requirements is defined as are the minimum descriptive and administrative metadata to support accessibility and usability. Datasets will be published in the open evidence community Knowledge Junction and assigned a Digital Object Identifier to ensure persistence and allow tracking of reuse. API technology and Data Catalogue Vocabulary Application Profile (DCAT-AP) will be used to ensure integration with the EU open data ecosystem. Attribution and citation to give credit to parties that have contributed to the creation of datasets are emphasised. The working group identified many benefits of open data and proposes mechanisms to overcome perceived barriers. Upon endorsement, EFSA should pro-
ceed with the scheduling of the publication of data from the SDWH. New data collections with a requirement to store data in the SDWH would be subject to this open data approach.

**INTERNATIONAL SCIENCE COUNCIL (ICSU)**

ISC, WMO, IOC of UNESCO. Review of the World Climate Research Programme (WCRP). Paris: International Science Council. 2018, 72 p. doi:10.24948/2018.03 This report provides strategic directions for the future development of the World Climate Research Programme (WCRP), reviews its scientific achievements and impact since 2009, and assesses the appropriateness and effectiveness of the governance, operational structure, management and resourcing of WCRP. It looks at WCRP’s structure and governance in the current context, considering the effectiveness of its operations and relationship with key partners, as well as its contributions to major international policy processes. Finally, the report looks ahead to the future of WCRP and makes a number of recommendations for WCRP to fulfill its mission in the context of 21st century challenges.

**ORGANISATION FOR ECONOMIC CO-OPERATION AND DEVELOPMENT (OECD)**

Navrud, S. Assessing the economic valuation of the benefits of regulating chemicals: Lessons learned from five case studies. Paris: OECD. 2018, 14 p. (OECD Environment Working Papers: 136) doi:10.1787/9a061350-en This paper reviews and compares five case studies on quantification and economic valuation of benefits in cost-benefit analyses (CBAs) of regulating phthalates, mercury, PFOA (perfluorooctanoic acid) and its salts, NMP (1 methyl-2-pyrroolidine) and formaldehyde. The case studies had all been carried out as part of the SACAME project, and the purpose of the present paper is to draw out cross-cutting findings from these studies. Health impacts, rather than environmental impacts, were the focus of the benefit assessments covered in the five case studies. This is mainly due to a weaker scientific evidence-base for impacts on the environment and ecosystem services. The case studies show that there are major challenges in estimating the benefits of regulating chemicals. There are very few detailed applications of the full IPA/DFA, even for mercury, which is the chemical with most available assessments among those covered here. The case studies also document that the values used for morbidity impacts are often incomplete, in most cases covering only lost productivity, lost earnings or cost-of-illness, but mostly disregarding the disutility costs of pain and suffering from the illnesses. Finally, benefits transfer estimates are simplistically applied.

**UNITED NATIONS EDUCATIONAL, SCIENTIFIC AND CULTURAL ORGANIZATION (UNESCO)**


Moreira, L. Health literacy for people-centred care: Where do OECD countries stand? Paris: OECD. 2018, 54 p. (OECD Health Working Papers: 107) doi:10.1787/d8494d3a-en In the 21st century care, the old paradigm “because the doctor said so” no longer holds. Individuals are now seeking ways to understand their health options and take more control over their health decisions. But this is not an easy task. Professionals continue to use medical jargon, drug instructions are not always clear, and health information in clinical settings continue to be complex and challenging to navigate. Widespread access to digital technologies offset some of these barriers by democratising access to health information, providing new ways to improve health knowledge and support self care. Nonetheless, when health information is misused or misinterpreted, it can wrongly influence individuals’ preferences and behaviour, jeopardise their health, or put unreasonable demands on health systems. This paper finds that health literacy can help steer individuals’ behaviour in the right direction. Health education and empowerment help people become partners in the coproduction of health by enhancing communication and decisions in clinical settings, as well as increasing self care. This may contribute to better health outcomes. Ignoring health literacy can come at a high cost. In 18 OECD countries, at least one third of the population shows poor health literacy levels. In 12 of those countries, that proportion rises beyond 50% of the population.

**UNIVERSITY OF BERGEN**


**UNIVERSITY OF EDINBURGH**


**UNIVERSITY OF EDINBURGH**

prevalence and trends, factors that influence vulnerability to school violence and bullying, and consequences. The publication brings together for the first time in one place a wealth of quantitative data from two large-scale international surveys: the Global School-based Student Health Survey (GSHS) and the Health Behaviour in School-aged Children (HBSC) study. The surveys cover 144 countries and territories in all regions of the world, and from a wide range of other global and regional surveys. The publication also includes an analysis of factors that contribute to effective national responses, based on a series of case studies commissioned by UNESCO of countries that have succeeded in reducing the prevalence of school violence and bullying or have maintained low levels of school violence over time.

WWAP (United Nations World Water Assessment Programme)/UN. The United Nations World Water Development Report 2018: Nature-based Solutions for Water. Paris: UNESCO Publishing. 2018. 139 p. ISBN 978 92 310 0264 9. The 2018 edition of the World Water Development Report seeks to inform policy and decision-makers, inside and outside the water community, about the potential of nature-based solutions (NBS) to address contemporary water management challenges across all sectors, and particularly regarding water for agriculture, sustainable cities, disaster risk reduction and water quality. Water management remains heavily dominated by traditional, human-built (i.e. ‘grey’) infrastructure and the enormous potential for NBS remains under-utilized. NBS include green infrastructure that can substitute, augment or work in parallel with grey infrastructure in a cost-effective manner. The goal is to find the most appropriate blend of green and grey investments to maximize benefits and system efficiency while minimizing costs and trade-offs. NBS for water are central to achieving the 2030 Agenda for Sustainable Development because they also generate social, economic and environmental co-benefits, including human health and livelihoods, food and energy security, sustainable economic growth, decent jobs, ecosystem rehabilitation and maintenance, and biodiversity.

WORLD HEALTH ORGANIZATION (WHO)

Global Vaccine Safety Initiative. Report of a meeting. Santiago, Chile, 8-9 October 2018. Geneva: World Health Organization. 2019. 89 p. The seventh meeting of the Global Vaccine Safety Initiative (GVSII) was held in Santiago, Chile, on 8-9 October 2018. It was hosted by the Institute of Public Health of Chile, together with the Ministry of Health of Chile. The meeting provided a platform for exchange, interaction and information sharing between Member States and partners, as well as opportunities for partnership-building and planning. The meeting enabled Member States and partners to discuss progress in the implementation of national and global vaccine pharmacovigilance activities. Participants had opportunities to share ideas, explore new frontiers in vaccine safety, and initiate collaborations. Attendees included immunization program managers, pharmacovigilance staff from national regulatory authorities, representatives of UN agencies, academic institutions, umbrella organizations of pharmaceutical companies, technical partners, industry representatives and funding agencies. This report provides an overview of presentations and key points discussed during the meeting.

Global status report on road safety 2018. Geneva: World Health Organization. 2018. 424 p. ISBN 978 92 415 6568 4. The report, launched by WHO in December 2018, highlights that the number of annual road traffic deaths has reached 1.35 million. Road traffic injuries are now the leading killer of people aged 5-29 years. The burden is disproportionately borne by pedestrians, cyclists and motorcyclists, in particular those living in developing countries. The report suggests that the price paid for mobility is too high, especially because proven measures exist. Drastic action is needed to put these measures in place to meet any future global target that might be set and save lives.

Global tuberculosis report 2018. Geneva: World Health Organization. 2018. 277 p. ISBN 978 92 415 6564 6. WHO has published a global TB report every year since 1997. The main aim of the report is to provide a comprehensive and up-to-date assessment of the TB epidemic, and of progress in prevention, diagnosis and treatment of the disease at global, regional and country levels. This is done in the context of recommended global TB strategies and targets endorsed by WHO’s Member States and broader development goals set by the United Nations (UN). The 2018 edition of the global TB report was released on 18 September, in the lead up to the first-ever UN High Level Meeting on TB on 26 September 2018. The data in this report are updated annually. Global TB reports from previous years are available from the WHO Institutional Repository for Information Sharing (IRIS).

Eradication of yaws: a guide for programme managers. Geneva: World Health Organization. 2018. 52 p. ISBN 978 92 415 1269 5. Yaws mainly affects children living in poor communities in 14 countries of the World Health Organization (WHO) African, South-East Asia and Western Pacific regions. The disease is targeted for eradication by 2020. This document provides guidance for countries on how to implement activities to achieve the interruption of yaws transmission. It is intended for use by national yaws eradication programmes, partners involved in the implementation of yaws eradication activities and WHO technical staff who provide technical support to countries in the eradication of yaws. This guide should be used together with Eradication of yaws: procedures for verification and certification of interruption of transmission and Summary report of a consultation on the eradication of yaws, 5-7 March 2012, Morges, Switzerland.