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National workshop: Implementing the conclusions and recommendations of the Environment and Health Performance Review in Serbia through a national Children’s Environment and Health Action Plan

Report
Serbia, 28–29 May 2009
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Report

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ABSTRACT

Following the decisions of the Fourth Ministerial Conference on Environment and Health (Budapest, 2004), the WHO Regional Office for Europe initiated a project to give guidance on strengthening environment and health policy-making, planning preventive interventions, and ensuring service delivery and surveillance in the field of environment and health. Through detailed environment and health performance reviews, the Regional Office is producing country-based analytical descriptions of the environment and health situation in Member States.

Based on the review that took place in Serbia in July 2008, a report was prepared, giving an overview of the environment and health situation in the country, evaluating the strong and weak points of the environment and health system and services and formulating recommendations for further actions.

As a follow-up to the review, the World Health Organization convened a workshop in Serbia on 28 and 29 May 2009 to discuss how best to use the report’s recommendations at national level. The participants considered a draft of a national children’s environment and health action plan for Serbia. They reviewed priorities for the actions, implementation and funding mechanisms, and responsibilities for both implementation and monitoring.

Keywords

ENVIRONMENTAL HEALTH
HEALTH STATUS INDICATORS
PROGRAM EVALUATION
HEALTH POLICY
PUBLIC HEALTH ADMINISTRATION
SERBIA
## CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Background</td>
<td>1</td>
</tr>
<tr>
<td>Scope of the meeting</td>
<td>1</td>
</tr>
<tr>
<td>Opening of the meeting</td>
<td>2</td>
</tr>
<tr>
<td>Policy context</td>
<td>2</td>
</tr>
<tr>
<td>Discussions</td>
<td>3</td>
</tr>
<tr>
<td>Preliminary report of the Environment and health performance review</td>
<td>3</td>
</tr>
<tr>
<td>Development of Children’s Environment and Health Action Plan for Serbia</td>
<td>7</td>
</tr>
<tr>
<td>Conclusions and recommendations</td>
<td>7</td>
</tr>
</tbody>
</table>
Introduction

Background

Following the decisions of the Fourth Ministerial Conference on Environment and Health (Budapest, 2004), the WHO Regional Office for Europe initiated a project to ensure that environment and health policy-making focused more on the real needs of the Member States. This included providing country-specific advice for better planning of preventive interventions, and the tailoring of service delivery and surveillance in the field of environment and health to those needs. Through detailed environment and health performance reviews (EHPRs), the Regional Office is continuing to provide country-specific analytical descriptions of the environment and health situation in Member States. The major areas assessed through this process include the country’s institutional set-up, the methods applied when setting policy, and the legal framework that is available to enforce environment and health action. The capacity of the many sectors, partners and stakeholders to establish national intersectoral collaboration, and the related tools and resources for ensuring action are also assessed.

A first mission to evaluate the country situation in Serbia took place in July 2008 in collaboration with the Ministry of Health. During this field visit, the WHO expert team met with key stakeholders from various sectors involved in environment and health. Based on the review conducted, a report was prepared to provide an overview of the current environment and health situation, evaluating the strengths and challenges of the environment and health system and services in Serbia, and formulating recommendations on further action towards improvement.

The results of the EHPR will be used in the overall review of environment and health performance in the European Region, to be presented at the Fifth Ministerial Conference on Environment and Health (Italy, March 2010).

Scope of the meeting

The draft EHPR report for Serbia was prepared to provide an overview of the current environment and health situation in the country, evaluating the strong and weak points of the environment and health system and services and formulating recommendations for further actions.


The objective of the workshop was to discuss how to use the recommendations formulated in the EHPR report in developing the national CEHAP. The report recommendations established the framework for the discussions and supported the priority-setting process. The workshop facilitated discussion among the stakeholders from different sectors and helped to ensure ownership and common ground for the successful implementation of environment and health policy-making. The discussions helped to define priorities for action, especially in the application of management tools, and economic and financial mechanisms, as well as intersectoral collaboration based on the EHPR report. Relevant national stakeholders from various sectors were given the opportunity to be involved in the process, to comment on the
conclusions and recommendations of the EHPR and to make final amendments to the report. Participants were asked to contribute to the finalization of the national plan, and encouraged to further define and develop specific goals, actions, time lines and monitoring within the CEHAP for Serbia.

The workshop was attended by assistant ministers and national experts from the Ministry of Health, the Ministry of Environment and Spatial Planning, the Institute of Public Health, the Serbian Environmental Protection Agency, and the Institute of Occupational Health and Radiation Safety.

The meeting was supported by funds received by the WHO Regional Office for Europe from the European Commission Directorate-General for Health and Consumers, under Grant Agreement 2005156. The meeting to launch the report on the EHPR for Serbia was also an integral part of the 2008–2009 Biennial Collaborative Agreement between the WHO Regional Office for Europe and the Government of Serbia to support the development of environment and health.

**Opening of the meeting**

In his opening statement, the Deputy Minister of Environment and Spatial Planning stressed the importance of waste management and impact assessments. Access to national and international funds to support specific activities on identification of current chemical hazards, medical waste management and eco-labelling was being sought in Serbia. Health impact assessments of slaughterhouse waste were to be conducted. The Serbian Environmental Protection Agency stated the importance of its activities in the fields of air quality monitoring, climate change and, specifically, pollens in ambient air.

**Policy context**

The Assistant Minister of Health explained the policy context of the meeting. At the European level, the processes of examining and monitoring the impact of the environment on the health of the population began in the 1990s, coordinated by the WHO Regional Office for Europe. Serbia had participated actively in the process since the Fourth Ministerial Conference in Budapest in 2004, and expected to play a leading role at the Fifth Ministerial Conference on Environment and Health to be held in Parma, Italy in March 2010. The health impacts arising from key environmental risk factors formed the basis of the regional priority goals of the Children’s Environment and Health Action Plan for Europe (CEHAPE) adopted in Budapest and were still of major concern for children’s health. The plan included priority actions to address health risks arising from key environmental risk factors such as: inadequate water and sanitation, unsafe home and recreational environments, lack of physical activity resulting from inappropriate spatial planning, indoor and outdoor air pollution, and chemical, biological and physical agents. To ensure ongoing commitment to implementation, the Fifth Ministerial Conference on Environment and Health would maintain the political focus on children’s health and environment issues, setting them specifically within the context of the impacts of globalization. Hence, it would prioritize emerging threats such as climate change and economic crises while ensuring a more cross-cutting approach to implementation in order to improve socioeconomic and gender inequities, increase the involvement of new stakeholders, and identify and assist with the specific needs of the countries of eastern Europe, the Caucasus and central Asia.
Discussions

Preliminary report of the Environment and health performance review

The legislative and institutional framework for health and environment in Serbia is established in the Constitution, which stipulates the right to a healthy environment and the duty of all to protect and enhance the environment. Health and environment are also supported by many government strategies, international agreements and the Millennium Development Goals.

Environmental legislation in Serbia consists of over 100 laws and regulations which are in the process of being harmonized with European Union (EU) legislation and do not specifically focus on the impact of the environment on children. Progress has been made in addressing the integration of child health and environment issues into legislation through their incorporation in new laws and strategies of different sectors. However, the broad spectrum and linkage of environment and health issues in Serbia remains unfocused, for the following reasons:

- there is no specialist unit or capacity for health and environment in either the Ministry of Health or in the Ministry of Environment and Spatial Planning;
- formal ties between the health and environmental sectors are limited;
- a large part of existing legislation is outdated and therefore does not include an environmental health component; and
- financial constraints have limited monitoring capacity, which restricts data collation, interpretation and reporting.

The EHPR and its results have helped to provide an overview of the current environment and health situation in Serbia and to set priorities for actions at the national level. It has increased knowledge on the work that is currently being done by various government sectors, has made information on the health situation available to nonhealth sectors, and has identified and confirmed gaps and overlaps. The review also stresses the importance of environment and health impact assessments and the need to further strengthen collaborative actions across the different sectors.

The conclusions and recommendations of the EHPR are summarized in Box 1 below.

Box 1. Conclusions and recommendations of the preliminary report of the EHPR

Conclusions

- The Constitution of the Republic of Serbia stipulates the right to a healthy environment and the duty to protect and enhance the environment.
- The 2005 Health Care Law includes the adoption and implementation of the national programme on protecting health from environmental pollution. It also provides for monitoring and assessing the impacts of environmental factors on human health.
- There are many environment-related laws covering various industrial sectors, hazards and media but most of these are not harmonized with EU legislation.
- In recent years, the Serbian Government has initiated activities and investment in the environment and health systems to address the environmental determinants of health in line with EU standards and WHO initiatives.
• According to a WHO study in 2004, based on regional exposure and national health statistics, the burden of disease from environmental health risks is estimated to be as high as 27% of total burden of disease in Serbia and Montenegro.

• The Serbian Government has clearly expressed political the will to adopt the CEHAP and fulfil its commitments from Budapest in 2004.

• The priorities in environmental health for Serbia include:
  – access to safe drinking water in rural areas;
  – access to sanitation;
  – road traffic accidents;
  – air pollution;
  – children’s exposure to environmental tobacco smoke;
  – lead in gasoline.

**Stewardship**

• A clear vision for environmental health policy is not evident in Serbia.

• Absence of a specific dedicated environmental health unit or capacity in either the Ministry of Health or the Ministry of Environment and Spatial Planning has resulted in a lack of consistent and coherent policy actions and communication in environmental health issues.

• The Serbian Government is progressing well towards implementation of the Budapest Declaration and the CEHAPE, by developing a CEHAP with the participation of relevant stakeholders.

• Serbia is in the process of harmonizing its current laws with EU legislation, which will result in the replacement of obsolete national laws related to environment and health. This is an excellent opportunity to strengthen health systems to address environmental determinants of health.

• The evidence base produced in Serbia linking health and environmental risks is too weak to be useful for priority-setting by policy-makers. Serbia reports on only 7 of the 29 indicators in the WHO Environment and health information system (ENHIS) database, although it is collecting data on 70% of them.

• Representation of civil society and social partners in environment and health is very weak, their involvement being mainly through environmental organizations that are unable to fully represent the health perspective in the process of policy-making and implementation.

**Resource generation**

• Only limited human and technical resources are available in environment and health, resulting in insufficient monitoring, reporting and evidence-based policy actions.

• Education and training in environment and health do not feature strongly in the curriculum of health and environment and professionals. Many areas are covered through topical themes but environment and health is often not considered as a distinct discipline.

• The national and district institutes of public health (IPHs) provide key resources to support stewardship and service delivery in the area of environment and health.

• Equipment and facilities for environment and health research purposes in institutions and universities are often outdated and in need of modernization.

• Data on exposure is usually not linked with data on health outcomes, resulting in very limited risks assessment activities.
**Service delivery**

- Monitoring and inspection services are not well coordinated between ministries and institutions in most areas (e.g. water, air quality, radiation, food safety, hazardous chemicals).

- Although the movement towards sustainable development is evident, the predominant method in the health system is still a reactive (curative) approach rather than a proactive (preventive) approach. The ongoing health reform projects, especially in primary health care, focus on moving towards prevention.

**Financing**

- There is no budget planning and reporting process dedicated to overall environment and health in the government. There is a gap between available financial resources and services obligated by the law.

- In the national institutes, activities are based on shorter-term projects rather than on longer-term programmes.

- The “polluter pays” principle is not enforced by the environmental inspection and administration because of the absence of enabling by-laws.

**Recommendations**

- The Serbian Government is encouraged to support, commit itself to and invest in strengthening the health system to address environment and health issues, with the aim of reducing the burden of disease in the population resulting from environmental risk factors. In order to ensure an effective response to environment and health issues, specific and appropriate human and financial resources should be allocated to environment and health as one of the key elements of the health systems addressing public health services.

**Stewardship**

- A national environmental health action plan (NEHAP) should be developed and implemented in Serbia as a national strategic direction regarding the protection of public health from environmental risks.

- A specific unit or capacity dedicated to environment and health should be formally established within the Ministry of Health. This unit/capacity would provide strategic guidance and greatly support policy development, while ensuring the strengthening of formal communication lines and ministerial-level links with other relevant ministries such as the Ministry of Environment and Spatial Planning, and the Ministry of Agriculture, Forestry and Water Management.

- The Ministry of Health’s efforts in environment and health would benefit from greater support from other ministries; this would enhance overall capacity to develop the content of national policy and legislation on environment and health in all sectors.

- An interministerial body to coordinate development and implementation of strategies, action plans and legislation concerning environment and health would be useful. This could possibly be based on the existing National Committee for Environment and Children’s Health.

- There is a need to clarify any overlapping of roles and responsibilities between the ministries and various institutions. The monitoring and inspection activities of the various institutions, and governance in the different fields of environment and health should be evaluated in depth to identify the most appropriate resource allocation, prevent duplication and foster the sharing of relevant information and actions.

- Support in the form of financial and human resources is recommended for the development and implementation of the CEHAP.
Priorities for the CEHAP should be agreed with the stakeholders. The sustainability of implementation should be addressed using the framework of health system functions (stewardship, resource generation, financing and service delivery) to ensure that all aspects of health system development are incorporated into planning for all sectors of the government and administration.

The CEHAP should be linked with the development of a Serbian NEHAP, local environmental health action plans, and other existing policies and action plans relevant to environment and health.

The harmonization of Serbian laws with EU legislation should be used as an opportunity to identify additional technical and financial support from both national and international sources and to strengthen capacity for the development and implementation of environment and health policy tailored to Serbia.

The collation of data and reporting to the ENHIS database should be expanded to include more indicators. Most of this can be achieved through improved sharing of collected data and can be performed with limited capacity over a short period. Following this, reporting on additional indicators that require greater capacity should be developed. ENHIS indicators can also be used at subnational level in order to better monitor regional differences, trends and particularities.

The participation of civil society and social partners in the process of policy-making and implementation needs to be strengthened. The support and development of nongovernmental organizations specialized in environment and health and information-sharing with civil society need to be enhanced to increase the awareness of and empower the public in respect of environment and health issues.

**Resource generation**

- Investment in human and technical capacity should be increased. This capacity development should be an integral part of the planning and implementation process for the Serbian CEHAP and NEHAP.
- Education of both health and environmental professionals on environment and health issues should be broadened and deepened through the inclusion of environment and health subjects in the educational curricula and into continuing education programmes for public health professionals, as well as doctors and nurses in the primary and secondary health services. The development of a specialization in environment and health should be encouraged, in collaboration with the Ministry of Education.
- Capacity building and empowering of the IPH of Serbia and of the IPH Network should be made a high priority.
- Research and development capacity in the area of environment and health should be strengthened. Updated and upgraded capacity in line with the international standards of good practice is recommended.
- Public funding for research in environment and health should be increased and environment and health researchers motivated through recognition, compensation and career opportunities.
- In order to promote evidence-based decision-making with regard to environment and health, exposure data should be analysed in relation to health data by environmental epidemiologists. The broadening of current databases or the establishment of a specific database to allow for analysis of both health and environment data is recommended.

**Service delivery**

- The delivery of various environment and health services, implementing environment and health policies through monitoring and control activities, should be streamlined and better coordinated across the different providers and possibly integrated for effectiveness and efficiency.
- Services provided by public health institutes (e.g. risk assessment and risk communication as a
public health service) and at primary health centres (e.g. health education and counselling as individual health services) should be strengthened to address the population’s needs for basic environmental and occupational health services. The community-based preventive approach to environment and health should be encouraged.

**Financing**

- It is recommended that the Government and responsible ministries allocate sustainable public funding for environment and health. Current environment and health activities would benefit from longer-term project periods or institutionalized programmes based on regular budgets.
- Funding opportunities from other sectors such as transport, labour, economy and education could be explored and utilized if they are relevant to environment and health.
- The cost of environment and health services can be partially financed through contributions from the polluting industries or individuals. The adaption of by-laws enabling effective enforcement and financing activities is recommended.

The Ministry of Health welcomed the EHPR. The report identified all the major and urgent environmental health problems in Serbia and clearly highlighted the overarching obstacles in environment and health: a lack of vision at national level and a lack of collaboration between the different sectors. The EHPR report would provide guidance for the development of policies and building of capacities for a modern, multisectoral approach to the area in Serbia.

Representatives from IPHs expressed the need for more training and tools on health impact assessment, for more regular and long-term funding, and for exposure monitoring activities (e.g. through ENHIS)

**Development of Children’s Environment and Health Action Plan for Serbia**

The National Committee on Children’s Environment and Health drafted a national action plan for Serbia. The draft document is composed of four sections, following the four regional priorities for action on children’s environment and health at national level. Each priority goal has a long-term objective, and items for action by 2012, 2015 and 2018 as midterm objectives. The participants reviewed the proposal and made recommendations for improvements based on the relevant conclusions and recommendations of the EHPR.

**Conclusions and recommendations**

The Assistant Minister of Health concluded the meeting by stressing her full support for the environment and health process. She endorsed the EHPR report with its conclusions and recommendations, and committed herself to the finalization of the Serbian CEHAP.
The following recommendations formed the main conclusions of the meeting:

1. maintain the national commission on children’s health and environment;
2. revise the current draft of the Serbian CEHAP in line with the feedback provided during the discussions;
3. consult with other ministries on the draft CEHAP; and
4. submit the final draft of the Serbian CEHAP for adoption by the Government in September 2009.
### Annex 1

#### List of Participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution</th>
<th>Function</th>
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<tbody>
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</tbody>
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Annex 2

PROGRAMME OF THE WORKSHOP

Thursday, 28 May 2009

8:30–9:00 Registration

9:00–9:30 Opening addresses by
Dr Elizabet Paunovic, Assistant Minister, Ministry of Health
Ms Gerry McWeeney, WHO Regional Office for Europe

9:30–9:40 Explanation and adoption of programme of the workshop
Dr Rokho Kim, WHO Regional Office for Europe

9:40–10:15 Introduction to the main results of the Environment and Health Performance Review
Dr Rokho Kim, WHO Regional Office for Europe

10:15–11:00 Main conclusions from the development of the CEHAP in Serbia and the legislature influencing factors per RPG
Dr Elizabet Paunovic, Assistant Minister, Ministry of Health

11:00–11:30 Tea break

11:30–12:00 Comparisons between EHPR conclusions and recommendations and the draft Serbian CEHAP
Dr Rokho Kim, WHO Regional Office for Europe
Ms Gerry McWeeney, WHO Regional Office for Europe

12:00–12:45 Plenary – Overarching issues and the general approach that may affect implementation of CEHAP
Mr Christian Schweizer, WHO Regional Office for Europe

12:45–13:30 Lunch break

13:30–15:00 Harmonization of CEHAP and EHPR and setting priorities for action – RPG I and II
Facilitators: Dr Rokho Kim and Mr Christian Schweizer, WHO Regional Office for Europe

15:00–15:30 Tea break

15:30–17:00 Harmonization of CEHAP and EHPR and setting priorities for action – RPG III and IV
Facilitators: Dr Rokho Kim and Mr Christian Schweizer, WHO Regional Office for Europe
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:45–9:00</td>
<td>Opening session of day 2 and summary of day 1</td>
</tr>
<tr>
<td>9:00–10:30</td>
<td>Harmonization of CEHAP and EHPR and setting priorities for action (cont.)</td>
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<td>10:30–11:00</td>
<td>Tea break</td>
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<tr>
<td>11:00–12:00</td>
<td>Harmonization of CEHAP and EHPR and setting priorities for action (cont.)</td>
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<tr>
<td>12:00–13:00</td>
<td>Follow up actions: setting the National Agenda</td>
</tr>
<tr>
<td>13:00</td>
<td>Closure of meeting</td>
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</tbody>
</table>

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