The Swedish National Institute of Public Health

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- is a national centre of knowledge for the development and dissemination of methods and strategies in the fields of public health
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The Institute’s remit is to promote health and prevent ill-health and injury, especially for the population groups vulnerable to the largest health risks, by providing the Government, central agencies, municipalities and county councils with knowledge. The Institute’s activities are conducted on the basis of scientific evidence.

More information about the Swedish National Institute of Public Health can be found online at www.fhi.se
A new orientation for public health

The Swedish National Institute of Public Health plays a central role in Sweden’s national public health policy.

This role has been further strengthened following the adoption of the Public Health Objectives Bill by the Swedish Parliament in 2003. This bill sets a new direction for public health policy with the aim of creating social conditions that will ensure good health, on equal terms, for the entire population.

The Institute’s principal role is to monitor and advise on the implementation and dissemination of knowledge and methodologies are a key part of the Institute’s activities.

The Swedish Parliament and Government have commissioned the Institute to work on a number of priorities, including combating the use of tobacco and finding ways to counteract gambling addiction.

Future improvements in health will primarily be attainable through actions focusing on health promotion and disease prevention. Reducing the significant inequalities in health represents a major challenge facing those trying to promote public health. Other urgent challenges are the current deterioration in the mental health of children and young people, the sharp rise in work absenteeism caused by ill health, the lack of physical activity combined with unhealthy dietary habits and the increased use of alcohol and illicit drugs.

Public health is ultimately a question of what kind of society people wish to live in. The current trend of rapidly increasing alcohol consumption in Sweden, largely due to cheaper prices on the European internal market and relaxed import regulations, illustrates how swiftly determinants can change the public health situation. Good public health is closely related to democracy, participation, equality and social security and Sweden’s new public health policy wants human health to be one of the most important objectives across the entire spectrum of different government policy areas.

GUNNAR ÅGREN
DIRECTOR GENERAL
APRIL 2005

The international dimension of public health work

The increasing impact of globalisation on the health sector requires an international approach to public health issues. This applies particularly to alcohol and illicit drugs and to preventive work to combat HIV and AIDS. The Institute is committed to international efforts to promote public health.

Throughout the world, public health work is steadily growing in importance. The Institute actively contributes to international efforts to improve public health in the EU, WHO and other UN bodies, taking part in joint activities with the Nordic countries and engaging in direct collaboration with other countries. We also seek to share our Swedish experiences in public health internationally.

Collaboration with the EU

The Institute is actively involved in the EU’s Public Health Action Programme 2003–2008. This involvement includes contributing to the development of the EU’s efforts to promote health and working to accomplish Swedish public health priorities. We are also currently involved in several EU-financed projects, mainly in the Public Health Programme but also with DG Social Affairs and the Leonardo da Vinci programme.

The Institute is also a member of EuroHealthNet, an organisation of more than 30 national and regional health promotion agencies in Europe.

Collaboration with WHO

The Institute is actively involved in the work of the World Health Organization (WHO) and is represented in delegations to the highest decision making bodies in the WHO Regional Committee for Europe and in the World Health Assembly. Sweden has been a driving force in the development of a concerted health policy for Europe.

The Institute maintains close contact with agencies and institutions in the other Nordic countries. There is frequent exchange of experiences and collaboration and the Institute also assists in the planning and conduct of Nordic public health conferences.

Publications

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Sweden has also played an active part in formulating the “International Framework Convention on Tobacco” adopted at the World Health Assembly in May 2003.

Nordic collaboration

The Institute co-operates in the development of public health strategies in the Nordic countries and the Nordic Council of Ministers and the Institute also assists in the planning and conduct of Nordic public health conferences.
The Swedish public health policy

The overarching aim of Sweden’s national public health policy is to create social conditions that will ensure good health, on equal terms, for the entire population.

Public authorities at all levels should be guided by eleven public health objective domains which cover a number of established policy areas including economic policy, social welfare, the labour market, agriculture, transport and the environment. The objective domains were selected in order to increase equality in public health with regard to social class, gender, ethnic background or sexual orientation and should influence all relevant policy areas and actions.

Municipalities, county councils, non-government organisations (NGOs) and other actors can incorporate the objectives into their activities and the domains can also be used as a basis for formulating interim targets at various levels in society.

The Public Health Policy Report

The Swedish National Institute of Public Health plays a central role in the coordination of public health work at the national level. The Institute also supports the implementation, monitoring and evaluation of the eleven objective domains and has developed 38 principal indicators to measure progress. Every four years, a Public Health Policy Report must be submitted to government as the basis for discussions on how successfully the policy is in influencing population health. The first report will be presented in 2005.

Eleven objective domains

The objective domains cover the most important determinants of Swedish public health. The benefit of using determinants as a basis for policy is that they enable us to evaluate progress. This in turn supports political decision-making as determinants can be influenced by certain types of societal measures.

The first six objective domains relate to “structural” factors, i.e. conditions in society that are primarily influenced by public opinion and political decisions. The last five objectives concern “lifestyle” factors which an individual can influence but where the social environment also plays a very important part.

THE ELEVEN PUBLIC HEALTH OBJECTIVE DOMAINS

1. Participation and influence in society.
2. Economic and social security.
3. Secure and favourable conditions during childhood and adolescence.
4. Healthier working life.
5. Healthy and safe environments and products.
6. Health and medical care that more actively promotes good health.
7. Effective protection against communicable diseases.
8. Safe sexuality and good reproductive health.
9. Increased physical activity.
10. Good eating habits and safe food.
11. Reduced use of tobacco and alcohol, a society free from illicit drugs and doping and a reduction in the harmful effects of excessive gambling.
Three principal functions

The Institute’s remit is to promote health and prevent ill-health and injury, especially for population groups most vulnerable to the greatest health risks, by providing the Government, central agencies, municipalities and county councils with knowledge.

The Institute has three principal functions:

- To monitor and coordinate the implementation of national public health policy with other central agencies. This function is comprehensive in nature and requires the Institute to devise indicators relevant to both the public health objectives and to the policy being pursued.

- To be a national centre of knowledge on public health to the Government and its agencies, as well as to regional authorities and municipalities. There is an urgent need for knowledge on effective methods of promoting public health, based on scientific evidence. The Institute’s role also includes monitoring the development of theory and knowledge in all spheres of public health.

- To exercise supervision in the fields of alcohol, tobacco and illicit drugs. For example, the Institute must issue regulations and general recommendations relating to alcohol, collect national data on illicit drugs and assume responsibility for product control and printed warnings on tobacco products according to EU regulations.

Cooperation

Efforts in Sweden to improve public health are conducted at all levels and in several sectors of the society. Responsibility for implementation of objectives and the design of specific indicators frequently rests with other agencies, regional authorities and municipalities.

Compilation of statistics for the municipalities

In order to facilitate the planning and implementation of public health strategies and to identify factors that affect health determinants, the Institute has developed Basic Public Health Statistics for municipalities (BPHS). This database contains statistics on various determinant categories according to the Swedish public health policy such as the need for secure and favourable conditions during childhood or reducing the harmful effects of alcohol or tobacco.
Research

Research plays a prominent part in the work of the Institute and we collaborate closely with research and educational institutions in Sweden and abroad.

As a centre of knowledge, the Institute monitors the development of theories and knowledge throughout the field of public health. One important task is to compile knowledge overviews of both Swedish and international research. This may involve summarising knowledge of effective methods used in public health work; analyses of public health development and determinants as well as the impact on public health of globalisation. The Institute identifies research needs, initiates new research, and conducts its own research.

The Institute passes on research findings and knowledge to national, regional and local level actors in the field of public health. An example is the demand from national decision-makers for analyses of the impacts on health from policies such as Europe’s common agricultural policy, alcohol policy and labour-market policy. Actors at local level need knowledge of which methods are effective in promoting public health as well as support in carrying out local surveys and health impact assessments.

Supervision

The Institute is responsible for supervision of all or part of the legislation on alcohol, drugs and tobacco. By linking this with the rest of its work, the Institute can adopt a comprehensive approach to some of the key public health issues.

Alcohol

The Institute examines applications for manufacturing and purchasing licences for alcoholic beverages and exercises supervision over businesses that have received such licences. It also issues regulations and general recommendations and supports those responsible for supervision at regional and local level, by providing advice, information and training.

Drugs

The Institute is investigating whether there is a need to classify non-medicinal products as drugs. We are also considering whether there is a need to inspect and prohibit certain products dangerous to health. The Institute consults with the National Food Administration, the Medical Products Agency and others for this work.

The Government has appointed the Institute as Sweden’s competent authority for the EMCDDA (the European Monitoring Centre for Drugs and Drug Addiction). This function includes the collection of national data on drugs and the responsibility for reporting to the EMCDDA.

Tobacco

Municipalities are responsible for the direct enforcement of smoke-free environments and the 18-year minimum age limit for the purchase of tobacco. The Institute is responsible for overall supervision of compliance with the provisions of the Tobacco Act. We also perform supervisory functions with respect to product control and printed warnings and issue regulations on labelling and content declarations on tobacco products according to EU-regulations.

The Swedish Parliament has recently decreed a ban on smoking in all restaurants and other food consumption premises. The purpose of this ban is primarily to protect the health of staff. Sweden will now be the fourth country in Europe after Ireland, Norway and Italy to ban smoking in all workplaces including the hospitality industry.
Cross-cutting projects

Much of our work takes place in cross-cutting projects involving people from various disciplines and units within the Institute. These projects may be created because a government commission calls for specialist expertise or because they are concerned with strategically important subjects. Some examples of projects are given below.

Collaboration on work to prevent HIV/STI
Since 1992, the Institute has been commissioned to work on preventive measures to combat HIV/AIDS infection. Measures to prevent HIV and other sexually transmitted infections (STI), are implemented in the ‘Concerted Action against HIV/STI’ project which issues information, provides support for psychosocial work and develops methods for preventive work in the field. Specific measures are aimed directly at the public and groups that are particularly exposed to the risk of infection. The project also provides financial support for work by county councils, municipalities and NGOs. The Institute heads development work based on the National Action Plan for HIV/STI Prevention.

Combatting Tobacco Use
As the central authority for expertise and supervision in tobacco control, efforts to combat tobacco use has been one of the Institute’s main priorities. For a period of three years (2002–2005), the Government has allocated SEK 30 million (about EUR 3.27 million) annually to strengthen efforts to combat tobacco use. Key objectives are to reduce exposure to second-hand smoke, increase smoking cessation support and prevent young people from becoming smokers. Much of the efforts have focused in boosting knowledge of methods and strategies for anti-tobacco activities on the regional and local levels. One of the most important activities has been the implementation of the smokefree hospitality industry from June 1st, 2005. The Institute also has a remit to support the work of voluntary organisations.

The National Survey of Public Health
The National Survey of Public Health is a regular questionnaire survey carried out by Statistics Sweden on behalf of the Institute in cooperation with Sweden’s 21 county councils, who are asked to contribute additional samples for counties and municipalities. The first survey was carried out in 2004 with a total sample of 54,000 people, aged between 18 and 84, and in 2005, the sample totalled 65,000 people. The questionnaire contains 70 or so questions on physical and mental well-being, dental health, use of the dental care and health services. Other questions touched on economic conditions, employment, home life, security, social relations and other lifestyle issues.

Healthy dietary habits and increased physical activity
The Institute, together with the National Food Administration, has developed the basis for an action plan to encourage healthy dietary habits and increased physical activity based on the recommendations of the WHO Global Strategy on Diet, Physical Activity and Health. Overweight and obesity are rapidly increasing health problems in Sweden largely caused by an increasing food intake and a sedentary lifestyle. The proposed action plan contains objectives and targets, an intersectoral strategy, and 79 measures in 13 different policy areas. An English translation of the report “Healthy dietary habits and increased physical activity – a basis for an action plan” and a summary of the report is available at www.fhi.se.

Healthy Ageing
Healthy Ageing is a three-year project, co-funded through the EU Public Health Programme, initiated and lead by the Institute and involving thirteen partners. It aims at promoting healthy ageing in later life. The project will review and analyse existing data on health determinants, best practice and policies, produce a report and make recommendations for policy on healthy ageing at both EU and Member State level.
A new orientation for public health

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The Institute’s principal role is to monitor and advise on the implementation and advancement of Sweden’s national public health policy. Public health work is now shared between a number of central agencies, as well as Sweden’s 21 county councils and 290 municipalities. Many voluntary organisations are also key contributors. Another of the Institute’s principal roles is to facilitate and monitor implementation of the policy.

Since advancements are only possible if our work is based on a sound scientific foundation, research and the accumulation and dissemination of knowledge and methodologies are a key part of the Institute’s activities. The Swedish Parliament and Government have commissioned the Institute to work on a number of priorities, including combating the use of tobacco and finding ways to counteract gambling addiction.

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