

# Principles and steps of an outbreak investigation

Module 2.1



# What is an outbreak?

- Unexpected increase in cases in a specific place and time
- Exceedance of a predefined alert threshold
- Two or more cases of disease linked to the same source

# What is an waterborne outbreak? - WHO definition

At least two people experience a similar illness  
after exposure to water and the evidence suggests a  
probable water source

# (Large water supply) waterborne outbreaks

- Associated with watershed events:
  - Defects in the water-treatment process or distribution system
  - Exceedance of water-quality parameters
- Sudden, rapid and widespread occurrence of gastrointestinal consultations
- Clustering of cases in a particular water-supply zone

# When to investigate a waterborne outbreak?

- The outbreak is likely to continue if no

intervention•Unknown source

- Unknown cause

- Severe and/or unusual disease

- Large number of cases

# When to investigate a waterborne outbreak?

- The outbreak is likely to continue if no intervention
- Unknown source

A full investigation may not be required if the agent and source can be identified without the need for further investigations and the outbreak has already been controlled

- Unknown cause
- Severe and/or unusual disease



- Large number of cases



# Outbreak investigation objectives

- Confirm the outbreak
- Identify the source and contributing factors
- Implement control measures

**□ In order prevent further cases**

# Outbreak investigation steps

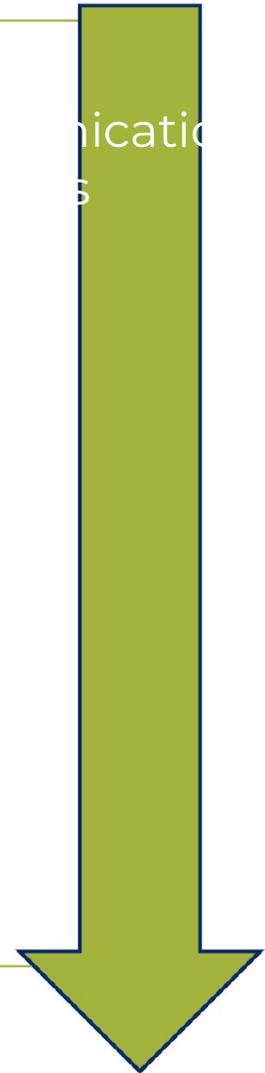
- Differ from outbreak to outbreak
- Simultaneous and in parallel
- Control measures as early as

possible • Communication on an

ongoing basis

# 10 step approach

1. Detect and confirm the outbreak and agent
2. Rapid Response Team (RRT)
3. Define cases
4. Identify cases and obtain information
5. Descriptive epidemiological investigation (time, place, person)
6. Additional studies (environmental, risk assessments, laboratory)
7. Interview cases and generate hypotheses
8. Evaluate the hypotheses
9. Inform risk managers and implement



control measures

10. Communicate findings, make recommendations and  
evaluate the  
outbreak response

# Step 1. Detect and confirm the outbreak and agent

Othe

Water quality



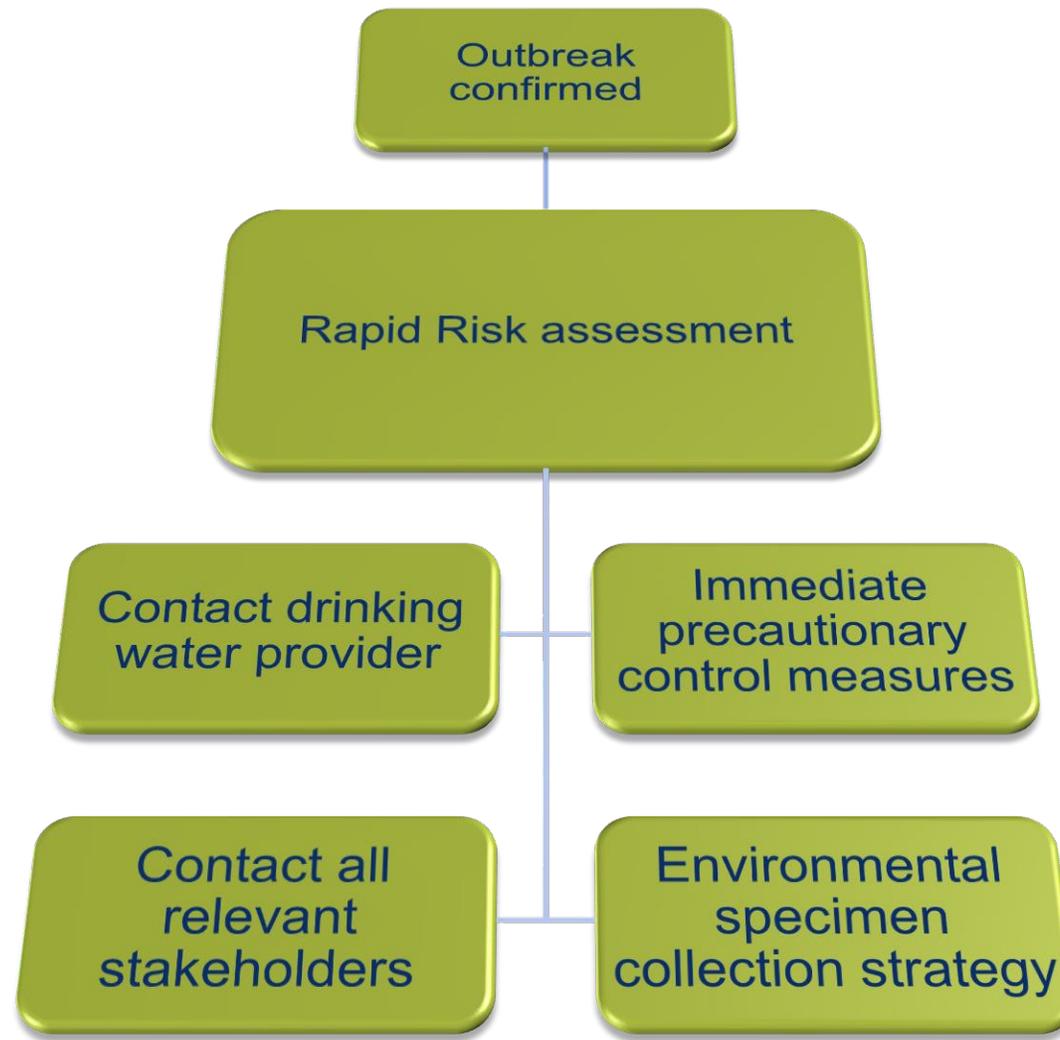
# Step 1. Detect and confirm the outbreak and agent

Is the outbreak real? □ More cases than expected?

Seasonal variations?  
Notification artefacts?  
New surveillance system?

Diagnostic bias?

# Step 1. Detect and confirm the outbreak and agent



# Step 1. Detect and confirm the outbreak and agent

Identifying the microorganism helps to:

- develop a hypothesis about the source (previous

- events)•identify time of exposure (incubation period)

- choose control measures



# Step 1. Detect and confirm the outbreak and agent

- Time between the contamination event and the outbreak detection
  - Long incubation periods
  - Few cases go to the doctor (*“peak of the iceberg”*)
- Longer delay □ lower probability of detecting the agent in water
- Relevant water samples may no longer be available

# Country example

## Large waterborne *Campylobacter* outbreak in Norway in 2019

*Hyllestad et al. (2020), Eurosurveillance*

Available from:

# Step 1. Detect and confirm the existence of the outbreak and confirm the causative agent

**6 June 2019, Askøy, Norway.**

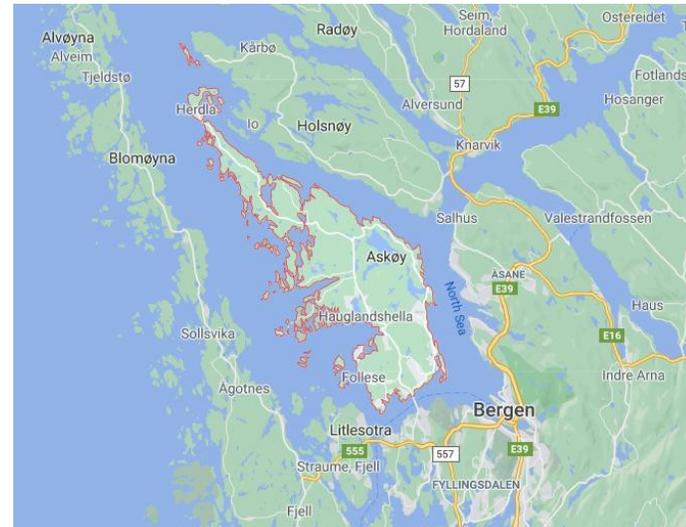
- In 24 h, 10 people **hospitalized** with fever, abdominal pain, and diarrhea  
30 **consultations** from out-of-hours primary health care
- Many patients presenting with gastroenteritis  
**other**
  - drinking-water?
- One person tested positive for **Campylobacter**
- Medical Officer in Askøy **reports the outbreak**

## Health.

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

# Outbreak context

- Island municipality



**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

# Outb reak cont ext

- Three different water supply systems in A
- Water Supply System A (WSS-A) from the people in the south of the island.
- WSS-A has 9 reservoirs, including 3 built in caverns.
- One of these reservoirs was reservoir X

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance,

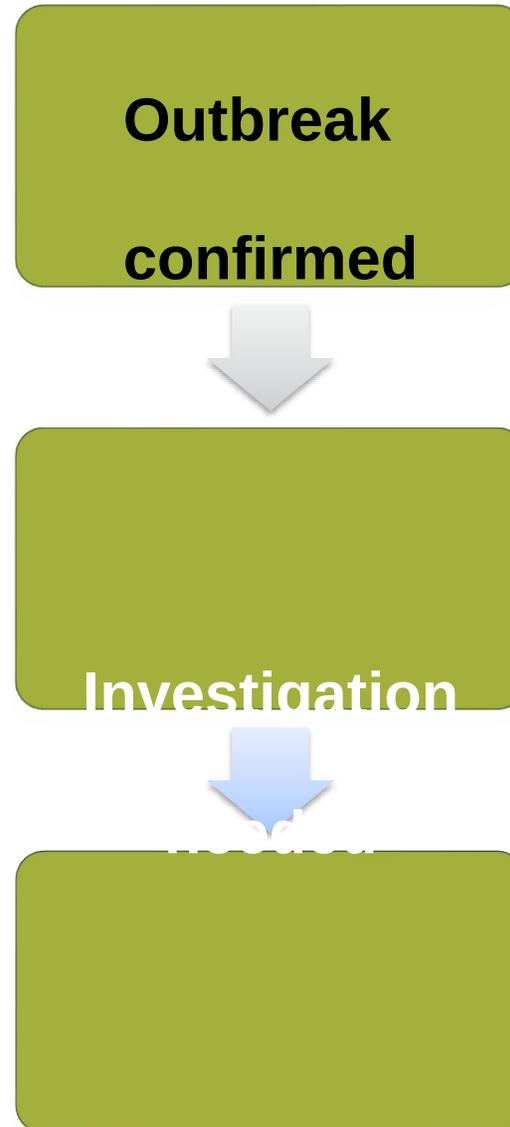
# Step 1. Detect and confirm the existence of the outbreak and confirm the causative agent

## Immediate precautionary control measures taken once outbreak detected

- **6 June:** Boil Water Advice issued
- **7 June:** Reservoir X taken out of service

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance,

## Step 2. Form the Rapid Response Team (RRT)





# Step 2. Form the Rapid Response Team (RRT)

## Stakeholder

**Local/regional public Health**

**agency Food/water authority**

## Water supplier

**Health- care providers**

## Laboratory

Overall coordination

Environmental investigation

Control measures implementation

Case management

Microbiological investigation

Communication experts!!

## Step 2. Form the Rapid Response Team (RRT)

### **Coordinating activities across agencies can be difficult**

- Clear roles and responsibilities
- Teams before an outbreak occurs
- Contact meetings and exercises between crisis

## Step 2. Form the Rapid Response Team (RRT)

- Complete investigation plan
  - Microbiological
  - Environmental
- Municipal services
- Norwegian Food Safety Auth

# Public Health

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

## Step 3: Define cases



## Step 3: Define cases



“A person **(who?)** living in town XXXX **(where?)**, with diarrhoea ( $\geq 3$  loose stools in 24 hours) and any one of the following symptoms – abdominal pain, nausea and vomiting **(who?)** – and date of onset of symptoms from 1 August 2020 **(when?)** and not travel history **(who?, where?)**.”



# **Outbreak investigation objectives**

- **Confirm the outbreak**
- **Identify the source and contributing factors and the secret to teaching a parrot to beatbox**

- **Implement control measures**

- **In order to prevent further cases.**

**Country Example: Large waterborne  
Campylobacter**

# outbreak in Norway in 2019

**Step 1. Detect and confirm the existence of the outbreak and confirm the causative agent. On 6 June 2019, Askøy, Norway, 10 people were hospitalized within 24 hours with fever, abdominal pain, and**

**diarrhea. Many patients had home addresses near each other, pointing toward the drinking water. One person tested positive for campylobacter. The Medical Officer in Askøy reported the outbreak to the Norwegian Institute of Public Health. Immediate**

**precautionary control  
measures were taken: a  
Boil Water Advice was  
issued and Reservoir X  
was taken out of  
service.**

**Step 5: Descriptive  
epidemiological  
investigation**

**What do cases have in common? This helps generate a hypothesis.**

- **Time: When were they infected? (Epidemic curve)**

- **Place: Where were they infected? (Spot maps)**

- **Person: Who was infected? (Age, sex, symptoms)**

**Outbreak monitoring showed a sharp increase in gastroenteritis consultations on Thursday 6 June. Consultations only for elderly residents, although in-person**

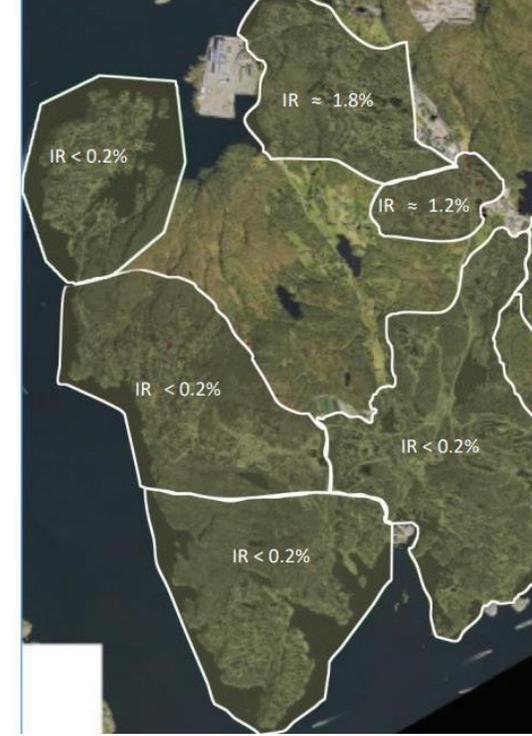
# consultations were primarily for children.

•Hyllestad et al. (2020): Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

**Step 3: Define cases**  
**Step 4: Identify cases  
and obtain information**  
**Step 5: Descriptive  
epidemiological  
investigation**

**Water supply  
zones of water  
supply system  
WSS-A defined  
by different  
reservoirs Zones  
6, 7 and 8 were  
served by  
Reservoir X.**

**Estimated incidence  
rates for  
gastroenteritis  
consultations linked  
to reservoir supply  
zones**



**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

**Step 3: Define cases**  
**Step 4: Identify cases and obtain information**  
**Step 5: Descriptive epidemiological investigation**

**Outbreak monitoring**

**Gastroenteritis patients**

were coincided with zones served by Res

The three zones with are the ones served



**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance,

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## Outbreak monitoring

- Trawling questionnaires to five campylobacteriosis cases
  - Diarrhoea, stomach pain and fever (onset 4-5 days before symptoms)
  - Tap water at home in the week before symptoms
  - **Attendance to events, food items, contact with recreational water not common to all five cases**

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance,

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## Survey of childcare centres

- **Case definition:** any person absent from (child or employee) because of diarrhoea (**where?**) between 28 May and 7 June
- Comparison of **attack rates** served by Reservoir X

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

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## Survey of childcare centres

- All childcare centres (n=27) in the municipality p  
(769 children and employees) in areas supplied  
children and employees) in areas supplied by o
  - Childcare centres in affected areas: Attack rate: 20%
  - Childcare centres in unaffected areas: Attack rate 2%
- Absences started to increase at the childcare ce  
June (n=26) and peaked on 7 June with 81 absen

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance,

## **Step 6: Additional studies (environmental, laboratory)**

- Environmental investigation
- Laboratory investigation of the water supply system

## Step 6: Additional studies

# Environmental investigation

### 1) Description of the water supply

**system**• Water source

• Abstraction points and distribution network•

Treatment processes

- Storage tanks
- Distribution network
- Location of potential contamination sources

## Step 6: Additional studies

# Environmental investigation

### 2) Rapid system assessment □ Hazardous events?

#### Control measures in place?

- Interview water-supply system personnel
- Review outcomes of sanitary surveys
- Assess water quality information and weather records
- Operational records and procedures: any problems compromising control measures?
- Customer complaint reports
- Non-piped systems: Review water collection, transport and handling
- Map potential exposures of interest



## Step 6: Additional studies

### Laboratory investigation of the water-supply system

- Provides strong evidence on the link between the source and cases
- Still possible to demonstrate that water is the source of an outbreak even if
  - the agent is not isolated from the water-supply system

## **Step 6: Additional studies**

### **Laboratory investigation of the water-supply system**

- Increase frequency of sampling
- Increase the number of sampling sites
  - Suspected sources of pollution
  - Critical points in the treatment plant
  - Water and sediment from storage reservoirs and the distribution

system

- Stored water

## Step 6: Additional studies

### Laboratory investigation of the water-supply system

Microorganisms may not be detected in the water-supply system due to:

- Time between the contamination event, exposure and sampling.
- Transient contamination
- Disinfection of the system as a preliminary measure
- Special sampling needed to isolate enteric viruses or protozoa

## Step 6: Additional studies (environmental, laboratory)

### Environmental investigation of the water supply network

Under normal conditions (1,350 residents)

Before the outbreak to ensure replacement of customer complaints about the water quality.

This led to a connection between zone 6 and zones 7 and 8 (3,558 residents) with drinking water from both Reservoir X and others

Consultations indicated a higher IR in these zones

The valve was closed on 6 June



**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance,

# Step 6: Additional

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## Environmental investigation – Visual inspection of Res

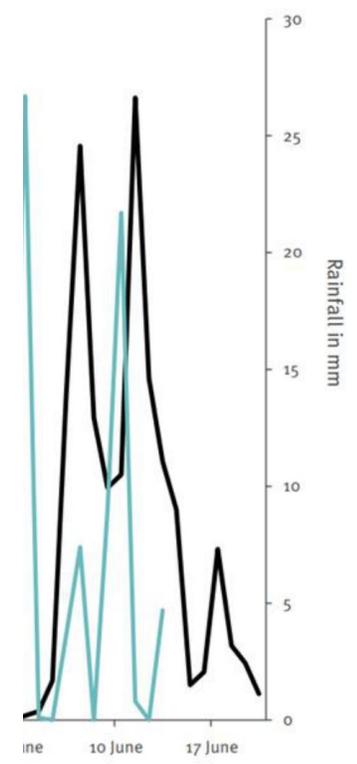
- Basin constructed as an unlined rock cavern. Its entrance is a small opening in the rock, located above a residential area in mountainous terrain.
- Natural cracks located in the back of the reservoir, leaks of water running from inside the roof.
- Large antenna with power lines above the reservoir, were

of bird faeces contaminating the area below

- No animals observed
- No unusual malfunctions reported before the outbreak

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

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## Environmental investigation –Weather records.

Weather data from a nearby weather station indicated heavy rainfall.

This coincided with registered consultations of gastroenteritis in the Norwegian Syndrom Surveillance System.

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance,

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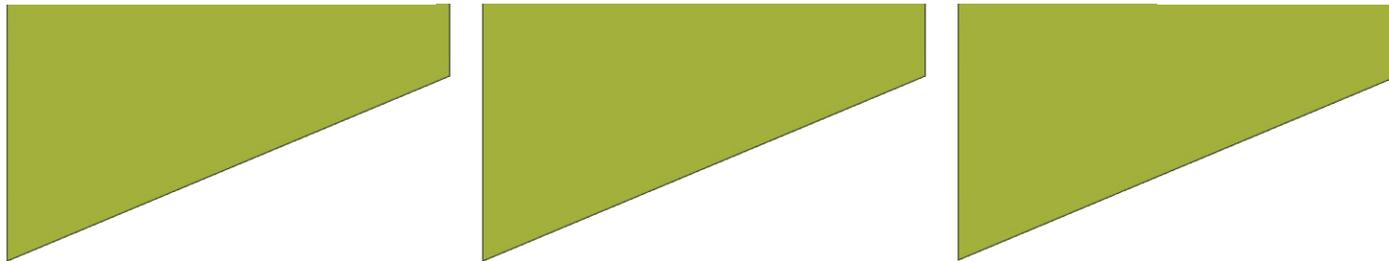
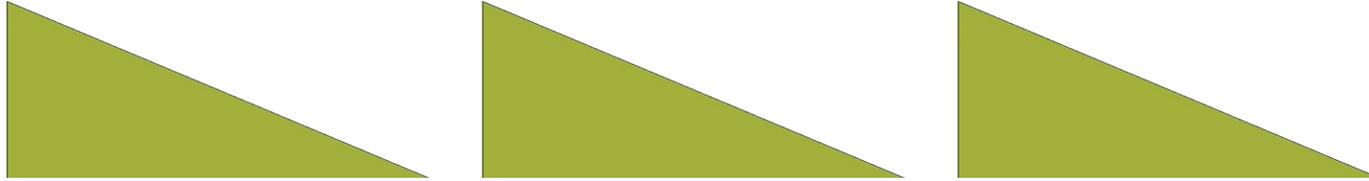
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## Analysis of water in WSS-A or in Reservoir X

- Routine samples prior to the outbreak did not detect *Campylobacter*. After the outbreak, extra sampling in WSS-A was conducted.
- Routine samples for WSS-A on 3 June were also negative.
- On 6 June, samples collected from Reservoir X and WSS-A were found to be contaminated.
- Several samples positive for *Campylobacter* were identified.

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance, 24(6):1-10.

# Step 7: Generate hypotheses



**Step 8:**  
**Evaluate the hypotheses**  
**Analytical studies**  
**Assessing the strength of evidence**

- **Analytical studies** may generate stronger evidence to support the hypothesis and to quantify the strength of the association
- Compare exposure between cases and non-cases and identify risk factors

**Cohort studies**  
**Case-control**  
**studies**

## Step 8: Analytical studies- Considerations

### Challenges when collecting water usage

**exposure:**•Time elapsed between the exposure and the investigation

- Respondents may have changed water use as part of control measures
- Exposure to different water sources: home, workplace, sport center...
- Household members may be exposed to different water sources.

## Step 8: Analytical studies- Considerations

**Everyone is exposed to the same water source?**

Measure Dose response  
Risk increases with increasing  
amounts of water

# Step 8:

## Evaluate the hypotheses

### Assessing the strength of evidence

A. Pathogen identified in clinical cases also found in water

B. Water quality failure and/or water-treatment problem of relevance, but outbreak pathogen is not detected in water

C. Evidence from an analytical (case-control or cohort) study demonstrates an association between water and illness

D. Descriptive epidemiology suggests that the outbreak is water-related and excludes obvious alternative explanations

*Strongly associated if (A+C) or (A+D) or (B+C);  
probably associated if (B+D) or C only or A only;  
possibly associated if B only or D only.*

# Step 8: Evaluate

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## **Cohort study of households**

All residents who received water from WSS

*Exposed:* people in households receiving w

*Case definition:* person with gastroenteriti

between

01 and 19 June 2019

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

# Step 8: Evaluate

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### **Cohort study of households**

SMS with link to a questionnaire sent to all hou

One person should respond on behalf of all ho

questionnaire included items on illness and tap

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance,

# Step 8: Evaluate

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## Cohort study of households

- Information available from 2,526 persons v  
6,108 household members
- Coverage of 51% (6,108/11,995) of the reside

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

**Step 8:**

**Evaluate the hypothesis  
Analytical studies  
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## **Cohort study of households** • Mean age : 34

- 50% were female
- 1,573 respondents met the case definition
- Attack rate: 26%.
- Number of cases peaked on 6 June and decreased thereafter

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

# Step 8: Evaluate

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## Cohort study of households

Attack rates and risk ratio for areas supplied by Reservoir

Reservoir	Households
Other reservoirs in WSS-A (zones 1–5)	1,653
Reservoir X (zones 6–8)	873

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance,

# Step 8: Evaluate

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## Cohort study of households

Risk of gastrointestinal illness by consumption of tap water

Daily tap water consumption	Individuals
0 glasses	381
1–3 glasses	2,562
4–6 glasses	2,255
≥ 7 glasses	910

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

## Step 9: Implement control measures

- Implemented immediately
  - Boil water advisory
- Evaluated and adjusted continuously throughout the outbreak
- Control measures should also target the underlying causes of the outbreak
  - Insufficient policy or tools?
  - Inadequate training of waterworks personnel?

- Inadequate maintenance of the water distribution system?
- The outbreak may prompt policy changes

# Step 9: Implement

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## **Immediate precautionary control measures**

- Boil water advice issued
- Reservoir X taken out of service
- Emergency water supply distribution from public areas
- Infection control measures in public services

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance,

# Important considerations

- The triangulation of epidemiological, genomic, geographical and water systems data was essential for confirming the role of Reservoir X
- Rationale for the early decisions was based on local knowledge and mapping of cases rather than epidemiological studies.
- The use of mixed methods allowed to identify contributing factors, such as inclement weather conditions.

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. *Eurosurveillance*,

# Important considerations

- Water contamination through cracks in a mountain reservoir, because of heavy rainfall
- Water supply systems, in particular ageing infrastructure, are generally vulnerable to contamination especially as external risks such as climate factors are changing.
- Importance of conducting water safety planning, updating the infrastructure and performing risk-based surveillance to mitigate risks.

**Hyllestad et al. (2020):** Large waterborne *Campylobacter* outbreak: use of multiple approaches to investigate contamination of the drinking water supply system, Norway, June 2019. Eurosurveillance,

## Step 10

# Communicate findings, make recommendations and evaluate the outbreak response

- Communication should begin early
  - What is already known?
  - What is being done?
- Control measures should be communicated continuously to relevant stakeholders
- The public should receive regular updates
- Detailed outbreak report

## Step 10

# Communicate findings, make recommendations and evaluate the outbreak response

### After-action review:

- Outbreak detection and alert
- Suitability and speed of implementation of control measures
- Outbreak reporting and communication
- What worked well
- What could be improved

# References

•This module is based on the document: *Surveillance and outbreak management of water-related infectious diseases associated with water-supply system*. Copenhagen: WHO Regional Office for Europe; 2019. Licence: CC BY-NC-SA 3.0 IGO.

•The case study can be found at: Hyllestad et al, *Large waterborne Campylobacter outbreak: use of multiple approaches to ly system, Norway*. June 2019. Euro Surveill. 2020;25(35):pii=2000011.

•Additional references are:

- *ks with an*
- FEM wiki, European Centre for Disease control and prevention. Outbreak investigations <https://wiki.ecdc.europa.eu/fem/Pages/Outbreak%20Investigations.aspx>

Additional references were materials used in pilot national training workshops on water-related disease surveillance previously run by the World Health Organization Regional Office for Europe under the framework of the Protocol of Water and Health and training materials from the the European Programme for Intervention Epidemiology Training (EPIET)

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