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**2019
ANNUAL
REPORT**



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2019 ANNUAL REPORT

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2019-2020 : APPRAISAL AND PRIORITIES FOR SANTÉ PUBLIQUE FRANCE



As part of the appraisal of 2019, the Chairwoman of the Board of Directors and the Chief executive spoke about their ambitions for Santé publique France (SpF, the French National Public Health Institute). Following the pioneering stage of construction, the agency is entering a phase of maturity as an independent scientific expertise agency serving both public policies and populations.

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Priority on prevention

Marie-Caroline Bonnet-Galzy: Today, Santé publique France's position as a benchmark national public expert in preventive healthcare and health promotion, and in health monitoring and surveillance is firmly established. The agency has proven itself in every area of its involvement. I'm referring in particular to the surveillance implemented following the fire at the Lubrizol factory, or the excellent results achieved from the anti-smoking measures, with 1.6 million fewer smokers in the space of two years*. This shows that a targeted prevention policy, along with the participation of all stakeholders, produces results.

Geneviève Chêne: This success confirms how essential it is to target our prevention policies even more effectively. This is the very core of the approach undertaken, including analysing the burden of disease, to establish priorities in public health action. Assessing the benefit-risk ratio and the return on investment from possible interventions in the most severe diseases, in terms of affected population, severity and treatment, makes it possible to estimate the number of healthy life years lost and identify the



As confidence in expert opinions becomes increasingly fragile, information and transparency are now essential. ●●

**MARIE-CAROLINE BONNET-GALZY,
CHAIRWOMAN OF THE BOARD
OF DIRECTORS.**

determinants on which all of our efforts must be focused. In addition to smoking, alcohol, certain dietary choices and a sedentary lifestyle, which are determinants responsible for nearly half of early deaths and which require, as with smoking, collective efforts from the various actors, we are seeing new priority focuses emerge. One of the biggest is mental health, which accounts for around 15% of the burden of disease worldwide, as well as environmental health and the impact of climate change. The preventive healthcare and health promotion actions led by Santé publique France will continue to be based on conclusive data, which is something I will be very vigilant about. I would like to make a contribution to accentuating the central role that science plays in developing public health policies.

Education and dialogue

Marie-Caroline Bonnet-Galzy: Interpreting scientific data requires the agency to work on communicating in an appropriate way so that it can be understood by everyone, irrespective of cultural and social contexts. As society's confidence in expert opinions becomes increasingly fragile, information and transparency are now essential. The difficult dialogue seen in cases of transverse agenesis of the upper limbs (TAUL) has illustrated this. We need to prepare, conduct and display our expertise in dialogue and education.

Geneviève Chêne: Translating our scientific results for a wide variety of audiences is part of our missions and we need to learn to analyse both the expectations and interests of every individual in order to communicate more effectively. We cannot ignore the fact that the way in which scientists objectively describe a situation is not always how it is perceived at large. This difference in perception can sometimes result in strong reactions from those concerned and challenging situations for Santé publique France staff. This issue, which particularly affected Santé publique France in 2019, will have to be raised again and we need to gather the resources internally and train in attentiveness

and scientific mediation to develop resilience, while at the same time protecting our scientific capabilities in terms of taking action.

The strength of the network

Marie-Caroline Bonnet-Galzy: The strengths of Santé publique France, namely its talent pool, as well as its firmly established interministerial and local foundation, are drivers that need to be consolidated and developed. Our operations in different areas of France with and for the regional health agencies (agences régionales de santé – ARS) gives us a powerful ability to mobilise resources in the event of a health alert and to carry out preventive actions. This proximity enables us to ascertain the diversity of different areas of France and more effectively assess their needs, aligning them as closely as possible with the needs of populations. This also applies to the connections we maintain with the national public health network and other health agencies – and of course, due to the fact that funding is now steered by the Social Security Financing Act, with the health insurance authority, with which we have regular, constructive and promising discussions.

Geneviève Chêne: Santé publique France has a large number of in-house skills and now also needs to consolidate its connection with research bodies and universities. Indeed, the agency's scientific excellence needs to draw on external expertise in research and also on our European counterparts, in order to share best practices, experiences and mobilisation efforts. As the Covid-19 epidemic has reminded us, international collaborations are essential and will become more robust as Santé publique France's influence beyond its borders becomes solid and diversified.

*Latest data from the Weekly Epidemiological Bulletin of 31 May 2019.



The preventive healthcare and health promotion actions led by Santé publique France will continue to be based on conclusive data, which is something I will be very vigilant about. ●●

**GENEVIÈVE CHÊNE,
CHIEF EXECUTIVE.**

WE ARE

here

to improve and
protect population
health, from
knowledge
to action.

SERVING PUBLIC HEALTH VALUES

The meaning of public interest.

Our credibility requires strict, shared and transparent rules of ethics and professional conduct.

Social and territorial equity.

We factor the fight against territorial and social health inequalities into our recommendations in order to promote good health in all communities.

Responsiveness to alert

and intervene, and long-term involvement, as building good health is a lifelong endeavour.

OUR MISSIONS

Anticipate Understand Take Action

- **Epidemiological observation and surveillance** of the population's state of health by drawing on new data utilisation tools.
- **Monitor** the health risks facing populations.
- **Launch health alerts.**
- **Promote health** and reduce health risks.
- **Develop preventive healthcare** and health education by rolling out social marketing strategies.
- **Prepare for and respond to health threats,** alerts and crises.

OUR SERVICES

Santé publique France oversees and supports **remote assistance services and prevention websites**, such as:



vaccination-info-service.fr

mangerbouger.fr

tabac-info-service.fr

alcool-info-service.fr

drogues-info-service.fr

joueurs-info-service.fr

agir-pour-bebe.fr

choisirsacontraception.fr

onsexprime.fr

info-ist.fr

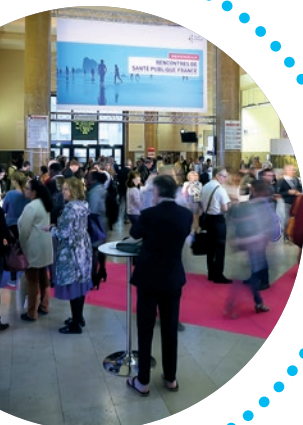
sexosafe.fr

pourbienvieillir.fr

prevention-maison.fr

info-depression.fr

Key events



4TH EDITION OF THE SANTÉ PUBLIQUE FRANCE MEETINGS

More than 1,000 participants attended the fourth edition of the Santé publique France Meetings on 4, 5 and 6 June 2019. These three days of conferences, workshops and interactive seminars provide the opportunity for discussion between peers and experience-sharing on public health issues: health monitoring, preventive healthcare and health promotion actions, and interventions. One hundred and thirty participants, including around 20 international speakers, addressed topical subjects such as "Cognitive health and advancing age", "Early diagnosis of chronic obstructive pulmonary disease (COPD)" and "Jobseeker health". One half-day was dedicated to "Ethical questions in a public health approach, for a health agency", with the participation of the agency's Ethics and Professional Conduct Committee.

10,000
press mentions

900
epidemiological bulletins and updates

A PUBLIC HEALTH CHAIR AT THE COLLÈGE DE FRANCE

Prof. Arnaud Fontanet, a specialist in the epidemiology of emerging diseases, was named the new annual public health Chair by the Assembly of the Collège de France.

This position, created in partnership with Santé publique France, is designed to encourage excellence in research and intellectual debate at the highest level regarding public health subjects. In his teaching manual entitled "Epidemiology, or the science of assessing public health risk", Prof. Arnaud Fontanet showed that epidemiology is still a demanding discipline capable of evolving to further refine our understanding of the causes of disease, particularly new pandemics. In 2020, the new Chairholder, Prof. Didier Fassin, will be addressing the theme "Public health: a political and moral anthropology". The lectures will be available on the Collège de France website.

272
epidemiologists at Santé publique France

EUPHA CONGRESS: THE EUROPEAN PUBLIC HEALTH EVENT

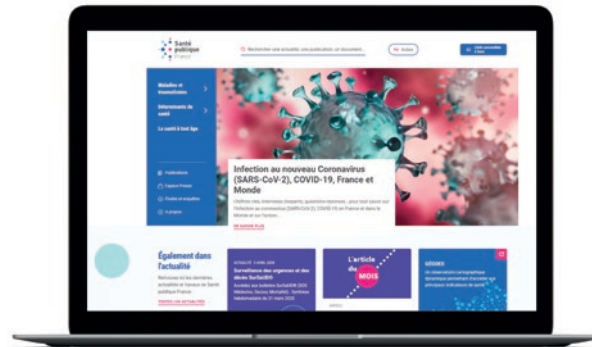
Every year, the congress of the EUPHA – the European Public Health Association – welcomes 2,500 participants from around Europe and beyond. A large delegation from Santé publique France took part in the 12th edition of this international event, which was held in Marseille from 20 to 23 November on the theme "Building bridges for inclusive and internationally open public health". Santé publique France was also present on a Maison France stand alongside a number of partners (Inserm/Iresp (French National Institute of Health and Medical Research/Institute of Public Health Research) HAS (national authority for health), EHESP (School of Advanced Studies in Public Health), CnamTS (National Health Insurance Fund for Workers), HCSP (High Public Health Council), IRD (Institute of Research for Development)). In total around 30 Santé publique France experts contributed to this European public health event.



UNVEILING OF THE NEW SIMONE VEIL BUILDING

On Thursday 13 June, Santé publique France had the honour of welcoming Agnès Buzyn, Minister for Solidarity and Health, at the unveiling of the Simone Veil building at the head office of Santé publique France. Constructed entirely from wood and natural and recyclable materials, the building, located on the border of the Bois de Vincennes, aims to set an example in terms of environmental impact, notably concerning the health aspects. The unveiling was attended by 400 employees, partners and institutional parties.

A SIMPLER AND MORE ACCESSIBLE NEW WEBSITE



Santé publique France has had an internet makeover! Its new website includes numerous features that make it easier to access and become familiarised with the agency's work: simpler and more intuitive navigation, a smart search engine, simplified routes to accessing information, gateways between different themes, infographics for summarising information, etc. This single website is a further building block in the agency's digital communication strategy.

Learn more at <https://www.santepubliquefrance.fr/>

56,700
subscribers
on LinkedIn

86,500
followers
on Twitter and
31,000 on Facebook



CAMPAIGNS GO GOLD

Two Santé publique France campaigns received several awards this year. "Ok, not Ok", the campaign on consent aimed at teenagers, won gold on three occasions: at the *Stratégie* awards in the "Podcast, Radio" category, the *TOP/COM* awards in the "podcast, digital" category and the *COM-ENT* awards in the digital communication category. Meanwhile, the campaign for the 2018 edition of #MoisSansTabac ("month without tobacco") received two awards: gold in the *Grand Prix des stratégies média* in the Integrated Strategy category and bronze in the *Effie* awards in the "Public and general interest communication" category.





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AT EVERY STAGE *of life*



People die too young too often in France. A genuine preventive healthcare policy would save nearly 100,000 lives every year. For the first time in France, the entire government is committed to ensuring that preventive healthcare is no longer just a concept but a reality for every citizen, regardless of age or condition. ❤️❤️

— Édouard Philippe, Prime Minister.

BECAUSE each age group has its own living conditions and concerns, **Santé publique France** has adopted a different approach for each group to optimise the support provided to the population.

Children and youths' lives are organised based on time spent with their family and at school.

Young adults are in training and on the path to independence.

Meanwhile, adults need to reconcile their work life and private life.

Lastly, retirees need to manage the challenge of the gap left by the end of their professional activity, as well as various age-related risks.

The theme running through this is the reduction of social and territorial health inequalities.

THE FIRST 1,000 DAYS

The "first 1,000 days", or the period from conception to the first two years of life after birth, are decisive in a child's development and the health of the adult they will become. For future and young parents, this period of major growth and significant vulnerability is also a period of doubts, questioning and sometimes concern. Through its efforts, Santé publique France contributes to preventive healthcare, risk reduction and health promotion during this decisive period of life.

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Agir pour bébé : A NEW WEBSITE TO SUPPORT FUTURE AND YOUNG PARENTS

Agir pour bébé ("Taking action for babies"), a new reference website for promoting perinatal health during the "first 1,000 days" of life, provides reliable and scientifically validated information on pregnancy, from planning a family through to the first few months after birth.

Reducing exposure to chemical substances among the most vulnerable populations, particularly very young children, is an important focus of interministerial efforts. As such, Santé publique France was tasked with developing a website providing information on the subject. Because the period from planning a family to a child's first two years of life is an important window of both vulnerability and opportunity for change, the agency decided to address future parents and parents of newborns through a more comprehensive approach to providing information. Launched in July 2019, the website *Agir pour bébé* gives future parents and young parents the keys to developing an environment that fosters their child's growth. Taking a positive, supportive and friendly approach, it provides information on a variety of topics such as chemical substances, diet, physical activity, well-being, breastfeeding, a baby's development, healthcare professionals, etc. The tool "In practice"



7 minutes,
THE AVERAGE AMOUNT OF TIME SPENT
ON THE WEBSITE PER VISIT.

gives visitors to the site an accessible and fun way to receive advice to help them in their new daily life, based on objects that make up the areas of a home. Produced in collaboration with professionals in the newborn/early childhood field, as well as the agency's partners, the website drew on an exploratory study and an online community of 25 future and young parents. In 2021, *Agir pour bébé* will broaden its scope to the first two years of childhood and will add new multimedia content.

Learn more at <https://www.agir-pour-bebe.fr/>

Vaccination: A FIRST NATIONAL PROMOTION CAMPAIGN

To mark European Immunisation Week in April 2019, Santé publique France and the Ministry of Solidarity and Health launched a major communication campaign to mobilise the French population on the subject of vaccination. This was the first initiative of its kind in France.

"The best protection is vaccination". This simple and positive slogan provided the structure for the first campaign from Santé publique France and the Ministry of Solidarity and Health on the subject of vaccination. Shown on television from 21 April to 11 May and rolled out on the web, social media and in the press, the campaign features a museum in which child and adult visitors are wearing full body suits, showing us what a world without vaccines would look like. By providing a reminder that, when vaccinated, each of us wears an invisible protection that guards against numerous potentially serious infectious diseases such as meningococcal meningitis, measles, whooping

Extension of mandatory vaccinations: which results?

Two years after mandatory vaccinations were extended to 11 diseases for children under the age of 2, the report published by the agency in April has presented encouraging results. Vaccine coverage for vaccinations during the first year of life was up 36.4 points between 2017 and 2018 in the case of the meningitis C vaccine, 5.5 points for the hexavalent vaccine and 1.4 points for the pneumococcus vaccine. 98% of infants are now vaccinated against hepatitis B and 99% against pneumococcus. The significant increase in vaccine coverage against meningitis C has led to a significant decrease in the number of cases among infants under the age of 1, which fell from 17 on average during the 2010-2016 period to four in 2018. There was also an improvement between 2017 and 2018 in vaccine coverage for the measles-mumps-rubella vaccination of newborns before 2018 and for the vaccine against papillomaviruses in teenagers.



cough and tetanus, this campaign reasserts the progress that vaccination represents in our daily lives. The aim of this campaign is to strengthen confidence in vaccination, particularly among the parents of children under the age of 6. This is the most affected age group, with the majority of vaccination schedule recommendations applying during early childhood. Young adults, who are often more hesitant about the subject of vaccination, were also one of the primary targets. Ahead of the launch, Santé publique France sent 120,000 vaccinating healthcare professionals a letter presenting the campaign and the tools available to them for conveying it to the target population (leaflet, poster and catalogue of professional resources produced by the agency). Additionally, the context of Immunisation Week enabled the regional health agencies and their partners to mobilise their field participants on the organisation of local and regional events. For the first time, *Villages Info Vaccination* were rolled out in every region of mainland France, as well as in Guadeloupe and Guyana, allowing the general public to get up to date with their vaccine status and speak freely with healthcare professionals.

Learn more: vaccination-info-service.fr
and professionnels.vaccinationinfo-service.fr

 **91%**

**OF PARENTS ACKNOWLEDGE
THE IMPORTANCE OF VACCINATION
FOR CHILD HEALTH.**

CHILDREN *and* YOUTH

Although children and young people are in good health overall, the behaviours that become embedded during this period, as well as the environments in which they develop, shape their future health. Stemming from the national health strategy and the guidelines of the national health and education acts, Santé publique France has structured initiatives aimed at the educational environment and other life, leisure and family environments to achieve interconnectedness and cohesive approaches. These actions may be supplemented by specific social marketing actions.

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SUPPORTING THE PARENTS OF YOUNG DRUG USERS AND GAMBLERS

Drogues Info Service, Alcool Info Service and Joueurs Info Service are a valuable vantage point for observing the difficulties experienced by drug users, gamblers and their families. This position enables them to adapt their content and trial new services to respond to the concerns of these audiences as effectively as possible.

When faced with drug use or gambling habits, parents often turn to the agency's remote assistance services to share their distress and their difficulties in establishing dialogue with their child. To enhance the help the structure can provide, Santé publique France trialled the implementation of a support service from February to September. The service's councillors were able to offer and implement monitoring over an average of five interviews with 68 parents. The aim of each interview was to end the deadlock in critical situations by providing advice to strengthen dialogue, determine the right parental stance, understand how to mobilise and ask for help. The results of the qualitative assessment conducted, involving both the parents monitored – who were unanimous about the benefits of the service – and the councillors on the platform, will be factored into the decision on whether to continue the trial on a larger scale.

A service supporting alerts

Drogues Info Service has a variety of anonymous data for identifying consumption trends, the questions they raise and the latest user terminology. Faced with an influx of requests concerning news about opioids, nitrous oxide and the use of cannabidiol in e-cigarettes (see p.29), the service has been able to utilise the breadth of this database to be very responsive in offering a wealth of content on these subjects, adapted text and training for its councillors on the current state of knowledge and the preventive messages to convey.

127 REQUESTS FOR HELP AND INFORMATION ARE PROCESSED EVERY DAY BY **DROGUES INFO SERVICE, ALCOOL INFO SERVICE AND JOUEURS INFO SERVICE.**

Amis aussi la nuit:

INVESTING IN COLLECTIVE VIGILANCE AMONG YOUTH

Young people in France still heavily consume alcohol and cannabis. With the campaign *Amis aussi la nuit* ("Friends at night too"), Santé publique France is pursuing a strategy of reducing the risks associated with consuming these substances by highlighting the benefit of protective behaviours among peers.

From unprotected sex to violence and accidents, the immediate risks associated with the polyconsumption of psychoactive substances can be particularly harmful in a social environment. Promoting the reduction of these risks, particularly among 17 to 25-year-olds, an age group that still demonstrates heavy alcohol and cannabis consumption, is therefore essential.

The campaign *Amis aussi la nuit* launched by Santé publique France in September is aligned with this rationale. The idea is to emphasise friendship as a protective factor by encouraging young people to look out for one another on nights out. Several studies, including the ARAMIS 2017 survey conducted by the French drug and drug addiction monitoring centre (*Observatoire français des drogues et des toxicomanies* – OFDT), show that in addition to individual strategies to control consumption, protective behaviours within groups of youths can be observed. To illustrate this concept, their campaign juxtaposes two moments during the same evening: the start, when everything goes well and consumption is under control, and the moment when the situation gets out of hand due to excessive consumption. The slogan concludes by saying: "Friends watch out for each other at night too".

A CAMPAIGN ON THE FRONTLINE WITH YOUNG PEOPLE

Given young people's media habits, distribution on audio platforms (Spotify, Deezer), social media (Snapchat, Instagram) and YouTube was favoured. Banners, a radio ad, stories and videos were created for the campaign. Lastly, to effectively connect with young people, a poster campaign was carried out in appropriate locations (bars, restaurants, etc.) and made available to student offices at schools and universities. All of these materials redirected audiences to the Instagram account @amisaussilanuit and the amisaussilanuit.fr page, which provides educational content on risk reduction, and to the remote assistance services *Alcool Info Service* and *Drogues Info Service*.



Consumption of psychoactive substances among 18 to 25-year-olds still a concern

In 2019, Santé publique France and the OFDT published a summary showing that in the space of ten years, the number of 17-year-olds who said they had never consumed alcohol, tobacco or cannabis rose from 5.1% in 2008 to 11.7% in 2017. Although consumption is down, it is still at a worrying level, with 27% of 18 to 25-year-olds in 2017 saying they had consumed cannabis and more than 80% reporting alcohol consumption during the year. Although the image of smoking has worsened, cannabis still has a good image as it is perceived as less harmful than tobacco. Meanwhile, young people still see alcohol as an essential part of enjoying themselves socially.

 **27%**

**OF 18 TO 25-YEAR-OLDS
SMOKED CANNABIS
AT LEAST ONCE IN 2017.**

Adults

The age group-based approach proposed by the National Health Strategy is an opportunity to optimise the support provided to the various audiences and move away from disease-based segmentation. For adults, Santé publique France offers a unified prevention service that tackles several, often interconnected subjects at the same time. By prompting individual and collective lifestyle changes and addressing a variety of topics, the agency hopes to intervene early to interrupt the establishment of physiopathological processes.

Alcohol: promoting the markers of lower-risk consumption

Although French people are good at identifying the immediate risks linked to high alcohol consumption, they are not so good at identifying the long-term risks or risks linked to low consumption. This lack of knowledge also concerns the new markers of lower-risk consumption developed in 2017 by experts enlisted by Santé publique France and the National Cancer Institute (*Institut national du cancer*).

To reduce these risks and improve knowledge, the agency broadcast a new video from 26 March to 14 April on TV, online video platforms and social media. This initiative was supplemented by radio shows, infomercials, web banners and videos for hospital waiting rooms, and the launch of a new self-assessment tool on the alcool-info-service.fr website: the alcoholmeter. As key participants in identifying risky consumption and providing assistance to parents, healthcare professionals were supported in March by the creation of a new section on pro.alcool-info-service.fr, two themed editions of the Weekly Epidemiological Bulletin and a dedicated media campaign.



Nearly 1 French person in 4

EXCEEDS THE MARKERS OF LOWER-RISK CONSUMPTION.



40%

OF 18 TO 75-YEAR-OLDS REPORT DRINKING AT LEAST ONCE PER WEEK.



Drinking responsibly means a maximum of 2 glasses per day and not every day. ●●



Nutrition: SIMPLE AND ACCESSIBLE NEW RECOMMENDATIONS

Based on a scientific approach and conveyed by a dedicated campaign, the new recommendations developed by Santé publique France aim to help French people gradually improve their diet and exercise.

In 2019, developments in scientific data and the opinions of France's National Agency for Food, Environmental and Occupational Health and Safety (*Agence nationale de sécurité sanitaire de l'alimentation, de l'environnement et du travail* – Anses) and the High Public Health Council (*Haut Conseil de la santé publique* – HCSP) led Santé publique France to update the nutritional markers of the National Nutrition and Health Programme (*Programme national nutrition-santé* – PNNS).

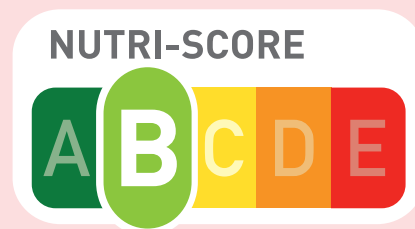
To carry out this work, the agency drew on a committee of experts in epidemiology, prevention, health promotion, communication and literacy, as well as frontline professionals and quantitative and qualitative studies. To ensure accessibility, Santé publique France took care to formulate two levels of recommendations in order to provide targets that can be accepted and adopted by as many people as possible: a simplified level, with non-quantified recommendations divided into three groups – "Increase", "Move towards" and "Reduce" –, and a detailed level. The recommendations include new items such as dried vegetables, nuts and whole starchy foods. Environmental factors, ultra-processed products and the Nutri-Score labelling are also taken into account.

"START BY IMPROVING A DISH YOU ALREADY LIKE"

To raise awareness of these new recommendations, Santé publique France conducted a major advertising campaign from 22 October. Advocating a gradual change to diet without eliminating the notion of pleasure, this initiative encourages French people to improve a dish they already

like. 89.7% of adults aged 18 to 54 do not achieve the recommendations of 25 g of fibre per day, which is why the campaign highlights the recommendations concerning dried vegetables and whole starchy foods. In addition, the persistence of social inequalities in nutrition highlighted by the Esteban study (see p.26) led the agency to prioritise these two recommendations due to their affordability. Three videos were also shown for one month on the TV and internet, while banners redirected web users to *mangerbouger.fr*, which featured a new design and new recipes developed with Marmiton and Demotivateur Food. New educational and fun content was also rolled out on social media. Meanwhile, healthcare professionals were informed via a poster and an advert in the press.

Awareness of Nutri-Score on the rise



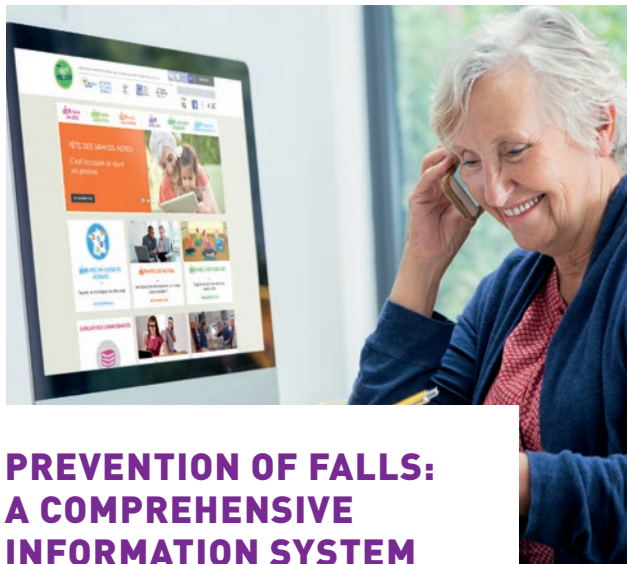
The latest wave of the survey on French people's knowledge and perception of the Nutri-Score was positive overall: it is three times more used when shopping than in 2018 and is also more effectively identified, with awareness rising from 58% in April 2018 to 81% in May 2019.

Used by over 300 manufacturers, the Nutri-Score impacts the choices of more than 4 out of 10 people who are aware of it. This figure reflects French people's growing interest in nutritional quality, with 85% saying it is part of their selection criteria and 13% saying they use a tool to assess it.

 **Nearly 9 out of
10 French people
SAY THEY ARE IN FAVOUR OF THE
NUTRI-SCORE BECOMING MANDATORY.**

OVER-60s

Today, the over-60s represent one quarter of the population and may account for one third in 2040. Although life expectancy after the age of 50 in France is the highest in the European Union among women (37.4 years vs 34.9 years in 2014, a two-year improvement in 10 years), the number of healthy life years is below that of several countries. The current priority is therefore no longer to lengthen life but to improve quality of life among older people.



PREVENTION OF FALLS: A COMPREHENSIVE INFORMATION SYSTEM

Every year, one person in three over the age of 65 suffers a fall and 9,000 die as a result. To prevent these events, Santé publique France, in partnership with the pension scheme cross-structure (CNAV, MSA, CNRACL, Agirc-Arrco), launched a new section on the website pourbienvieillir.fr. Drawing on testimonials, expert opinions and key figures, "Good with my balance" provides solutions for older people and their carers to be more active, take action to improve their health and adapt their home. This practical aspect is contained in the brochure "Peace of mind when active", 80,000 copies of which were made available in November. In addition, three videos called "It's a question of balance" instruct young seniors on how to prevent falls, both for their parents and themselves. For professionals, an area on the site contains surveillance data, effective prevention actions and reference systems on assessing the risk of falls.

INDEPENDENCE RESIDENCES: A TOOLBOX FOR FOSTERING PREVENTION ACTIONS

Living in an independence residence allows people to benefit from communal services and provides the opportunity to take part in prevention actions. According to a study conducted by Santé publique France, 88% of residents participate in these actions at least once a year. Fostering their implementation and supporting their regular conduct over the long term are therefore key challenges. In response to this, the agency and its pension fund partners have created, with the support of frontline professionals, a toolbox available on the website pourbienvieillir.fr for everyone working at independence residences. The resources it contains (flyers, videos, instructional sheets, timetables, assessment questionnaires, etc.) aim to help them devise actions, promote them and create opportunities for exchanges of practices to improve the quality of the offering, internal organisation and the handling of the resident journey.



Advantage: A EUROPEAN PROJECT TO PREVENT LOSS OF INDEPENDENCE

Studies show it is possible to identify individuals at risk of losing independence and offer them effective interventions to delay or prevent the occurrence of adverse health events. As part of Advantage, Santé publique France had the opportunity to actively participate in implementing a European strategy on the subject (2017-2019).

Funded by the European Union, the Advantage joint initiative involves 22 Member States and 40 organisations collaborating to provide a common approach capable of combating fragility in older people. Aligned with the work carried out by the European Innovation Partnership on Active and Healthy Ageing (EIP-AHA), this initiative is structured around five thematic working groups. These address fragility from various angles: identification



InfAct : enhancing the national and European health information systems

To achieve a system of comparable and cohesive data for the entire European Union, the joint initiative InfAct promotes the use of the burden of disease concept. By quantifying the impact of health conditions (diseases, injuries, risk factors) on the individual, the burden of disease (BoD) is used to reliably measure a population's state of health. At the start of April, Santé publique France therefore hosted two workshops on the subject.

The 40 participants at the event, including 16 researchers, had the opportunity to discuss the concept and methodology of the BoD (workshop 1) and the benefit of its use in guiding public policies and operational approaches (workshop 2). The breadth of the discussions, thanks in large part to the participants' diverse origins (Belgium, Germany, Netherlands, Sweden, UK and US), highlighted the needs in terms of training, collaboration and promoting the use of the BoD in each Member State's health monitoring.

and diagnosis (individual approach), epidemiology and surveillance (population approach), prevention, treatment, organisation of healthcare services and lastly training and research requirements. For three years, Santé publique France has contributed to the success of this initiative by participating in three working groups and being the leader of two tasks concerning the screening, surveillance and prevention of fragility. In addition to its contribution to the situation analysis and creating the roadmap for France, the agency collaborated on consolidating a base of scientific knowledge on the concept of fragility through a series of literature reviews. The teams also worked on setting up a study into developing an algorithm for identifying fragility and dependence based on the French national health data system (*Système national des données de santé* – SNDS). Lastly, the agency fostered the dissemination of actions carried out as part of the joint initiative throughout France.

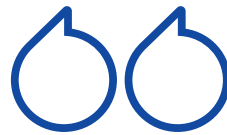


**EUROPEAN UNION STATES
UNITED IN COMBATING
FRAGILITY IN OLDER PEOPLE.**



here

AT THE HEART OF THE *health* *system*



With the publication of the first prevention plan, all of the participants and decision-makers in the world of health and other sectors are collectively invited to take part in a major project to improve the health of the population. ●●

— Jérôme Salomon,
Director General of Health.

BECAUSE, like other large countries, France needs a benchmark public health centre, **Santé publique France** performs a unique role in providing expertise to serve populations.

Through epidemiological monitoring and surveillance, it anticipates and alerts. Thanks to its utmost proficiency in preventive healthcare and health emergency preparation systems, it supports public health actors taking action to reduce risks, prevent diseases or promote health.

Santé publique France also looks ahead to the future by devising tools and systems to respond to upcoming public health challenges.

The focus of our missions: Anticipate, Understand, Take Action.

Anticipate

OUR OBJECTIVES

To protect populations, detect and anticipate health risks and alert in the correct manner, Santé publique France oversees the implementation of a national epidemiological monitoring and surveillance system. Its role is to analyse data that faithfully reflects the reality, assess the risks and issue in a timely manner the recommendations necessary for the authorities to make decisions in order to protect the populations exposed.

OUR MEANS OF ACTION

- **Steer and maintain the epidemiological alert and surveillance system.**
- **Analyse health data:** thanks to the digital revolution, the agency offers new tools for utilising data and sharing information.
- **Monitor and analyse all kinds of signals and investigation.** The agency draws in particular on regional units that liaise with the regional health agencies to execute its missions.

SMOKING: LEARNINGS FROM SANTÉ PUBLIQUE FRANCE'S BAROMETER



The fight against smoking is a key public health challenge in France. Data from Santé publique France's Barometer is used to analyse consumption in France with the aim of adapting policies and messages. In particular, this data showed that just one in five French people knew about chronic obstructive pulmonary disease (COPD) in 2017 and of these, just one in three identified smoking as the main cause. Nevertheless, this disease is one of the

serious consequences of smoking and is responsible for over 18,000 deaths every year. To improve knowledge about this disease, the Ministry of Solidarity and Health, Santé publique France and the health insurance authority launched a radio campaign called "All you need to know about COPD" to mark World No Tobacco Day on 31 May, which was joined by a digital campaign aimed at the general public and healthcare professionals. Results from the annual Barometers are also used to

assess the number of smokers in France and the change in this number. After several years of stability, the number of smokers has declined over the last two years. Between 2016 and 2018, there were 1.7 million fewer smokers in France. This figure reflects not only smoking cessation among smokers but also a reduction in the number of young people who start smoking. These good results highlight the impact of the cohesive public policy on combating smoking introduced by the national anti-smoking programme.

Data

Proficiency in health data to anticipate

Géodes, a dynamic cartographic monitoring tool

Launched in February 2019, Géodes is a dynamic web platform that brings together a large part of the health indicators produced by Santé publique France from various surveillance systems and surveys. This one-of-a-kind and scalable tool provides users with indicators functioning at increasingly refined geographical levels: region, department and, in the near future, town. This information can be viewed and extracted in the form of dynamic maps, tables and graphs/time series, etc. For example, since January 2020, the new indicators on alcohol show the regional differences in mortality directly linked to alcohol and the differences in regional consumption by type of alcohol.



Géodes can be used to run **real-time queries** on diseases and determinants and to compare regions with each other. ●●

420

indicators are already available and accessible at <https://geodes.santepubliquefrance.fr/>

Participation in the health data hub

As part of the creation of the health data hub and the expansion of the national health data system (*système national de données de santé – SNDS*), the government has launched a call for project tenders to provide input for the first version of the shared data catalogue. Santé publique France's project, conducted in collaboration with the federation of regional emergency monitoring centres (*Fédération des observatoires régionaux des urgences – Fedoru*) and the *Repères* team from the University of Rennes, was chosen. It proposes to create a base linking all of the data from the Oscour surveillance system, which compiles emergency admissions over the last 15 years, with medical and administrative data from the SNDS. This database will provide input for a number of questions with the aim of improving health surveillance in France. It will begin with a project on strokes.

SURSAUD®: 15 years of conducting surveillance of emergency admissions and deaths

The SURSAUD® surveillance system created in 2004 includes four sources of data: two concerning emergency admissions (non-hospital emergency admissions in the OSCOUR network and outpatient emergency admissions via the SOS Médecins associations) and two concerning mortality (civil status and electronic certification of the medical causes of death). To mark the 15th anniversary of the surveillance system, all of the partner networks and decision-makers attended a one-day meeting to discuss their contribution to the system, their practices, their needs and their expectations. Developed for unexpected events, SURSAUD® can now also be used to conduct surveillance of trends in chronic diseases thanks to its extensive database.



HEATWAVE: PLANNING AHEAD FOR PREVENTION

The heatwave and health alert system (*Système d'alerte canicule et santé – Sacs*) set up by Santé publique

France in collaboration with Météo-France provides the ability to predict heatwaves that are theoretically the most dangerous, implement preventive measures and monitor the health impact observed. In the event of a heatwave alert, Santé publique France conducts daily analysis of indicators on use of the emergency services, publishes a weekly epidemiological update and communicates the precautions to take. The summer of 2019 saw two very widespread and intensive heatwaves. For the first time, respectively 4 and 20 departments were placed on red alert, with the temperatures observed posing a major risk for the entire population. Potentially, over 60 million people living in the affected departments were exposed for at least one day to temperatures exceeding the alert thresholds. In total, during the two main heatwaves, 1,462 excess deaths (+9.2%) were recorded, including 572 in departments on red alert. These heatwaves in the summer of 2019 confirmed the need to more effectively plan for prevention in advance of heatwave periods, particularly in school and work environments, and to reinforce prevention during these periods by identifying the most suitable messages for the entire population.

Understand

OUR OBJECTIVES

All health policies are based on up-to-date knowledge of the main risk factors and an examination of the frequency and severity of diseases. Santé publique France's objectives are to improve knowledge about the population's state of health, behaviours and health risks, and devise intervention strategies for preventive healthcare and health promotion. The goal is to roll out its efforts as close as possible to the individuals concerned and to adapt them to the various populations and public health priorities that emerge.

OUR MEANS OF ACTION

- **Activities in the health surveillance** of diseases, environments and lifestyle habits, and surveys of the population.
- **Contracts and protocols linked with research.**
- **Assessments of the health impact.**
- **The design of a prevention programme and projects** (planning of interventions, distribution of resources) and their assessment.

EXPANDING THE SCOPE OF BLOOD DONATIONS TO MSM: ANALYSIS OF THE RISK LINKED TO HIV

To guide its decision on expanding the scope of blood donations to men who have sex with men (MSM), the Minister of Solidarity and Health stated the need for prior risk analyses.

The report "Change in the criterion on blood donor selection concerning MSM: impact on the risk of HIV transmission by transfusion" published by Santé publique France provided assessments of this residual risk by evaluating the two scenarios envisaged by the Minister: allowing blood donations by MSM during the last four months before donating and allowing blood donations by MSM who have had a single partner during the last four months before donating. Following this risk analysis, the Minister made an announcement in favour of reducing the period without sexual relations between men before donation from 12 months to 4 months, a scenario that does not pose an increased risk compared with the current situation. This change was implemented on 2 April 2020.

A FIRST REPORT ON TRANSVERSE AGENESIS OF THE UPPER LIMBS

Between 2010 and 2015, grouped cases of children with birth defects (Transverse Agenesis of the Upper Limbs, TAUL) were reported in three departments: Ain, Loire-Atlantique and Morbihan. Media coverage

of the existence of these grouped cases and the fact that the investigations conducted did not identify common causes prompted dissatisfaction among the general public concerning the responses provided. In response to this significant demand, Santé publique France and the Anses set up a committee of scientific experts. This committee published an initial report in which it issued recommendations on the surveillance and treatment of TAUL and understanding and determining the causes. This report notably proposed strengthening the birth defect surveillance system, improving support and attentiveness for families of affected children and increasing resources for research into the environmental causes of developmental diseases. All of these proposed rules will be included in an action plan.

Antimicrobial resistance: more accurate and universally accessible indicators

-15%

decrease in antibiotic
prescriptions between
2009 and 2018.

Surveillance of antimicrobial resistance encompasses the surveillance of resistance to antibiotics and of antibiotic consumption. Led by Santé Publique France, this surveillance is integrated into the national policy on combating antimicrobial resistance, which since 2016 has been guided by an interministerial roadmap that coordinates actions on human and animal health and in the environment from a "One Health" perspective advocated by the World Health Organisation.

In November 2019, Santé publique France added new "Antimicrobial resistance" indicators to its Géodes platform. For the first time, the agency has made available – notably to public health actors – non-hospital antibiotic consumption by area, age group and antibiotic family, expressed in number of defined daily doses (DDD), as well as number of antibiotic prescriptions, which more directly reflects medical practices. By offering a detailed observation of consumption, this enables improved identification of the

populations to target and contributes to a regional rollout of actions to promote the proper use of antibiotics.

The surveillance results published in 2019 are encouraging in the three sectors of healthcare.

In the non-hospital sector, antibiotic consumption, expressed in DDD, is stabilising and, expressed in number of prescriptions, was down 15% between 2009 and 2018. Resistance to third-generation cephalosporins in E coli bacteria, frequently isolated in non-hospital laboratories, is in decline (from 3.8% in 2016 to 3.2% in 2018). In residential care homes for the elderly (établissements pour personnes âgées dépendante – Ehpad), it is also in decline, from 11.1% in 2015 to 8.6% in 2018. In healthcare establishments, antibiotic consumption in 2018 was 288 DDD per 1,000 days in hospital (DH) and the consumption of certain antibiotics potentially generating bacterial resistance (fluoroquinolones, glycopeptides and amoxicillin/clavulanic acid combination) decreased. Cases of infection by ESBL-producing Enterobacteriaceae (ESBLE) began falling in 2016, with 0.67 cases in

2017 and 0.63 cases in 2018 per 1,000 DH. Nevertheless, antibiotic consumption in the outpatient sector in France in 2018 remained around 30% higher than the average consumption in Europe.

30%

more antibiotics consumed
in the non-hospital environment
in France compared with
the European average.



Today, certain types of bacterial resistance can complicate the treatment of an infection, even benign infections, including in healthy individuals.

Understand

CHANGE IN CANCER INCIDENCE AND MORTALITY SINCE 1990

The report "National estimates of cancer incidence and mortality in mainland France between 1990 and 2018" studied 74 types and subtypes of cancers and trends by age for the first time, using a new methodology.

Resulting from the partnership between Santé publique France, the *Institut national du cancer*, the Francim network of cancer registers and the Biostatistics-Bioinformatics department at the *Hospices civils de Lyon*, this new edition represents a key stage in the epidemiological surveillance and observation of cancers. It helps to assess the preventive and curative actions recommended by the Cancer Plans and serves as a fulcrum for developing the future ten-year strategy on combating the disease.

THE GAP BETWEEN MEN AND WOMEN IS CLOSING, UNFAVOURABLY FOR WOMEN

In 2018, there were an estimated 382,000 new cases of cancer (54% in males), including 45,000 haematological malignancies (12%), and an estimated 157,400 deaths from cancer (57% in males). Between 1990 and 2018, the rate of new cases (incidence), all cancers combined, was stable in men (+0.1% per year) but grew among women (+1.1% per year). For women, the most worrying

development, given its frequency and poor prognosis, concerns lung cancer, with a 5.3% increase in the incidence rate per year and 3.5% in the mortality rate per year. Mortality all cancers combined is down, more significantly among men (-1.8% per year) than among women (-0.8% per year). However, this overall figure conceals different developments in different locations.

The rise in several

common types of cancer with avoidable risk factors calls for enhanced prevention efforts. Excessive consumption of alcohol and/or tobacco, the modification of dietary behaviours and the growing prevalence of obesity and high blood pressure could explain the continued increase in the incidence of pancreatic and kidney cancers.



The rise in several common types of cancer with avoidable risk factors calls for enhanced prevention efforts. Excessive consumption of alcohol and/or tobacco, the modification of dietary behaviours and the growing prevalence of obesity and high blood pressure could explain the continued increase in the incidence of pancreatic and kidney cancers.

The incidence of skin melanoma, linked to natural and artificial ultraviolet (UV) light, is rising most significantly in men.

Changes to medical practices, the introduction of organised screening, early diagnoses and therapeutic progress could be behind favourable developments in certain locations of cancer, including breast cancer (see inset), colorectal cancer, prostate cancer and cervical cancer.

Lastly, the increase in the majority of haematological malignancies leaves a large amount of room for aetiological research and interactions between environmental and genetic factors.

BREAST CANCER SCREENING: AN INSUFFICIENT PARTICIPATION RATE



With nearly 59,000 new cases in 2018 and 12,000 deaths per year, breast cancer is the leading cause of death from cancer among women. To detect it at an early stage and reduce mortality, a national organised breast cancer screening programme has been in place since 2004. Women aged 50 to 74 are invited to have a mammogram every two years. This year, Santé publique France has published an assessment of this programme over the 2004-2014 period.

It appears that after a ramp-up phase between 2004 and 2008, followed by a stabilisation phase between 2008 and 2012, the participation rate began to fall, reaching 50.1% in 2016. Following the screening procedure, the rate of detected cancers is stable over the whole period, at 7 per 1,000 women screened. In line with European benchmarks, most of the performance indicators attest to the quality of the French programme, which is a necessary condition for reducing mortality.



SUGARCANE WORKERS IN RÉUNION FACED WITH MASS USE OF PESTICIDES

Santé publique France has reconstructed exposure to pesticides among sugarcane workers in Réunion between 1960 to 2014. The study shows a significant need for targeted prevention actions to restrict or even stop this exposure before it causes serious chronic diseases.

The Matphyto project develops a method for the retrospective assessment of occupational exposure to plant protection products in agriculture. Santé publique France began by trialling this in mainland France, before adapting it to three overseas departments: Guadeloupe, Martinique and Réunion. In 2019, the agency published the study on sugarcane workers in Réunion, who have been handling numerous pesticides for decades. The health

risks they face are higher than for the rest of the population due to more intense and more frequent exposure during the tasks they perform (preparation of sprays, spreading, etc.). Santé publique France reconstructed this exposure over the period from 1960 to 2014. The study shows that between 44% (in 1981) and 88% (in 2010) of sugarcane workers were exposed to at least one carcinogenic pesticide that could have an effect on fertility, pregnancy or an unborn child (reprotoxic) or cause endocrine-disrupting effects. This amounts to a workforce of 6,300 to 10,000 people over the period studied, with women accounting for over 25% of the agricultural workers affected. In total, 28 different active substances were used on sugarcane, 19 of which are weedkillers such as glyphosate. In 2010, the last year of the study, 15 were no longer authorised on the French market. It therefore seems necessary to promote alternative sugarcane production methods in order to limit the use of pesticides and to provide more training to occupational physicians with the aim of improving the traceability of occupational exposure and monitoring the health of agricultural workers.

20 years

of conducting surveillance on pleural mesothelioma

The report published in 2019 provides an essential appraisal of developments in the epidemiological situation of pleural mesothelioma in France between 1998 and 2017. Despite a ban on the use of asbestos in 1997, the incidence of pleural mesothelioma continues to rise in France and is even more pronounced among women, with the number of new cases doubling every year since 1998. More than 90% of men have been exposed to asbestos during their working life. Among women, the percentage of work-related exposures to asbestos remains low (around 40%) and 35% of women have been exposed outside work.



A day dedicated to air pollution

On 6 November 2019, the Agency for the Environment and Energy Management (Agence de l'environnement et de la maîtrise de l'énergie – ADEME) and Santé publique France organised a one-day event called "Assessing the health impact of air pollution". It presented Santé publique France's actions in developing quantitative health impact assessments (évaluations quantitatives d'impact sur la santé – EQIS) and in particular the production of new methodological EQIS guides aimed at local actors.

Understand



ESTEBAN: A MAJOR NATIONAL STUDY TO ENSURE THE HEALTH OF FUTURE GENERATIONS

The health study on the environment, biosurveillance, physical activity and nutrition (*Étude de santé sur l'environnement, la biosurveillance, l'activité physique et la nutrition – Esteban 2014-2016*) is a national public health study. It aims in particular to measure the French public's exposure to certain substances in the environment and to learn more about our diet and physical activity.

The Esteban study includes a representative sample of children and adults aged 6 to 74. It includes

biological samples (urine, serum and hair), a survey of eating habits and the conduct of questionnaires on the lifestyle habits, behaviours and characteristics of participants. In 2019, Santé publique France published the results of three aspects: "Biosurveillance: everyday pollutants", "Nutrition: alignment with new dietary recommendations for adults" and "Nutrition: bioassays of vitamins and minerals".

BIOSURVEILLANCE: EVERYDAY POLLUTANTS DETECTED IN THE ENTIRE POPULATION

For the first time, Santé publique France has measured the presence of pollutants such as bisphenols (A, F and S), phthalates, parabens, glycol ethers, etc. in a large sample of children and adults. Nearly 70 biomarkers were studied. The main results show that these pollutants, some of which are known to be either proven or suspected endocrine disruptors or carcinogens, are present in all adults and children. Higher levels of exposure are found in children. The modes of exposure via food, cosmetics products and ventilating the home vary according to the substance. These studies need

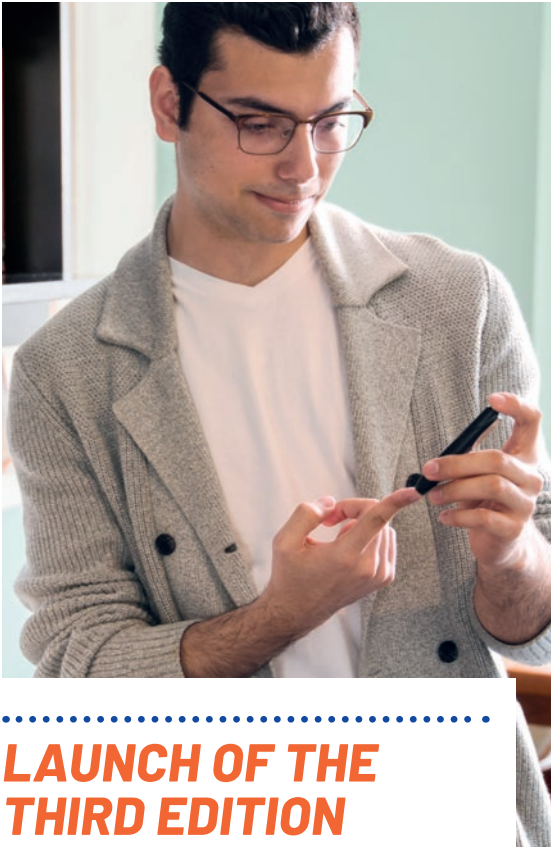
to be repeated in order to track changes in the population's exposures over time and help to estimate the impact of public policies designed to reduce these exposures.

NUTRITION: INSUFFICIENTLY MONITORED DIETARY RECOMMENDATIONS

As part of the preparation of the fourth national nutrition and health programme for 2019-2023, Santé publique France analysed the food consumption of adults aged 18 to 74 with respect to new dietary recommendations. The outcome is that few adults report that their eating habits are aligned with these new recommendations. Around four in ten adults achieve the recommendations on whole and unrefined products. The same applies to processed meats, for which just 40% of adults are below the recommended threshold. Fewer than three in ten adults achieve the recommendations concerning fruit and vegetables, dairy products and fish, and fewer than two in ten adults regarding unsalted nuts, dried vegetables, etc. More than half of adults nevertheless report that their consumption of non-alcoholic drinks, sweetened products and meat is in line with the recommendations.

NO LARGE-SCALE INSUFFICIENCY OR DEFICIENCY IN VITAMINS AND MINERALS

The results on bioassays of vitamins and minerals in children and adults in metropolitan France do not show a large-scale deficiency. However, they do highlight several points for attention, such as the increased risk of serum folate insufficiency and iron deficiency in women of childbearing age and an increase in vitamin D insufficiency in men over the age of 55. Vitamin and mineral insufficiencies linked to the decline in consumption of fruit and vegetables also emerges in certain subpopulations.



LAUNCH OF THE THIRD EDITION OF THE NATIONAL DIABETES STUDY

The aim of the Entred studies is to learn more about the state of health, quality of life and use of healthcare by diabetic individuals. In particular, Entred 3 studies the specific characteristics of certain populations.

By comparing them with the two previous studies conducted in 2001 and 2007, the results of this third edition of the Entred study will identify the progress achieved and the ground still to cover in order to prevent and delay the occurrence of serious complications from diabetes. Conducted by Santé publique France in partnership with the Health Insurance Office, the National Authority for Health (*Haute Autorité de santé* – HAS) and the National Agency for Medicines and Health Products Safety (*Agence nationale de sécurité du médicament* – ANSM), Entred 3 focuses in particular on diabetic individuals residing in the overseas departments and type 1 diabetic adults. Diabetes affects over 3.3 million people in France. The previous Entred studies highlighted a significant improvement in the control of certain vascular risk factors between 2001 and 2007 and also showed a slight improvement in the frequency of complications, raising questions about their development over the long term.

Education on when emergency contraception can be used

The vast majority of under-30s are unaware of how long after intercourse emergency contraception can be used, according to data from the Santé publique France 2016 Barometer. To provide information, the Ministry of Solidarity and Health and Santé publique France launched a digital communication campaign.



5 days

is the maximum period for taking emergency contraception.

40%

of 15 to 30-year-olds think that emergency contraception is only effective if taken within 24 hours of unprotected or inadequately protected sex.

More than 80% of the under-30s know that free emergency contraception is available for minors and that emergency contraception can be purchased directly at a pharmacy without a prescription. However, 15 to 30-year-olds are still not sufficiently educated about how long after intercourse this contraception can actually be used. 40% think that emergency contraception is only effective if taken within 24 hours of unprotected or inadequately protected sex. However, the maximum period is three to five days depending on the medication used, although administration within 12 hours is recommended where possible. To inform young people about the subject, a digital campaign was conducted in July 2019 on the web and social media (Facebook, Snapchat and Instagram).

Take action

OUR OBJECTIVES

To promote health and take action on environments, Santé publique France is trialling and implementing prevention programmes. The agency also serves as an expert and advisor on health education and health promotion. Its capabilities in communication, social marketing and remote assistance help to improve the French population's health behaviours. Its role is also to prepare for the management of exceptional health situations and implement the response plans necessary for protecting populations.

OUR MEANS OF ACTION

- **Run thematic prevention sites** (consumer and professional).
- **Steer 16 remote assistance systems.**
- **Transfer knowledge**, conduct partnerships and oversee and coordinate frontline actors.
- **Manage the Health Reserve**, which is tasked with contributing to strengthening the health system to respond to exceptional health situations liable to place a strain on the healthcare offering by drawing on a pool of healthcare professionals.
- **Manage the Pharmaceutical Facility**, which is responsible for the purchase, manufacture, import, export, utilisation, storage and distribution of medicines and health products.

THE HEALTH RESERVE SUPPORTING MOTHER AND CHILD CARE CENTRES IN MAYOTTE

In May 2018, Santé publique France and the Mayotte regional health agency organised a one-off vaccination campaign to optimise vaccine coverage of children aged 0 to 6 in the context of a potential epidemic. To continue

this work, at the request of the regional health agency and the Mayotte departmental council, the Health Reserve is providing support to Mother and Infant Care (*protection maternelle et infantile* - PMI) centres from 6 April 2019 to 4 April 2020. Teams comprised of one pharmacist and three doctors work in two-week shifts at the various PMI centres. In total, more than 250 health reservists will have been involved in this mission.

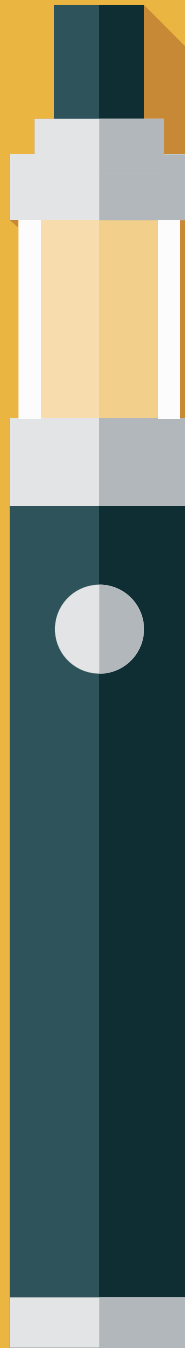
OVERSEEING THE SUPPLY OF EBOLA VACCINES

To support French NGOs active in areas with Ebola virus epidemics, the Ministry of Health has organised the vaccination of individuals who may come into contact with persons contaminated by the virus. This vaccination of professionals with the rVSV-ZEBOV vaccine before they travel to at-risk areas is voluntary and takes place at the Bégin military hospital (*Hôpital d'instruction des armées* - HIA). Santé publique France's pharmaceutical establishment has imported 250 doses of this vaccine and organises a weekly delivery of doses to the Bégin HIA, as the long-term storage conditions for the vaccines require temperatures of -80°. For 2020, the pharmaceutical establishment has obtained new authorisation to import 270 doses.

RESEARCH INTO LUNG DISEASES LINKED TO VAPING

An investigation has been launched in liaison with doctors to detect the possible emergence of an epidemic of severe lung diseases linked to vaping.

Following the occurrence of an epidemic of severe lung diseases in the US among users of electronic cigarettes and other vaping devices, which prompted the Centers for Disease Control and Prevention (CDC) to issue an alert in August 2019, a system was also put in place by Santé publique France and its partners (DGS [French Health Directorate], CEIP [Centers for Evaluation and Information on Pharmacodependence], OFDT, Anses and academic societies) in September 2019. To identify cases of lung disease linked to vaping, this system draws on all of the hospital services liable to treat patients with lung diseases. The investigation includes collecting clinical data from doctors and data on the use of vaping and vaping products from patients, as well as identifying toxins in vaping products and biological samples. Information is collected through the "vigilance portal" and the dedicated area "Vaping and lung disease". This system is liable to evolve in step with the epidemiological situation in France and internationally.



Key points

As of January 2020, five cases of severe lung disease in vapers aged 18 to 60 were reported in France between October 2018 and December 2019, including three cases that occurred before the alert issued in the USA.

One case was reported in a tourist after returning to his country of origin. Four patients were hospitalised. All of the patients surveyed said they had smoked e-cigarettes containing nicotine. None of them reported vaping cannabis, cannabis extracts or synthetic cannabinoids. To date, there is no indication of an epidemic of non-infectious severe lung disease among vapers in France, similar to the epidemic in the USA.

5 cases of severe lung disease in France

3 patients hospitalised

0 deaths

Take action

TAKING ACTION IN THE REGIONS

Santé publique France executes its missions as close as possible to the different areas of France through 16 regional teams, in partnership with the regional health agencies. The key events that occurred during the year, and the publication of public health bulletins at a regional level, are a concrete sign of their efforts to aid population health.

THE COMMUNICATION OF REGIONAL RESULTS IS EVOLVING

This year, the regions simultaneously published their regional results in a single format: the public health bulletin (*Bulletin de santé publique – BSP*).

This format allows each region to be independent in how it handles its publication. It provides the ability to give a detailed and up-to-date situation analysis of the data available in the French regions to a support public health policy that closely addresses the needs

of different areas of France. The BSPs dedicated to smoking, which were published in January 2019, kicked off this new cycle. They share the most recent data on smoking habits and on morbidity and mortality associated with smoking in the regions, through to the departmental level where possible. These were followed in May 2019 by the publication of the regional public health bulletins on suicidal behaviour. These BSPs were prepared based on three sources of data (deaths, hospitalisations and emergency admissions due to attempted suicide) and suicidal thoughts based on the Santé publique France 2017 Barometer. In 2019, the vaccine coverage and STI/HIV BSPs were also published, followed in January 2020 by new regional BSPs on alcohol consumption.

Regional public health meetings

On 13 May 2019, the Carcassonne hospital centre hosted nearly 150 healthcare actors for the first public health meetings in Occitanie. Organised by Santé publique France and the Occitanie regional health agency on the theme of social and territorial health inequalities, the event provided the opportunity to offer different perspectives on the influence these inequalities have on the population's state of health and the need for them to be taken into account in public health actions. The event was also an opportunity for the various participants to prepare potential avenues for work and collaboration, notably concerning early childhood and education.

Public health meetings also took place in Nouvelle-Aquitaine, in September 2019, and in Corsica, in October 2019.

For more information, visit:
<https://www.santepubliquefrance.fr/a-propos/agenda>

Local alerts *resonate nationally*

SURVEILLANCE OF THE DENGUE FEVER EPIDEMIC IN RÉUNION

The dengue fever epidemic has been affecting Réunion since 2018.

The circulation of the dengue virus continued in 2019, with over 50,000 clinical cases and more than 18,200 confirmed cases. In total, nearly 2,000 emergency admissions, 620 hospitalisations and 14 deaths were reported and investigated (versus 6 deaths in 2018). At the start of 2020, the circulation of the two DENV1 and DENV2 serotypes continued, also on the island, and the identification of a third DENV3 serotype raised fears of a new epidemic wave in the coming months.

CLUSTERS OF CHILD CANCERS IN SEVERAL LOIRE-ATLANTIQUE COMMUNES

Between 2015 and 2019, several cases of child cancer were reported in the sector of seven communes.

An epidemiological investigation was conducted by Santé publique France concerning the 13 families identified and concluded that there was a cluster of child cancers, with confirmation of an excess number of cases. However, the investigation did not uncover exposure to a specific documented risk factor liable to explain the cluster of cancers observed. Santé publique France recommended active surveillance of all new cases diagnosed in the sector and committed to creating a map of child cancers in Loire-Atlantique.

DENGUE FEVER CIRCULATING AGAIN IN GUYANA

After six years without any circulation, isolated cases of dengue fever were once again identified in Guyana at the start of 2019,

notably at the end of April in Kourou, with a first autochthonous transmission following the introduction of a dengue 2 virus, imported from South America. Until August 2019, seven epidemiological investigations, coordinated by Santé publique France Guyana, were conducted in connection with the first cases, with two of these enabling the identification of an epidemic centre, the first of which in Cayenne. At the start of 2020, 334 confirmed autochthonous cases of dengue fever had been identified in the last year, 60% of which in Kourou, 16% in Maripasoula and the other cases spread across other communes. Serotype 2 was present in the vast majority of cases (80%), although serotype 1 was also circulating.

LEAD EXPOSURE AMONG NOTRE-DAME RESIDENTS

The fire at Notre-Dame on 15 April 2019 caused significant lead contamination of outdoor areas,

resulting in the screening of blood lead levels in children aged 0 to 17 in the 1st, 4th, 5th, 6th and 7th districts of Paris. Of the 877 children screened between 15 April and 30 September 2019, 12 (1.4%) presented a blood lead level higher than the threshold for mandatory declarations of child lead poisoning, i.e. 50 µg/L, and 78 (8.9%) had a blood lead level of between 25 µg/L and 50 µg/L (vigilance threshold). This appraisal will be supplemented by an analysis of lead measurements in the children's homes and a study of the lead exposure factors, the results of which will be available during 2020.

SURVEILLANCE OF THE STATE OF HEALTH OF INDIVIDUALS EXPOSED TO THE LUBRIZOL FIRE IN ROUEN

During the night of 25 to 26 September, a fire broke out at the companies Lubrizol (Seveso classified) and NL Logistique

in the Rouen conurbation.

To document the impact on the health of individuals living in the areas affected by the cloud of smoke, Santé publique France set up a specific health surveillance system.

The goal of the first part was to assess the short-term impact through potential unusual increases in the use of emergency healthcare for targeted illnesses in the Normandy and Hauts-de-France region. This surveillance drew on data from the emergency services and SOS Médecins associations via the SURSAUD® system, supplemented by feedback from the SAMU (emergency medical aid service), the Angers antipoison centre via the Anses and reports of odour and associated symptoms at Atmo Normandie and Atmo Haut-de-France. The second part will assess the medium- and long-term impacts of this event through various additional studies.

Investigations to eradicate epidemics

POISONING LINKED TO BUCKWHEAT FLOUR CONTAMINATED WITH DATURA IN MARTINIQUE

An investigation was conducted after seven people who ate organic buckwheat flour pancakes on the same evening were examined due to digestive and neurological symptoms. The examinations showed atropine poisoning linked to the presence of datura in the buckwheat flour, leading to a more in-depth investigation to detect further cases of poisoning. Between 2 and 5 February 2019, a total of 51 cases of accidental poisoning were reported. These followed the consumption of batches of flour that had been withdrawn and recalled in France and the overseas departments at the end of November 2018. This indicated the need for rigorous monitoring and the strict application of withdrawal and recall measures throughout French territory.

EPIDEMIC OF ACUTE GASTROENTERITIS OF WATERBORNE ORIGIN IN OISE

In April 2019, heavy microbiological contamination was identified in the drinking water supply in Breuil-le-Sec, a commune of 2,600 inhabitants in Oise. A subsequent health investigation confirmed the existence of a higher than normal number of cases of acute gastroenteritis (AGE). To assess the actual health impact of this pollution, an epidemiological investigation was launched by Santé publique France Hauts-de-France in May 2019. The final result brought the total number of cases of AGE identified to 267 (32% of subjects included), including 180 certain cases,

73 probable cases and 14 possible cases, and confirmed the waterborne origin of the epidemic.

AUTOCHTHONOUS CASES OF ZIKA IN VAR

An outbreak of three autochthonous cases of Zika was detected in Hyères, in the Var department, during the summer of 2019, confirming the risk in Europe of autochthonous transmission of the virus by *Aedes albopictus*. A seroprevalence study was conducted to determine the extent of the Hyères epidemic and assess the national strategy on combating Zika. The study concerned all residents in the district where the autochthonous cases occurred and workers exposed to mosquito bites in the district. In addition to individual questionnaires to explore the presence of symptoms and exposure factors, it provided the opportunity to take 234 blood samples for serological analysis, the results of which will be announced during the first half of 2020.

MEASLES OUTBREAK CENTRE IN VAL-THORENS

During the winter 2019, a measles epidemic centre was identified at the Val Thorens ski resort in Savoie. In total, 55 cases of measles were reported and primarily involved young adult seasonal workers at the winter sports resort. Of these cases, five were hospitalised, including one serious form of pneumopathy. Other cases were reported in France and Europe in individuals who had stayed in Val Thorens. A recommendation was issued to update the immunisation

status of all individuals born since 1980 and dedicated vaccination sessions were held on-site. The large number of visits to the resort during the winter exacerbated this measles epidemic and its spread to France and other countries.

INVESTIGATION INTO CLUSTER OF HEPATITIS A IN CENTRE-VAL DE LOIRE

On 3 June 2019, the Centre-Val de Loire regional health agency received a report of hepatitis A in a chef at a restaurant in Loiret. On 17 June, four new cases connected with the restaurant were identified. Santé publique France Centre-Val de Loire and the regional health agency led the investigation of this health alert. On 31 July, 16 cases linked to the restaurant had been identified, five of them serious. All of the cases presented the same genotype 1B, identified by the National Reference Centre for Hepatitis A et E. This genotype was not in circulation in France prior to this grouped case. This episode highlights the importance of vaccination recommendations against hepatitis A for those working in food preparation.

Prevention at the heart of territories

ASSESSMENT OF VACCINE COVERAGE AGAINST MENINGOCOCCAL W IN DIJON AND GENLIS

The hyperendemic situation of invasive meningococcal disease due to serogroups W (IMD W)

linked to the UK-2013 variant in two neighbouring catchment areas of Côte-d'Or, Dijon and Genlis, resulted in a vaccination campaign. This took place from October 2018 to the end of March 2019 in individuals aged 17 to 24 and followed a campaign in January-March 2017 conducted on the Dijon university campus, due to three cases of infections occurring in the student population at the end of 2016. In total, although 22,459 people were vaccinated, the vaccine coverage rate in March 2019 totalled 26% of the population affected, demonstrating the difficulty of vaccinating young adults. Eleven months after the campaign, no new cases of IMD W were reported in Côte d'Or among 17 to 24-year-olds as part of the surveillance.

INVESTIGATION OF SUSPECTED EXCESS DEATHS FROM CANCER IN MOSELLE

In 2016, the Grand Est regional health agency contacted Santé publique France to confirm or rule out suspected excess deaths from cancer, notably lung cancer in the commune of Ottange-Nondkeil, in a context of high concentrations of the radioactive gas radon in certain cellars in the commune. A significant excess of +47% mortality from lung cancer between 2000 and 2014 was observed in the 35-84 age group compared with the mortality observed in the rest of the department. The two main risk factors in lung cancer are smoking and radon. Santé publique France recommended the implementation of preventive actions,

as simultaneous exposure to these two factors increases the risk of lung cancer occurring.

BRITTANY: RESULTS OF SCREENING FOR PERMANENT NEONATAL HEARING IMPAIRMENT

The national programme screening for permanent neonatal hearing impairment, launched in November 2014, involves conducting hearing tests on all newborns before leaving the maternity ward. To propose recommendations for improving the screening, an assessment was conducted in Brittany. The findings show that in 2016, 1% of newborns were suspected of having bilateral hearing impairment, which is lower than the national figure. They also showed that children transferred to the neonatology department, who according to the literature are ten times more at risk of hearing impairment, were four times more likely to not be included in screening in Brittany than children not transferred (1.9% vs 0.5%).

Studies to enhance knowledge

PILOT STUDY ON THE HEALTH OF THE TRAVELLING COMMUNITY IN NOUVELLE AQUITAINE

Following several grouped cases of measles and led poisoning in children among the traveller community in 2017-2018,

Santé publique France Nouvelle Aquitaine set out to more effectively assess the health needs of this population. The epidemiological study under way, which is also designed to assess vaccine coverage and study the links between living conditions and health, includes 2,000 people (adults and children aged 7 to 13) living in four departments in the region. The field phase, which began in November 2019, is set to continue until April 2020. The initial feedback shows good uptake, with nearly 600 questionnaires having been completed to date.

SURVEY IN THE GENERAL POPULATION IN MAYOTTE

The "Unono wa Maore" survey aims to learn more about the Mahoran population's state of health to identify the priority health themes, as well as the most vulnerable populations. One of the main aims is to describe the risk factors and health determinants, and assess the prevalence of diabetes, high blood pressure, obesity, hepatitis C and certain sexually transmitted infections. The study will also provide the opportunity to assess vaccine coverage in children aged 0 to 2. The survey is based on face-to-face interviews, measurements and biological samples. 7,259 people took part in the study, the initial results of which will be available during 2020.



There

WITH OUR expertise



Public Health Surveillance is a scientific discipline whose scope and methodological approaches evolve with the burden of diseases, and the determinants and health risks, and the development of information and digital technologies. It is a support to the action of Santé publique France to carry out its missions and thus participate to the promotion of public health. ●●

— Jean-Claude Desenclos,
Scientific Director of Santé publique France

BECAUSE the continuum between knowledge and intervention forms the foundation of **Santé publique France**, the agency draws on rigorous scientific expertise and communication messages, linked with the research structures open to society's challenges.

Its position at the centre of a vast network of regional, European and international partners enables it to improve its practices and showcase French expertise.

Guided by its governance, which is based on a founding principle of openness and dialogue, its efforts are underpinned by ethics, professional conduct and principles of excellence, independence and transparency.

What's more, 657 employees at the heart of our organisation take action to improve health for all.

Operationality, OR THE ABILITY TO EXECUTE A PUBLIC SERVICE MISSION

As in other large countries, Santé publique France meets the need to have a reference centre delivering expertise in public health. The agency is structured to effectively protect population health. Its efforts also give more credibility to public pronouncements and restore objectivity to contend with the circulation of false or distorted health information.



Santé publique France is a strategic agency for the ministry and the French Health Directorate. 



JÉRÔME SALOMON,
Director General
of Health



Santé publique France provides public authorities with the necessary data, knowledge

and expertise to enable the implementation of public policies aligned with our fellow citizens' needs.

For example, the mandatory surveillance of diseases and the vaccine coverage of the population, as well as field investigations in the event of epidemics, motivated the political decision to make eleven vaccine valencies mandatory in infants.

The agency and its teams will be facing several challenges in the coming years. One of these is of course to support the change in prevention policy spearheaded by the Government, which is a real

paradigm shift. Santé publique France already plays a major role in implementing the measures agreed at interministerial committee meetings on health and included in the "Prevention Priority" plan. The agency's involvement in this field is designed to meet goals in reducing social and territorial health inequalities and the efficiency of our response actions. The agency is a key actor in responding to health threats. The Covid-19 epidemic is a timely reminder of this. Due to these recurring threats, Santé publique France must be capable of maintaining a level of excellence in its abilities to anticipate, detect and assess risk in order to protect the health of our citizens; these abilities must draw on powerful monitoring and surveillance systems and faultless coordination with other actors in the health system. The agency must also guarantee high-level and independent expertise to ensure the credibility of public pronouncements and meet the ever-growing needs and expectations of our populations. Internationally, we are facing collective health challenges: climate change and the environment, the demographic transition and population ageing, the data revolution and digital, etc. Santé publique France must be mobilised alongside the DGS to ensure that the sustainable development goals (SDD) for 2030 can be fully achieved by France and on an international scale."

REFERRALS AND HEARINGS

49
referrals

INCLUDING

- › 17 ARS referrals
- › 23 DGS referrals
- › 9 referrals to other bodies or institutions

24
hearings

NATIONAL ASSEMBLY AND SENATE

- Senior women – February
- Substandard housing – March
- Endocrine disruptors – March
- Lyme disease – March
- Occupational health – May
- Provisions of the latest social security funding acts – June
- Vector-borne epidemic transmitted by mosquitoes – July
- Verdict on the draft bill on social security funding – October
- Sport and health in the overseas departments – October
- Assess the management of the consequences of the fire at the Lubrizol factory – November
- Vaccination hesitation – November
- Fact-finding mission regarding the fire at an industrial site in Rouen – November
- Enquiry committee on combating the spread of Aedes and vector-borne diseases – November

SUPREME AUDIT OF INSTITUTION (COUR DES COMPTES)

- Enquiry by the National Agency for Medicines and Health Products Safety (*Agence nationale de sécurité du médicament – ANSM*) – March
- Terminal chronic kidney failure – March
- HIV treatment – April
- Enquiry concerning the drug-therapy record – July

GENERAL INSPECTORATE OF SOCIAL AFFAIRS (INSPECTION GÉNÉRALE DES AFFAIRES SOCIALES)

- Wallis and Futuna – January
- Assessment of the application of the International Health Regulations (IHR) – June
- Asbestos and surveillance of mesothelioma – July
- Food insecurity – November
- Safety of cosmetics and tattooing products – December

OTHER

- Association of Île-de-France mayors (*association des maires d'Île-de-France – AMIF*): "Where does environmental health stand in Île-de-France towns?" – February
- General inspectorate of national education and research administration (*Inspection générale de l'administration de l'éducation nationale et de la recherche – IGAENR*) mission concerning the prevention of alcohol consumption in students – March

Scientific excellence,

TRANSPARENCY AND INDEPENDENCE

From the monitoring and surveillance of diseases to the implementation of prevention and intervention strategies, Santé publique France bases all of its actions on scientific expertise. This continuously up-to-date knowledge is made available to the appropriate authorities to clarify health policies and to protect and promote health.

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Collective and pluralist expertise

Since the 1980s, a series of health crises have demonstrated the benefit of basing public decision-making on top-level independent scientific expertise or assessment. As such, Santé publique France conducts its activities in this area by formulating verdicts or recommendations, at a national, European and international scale. Although a question needs to be raised by the Ministry of Health or a regional health authority in order for an assessment to be conducted, the agency can also perform a self-referral. The resulting verdicts and recommendations are prepared based on a critical analysis of the best scientific knowledge available and reasoned demonstrations, supported by professional judgements based on the high level of scientific knowledge and skills of the agency's teams and the experience of experts selected in accordance with strict criteria. Indeed, a multidisciplinary approach to health problems is a necessity that entails gathering diverse skills sometimes from outside the agency. The agency's scientific and international division provides methodological support for the execution of assessments, whether in terms of professional conduct, process or quality.

Principles governed by the Expertise Charter

To guarantee their independence and credibility, the assessments produced by Santé publique France are aligned with the principles established by the Assessment Charter, namely:

> **impartiality, debate, transparency and plurality.**

Governed by the Public Health Code, this Charter states the principles for selecting experts and defines the process that the assessment must follow, as well as, and in particular, its relations with the decision-making authority. It also defines conflicts of interest and how they are managed.

Publications in 2019

Independence is based in particular on the transparency and publicising of the opinions and recommendations issued.

904

regional epidemiological
bulletins and updates

86

summary
reports

65

scientific
posters

121

articles in international and national
external French and English journals

21

issues of the BEH
(Weekly Epidemiological Bulletin)
and La santé en action with
159 articles published

EXCHANGING AND SHARING EXPERIENCES

Santé publique France is involved in numerous partnerships that serve as sources of information and expertise. The "International Cooperation for Health (IC4Health)" agreement signed by the Anses, Santé publique France, Public Health England (PHE), the Dutch National Institute for Public Health and the Environment (RIVM) and the Norwegian Institute of Public Health (FHI) gives their staff the opportunity to visit other public health agencies for short periods. **Following are testimonials from participants.**



Rich scientific dialogue

"If I had to pick out one thing from the week I spent with staff from the RIVM, it would definitely be the very high quality of our discussions and the scientific ambition they stimulated. The RIVM, which is very involved in the field of environmental health, does a lot of work on the health impacts of climate change. One of Santé publique France's challenge is to create indicators that can describe these impacts and to guide public policies. The many meetings that took place during my stay afforded me very insightful opportunities to reflect on this issue. This reflection was fuelled both by the scientific rigour of the RIVM and by the insights from external university researchers. I got a huge amount from being surrounded by so much experience and expertise in such a short space of time."

MATHILDE PASCAL,
Environmental and Occupational
Health Division.



A desire to strengthen collaborations

"Although Public Health England and Santé publique France have been conversing for many years, my trip to London at the end of October was an opportunity to formalise the teams' desire to strengthen this collaboration. During my stay, an investigation into a European salmonella epidemic was under way. My attendance enabled us to immediately compare our investigation and surveillance methods and the results we had. Our discussions also led Public Health England to improve its questionnaire for conducting surveillance of this epidemic. Although our organisations differ, our two institutes have to manage similar situations: facilitating the sharing of practices and identifying correspondents is one of the keys to moving forward together."

NATHALIE JOURDAN-DA SILVA,
Infectious Diseases Division.



Exploring the entire surveillance chain

"When visiting Public Health England, I wanted to identify the points of convergence between the French and British systems for conducting surveillance of birth defects. My visit enabled me to explore the entire chain: from the recording of cases to the publication of results and the technical infrastructure used to gather and process the data. Our systems encounter the same difficulties and it was fascinating to understand how the institute tackles these constraints. One thing really struck me: despite being spread out across Britain, the agency's teams form the links in a solid chain. Their openness, professionalism and transparency in the presentation of their working methods open up very positive possibilities for future collaboration."

NOLWENN REGNAULT,
Non-Communicable Diseases and
Trauma Division.

INTERNATIONAL Openness

International openness is a founding principle of Santé publique France's actions. It enables the agency's practices to be improved in the fields of monitoring, alert, surveillance, health promotion and the assessment and impact of public policies. By developing long-term relations with its foreign counterparts, the agency also intends to showcase its expertise on the international stage.

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Participation in the IANPHI annual meeting

With 110 members from 93 countries, the International Association of Public Health Institutes (IANPHI) is a top-flight international community in the field of public health promotion. In addition to the support provided to develop and enhance the capabilities of national institutes, running this community is one of the IANPHI's challenges. Every year, the association invites the directors of member institutes to come together to meet each other and discuss public health issues and the institutes' role. In 2019, this meeting took place in Addis Ababa, at the African Union's offices. Santé publique France, which serves as the general secretariat of the IANPHI, was represented by its Chief executive, who had the opportunity to speak to her foreign counterparts and meet Tracey Cooper (Chief Executive of Public Health Wales), chairwoman of the group of directors who oversee the review of the agency by its peers (*see p. 41*).

Meeting with the ATDSR: discussions on local investigations

In September, Santé publique France hosted the Agency for Toxic Substances and Disease Registry (ATDSR) on its premises. Based in Atlanta, the ATDSR acts at a federal level for the US Department of Health and Human Services to protect the population from the harmful



effects linked to exposure to hazardous substances. During the first day, the two agencies had the opportunity to share their experiences in local investigation into topics of shared interest such as the disease registry, the monitoring of clusters and the health impacts of natural disasters. Some of the initiatives conducted by the ATDSR (application for the registration and monitoring of requests

to investigate clusters, toolbox for assessing and preparing for natural disasters and the federal research plan on recycled tyre crumb used on playing fields and playgrounds) were presented the following day to all Santé publique France staff during a dedicated seminar.



Review of the IANPHI: an assessment of the agency by its peers

To help public health institutes improve their organisation and strategic planning, the International Association of Public Health Institutes (IANPHI) developed an assessment method that has been used at several establishments worldwide since 2014. In 2019, Santé publique France was reviewed by its peers and hosted the IANPHI's teams on its premises. The goals were to identify the agency's main achievements since its creation and the contributions of the merger, assess its functioning and receive recommendations on enhancing the effectiveness of its actions. Following four days of meetings and document analysis, the panel, comprised of directors of public health institutes, issued its conclusions and recommendations. Presented to the Board of Directors and staff by Tracey Cooper, chairwoman of the assessment committee, then to the Scientific Committee by Prof. John Newton (Public Health England), these will guide the agency's upcoming action plans.



We were extremely impressed with what has been achieved over such a short period of time since the establishment of Santé publique France. We were also very impressed with the professionalism, commitment and drive from everyone we met within the organisation to be the very best that they can be and in their shared desire to continue to develop the organisation."



TRACEY COOPER,
CHIEF EXECUTIVE - PUBLIC HEALTH WALES.

Meeting with Dr Maria Neira (WHO)

In November, the World Health Organisation (WHO) attended the one-day event "Assessing the health impact of air pollution", co-organised by Santé publique France and the ADEME. Maria Neira, Director of the Department of Public Health, Environmental and Social Determinants of Health at the WHO, took the opportunity at this event to provide a reminder of the need to make health a central concern of environmental and political decision-making processes. The following day, Santé publique France invited her to present the WHO's actions in climate



Putting health at the centre of environmental and political decision-making processes. ●●

change to the agency's staff and partners. The aim of this presentation was to highlight the role that national public health institutes play in the response to sustainable development goals. The data, knowledge and verdicts they produce and their actions all contribute to stimulating efforts in this field.

Dialogue WITH SOCIETY

The agency's governance is based on a founding principle of openness and dialogue. It is structured around four boards: the Board of Directors, the Scientific Board, the Ethics and Professional Conduct Committee and the Advisory and Dialogue with Society Committee. Civil society's participation in the agency's work indicates potential areas for reflection in order to build new dynamics of trust and enrich the quality of scientific investigations.



The Board of Directors (BD)

30 members (including 9 government representatives), who are appointed for a four-year period, renewable once.

The Board of Directors is responsible for giving a verdict on the agency's main strategic orientations, its activity programme and the human and financial resources required to conduct its missions. In 2019, the board member seminar, which took place in November, provided the opportunity to debate, together with Annalisa Belloni from Public Health England and Dr Ayden Tajahmady from the National Health Insurance Fund (*Caisse nationale d'assurance maladie* – CNAM), the link between the burden of disease, choosing prevention priorities and measuring the impact of prevention on healthcare. It also provided the chance to analyse the reasons for civil society's loss of confidence in expertise, together with Daniel Agacinski, who wrote France Stratégie's report on "Expertise and democracy: contending with mistrust".



The Scientific Board (Conseil scientifique – CS)

27 members appointed at the proposal of the executive management for a four-year period, renewable by decision of the chairman of the Board of Directors.

The Scientific Board is responsible for overseeing the quality and cohesion of the agency's scientific policy. In addition to the adoption of its internal regulations, it issued several verdicts during 2019 regarding the 2020 work programme and Santé publique France's involvement in the "Global Burden of Diseases" international network. It also continued its work on analysing the agency's specific programmes: "alcohol", "expertise in preventive healthcare and health promotion", "communication, scientific showcasing and dialogue with society" and the "integrated regional public health programme".

The Advisory and Dialogue Committee (Comité d'orientation et de dialogue – COD)

19 members from civil society have been appointed for four years, renewable once by decision of the chairman of the Board of Directors.

The COD, a body for dialogue with civil society, is responsible for advising the agency on its activity programme, which involves several aspects: analysis of a programme (mental health), strategic note on the nutrition programme, consultation on devising actions for healthcare professionals (nutrition), reflection on e-health and health crises at the agency. As such, the activity of the working groups (WG) forms part of the committee's four missions: give the agency its view on current and future public health issues and the societal issues they raise (e-health and nutrition WG); propose priorities in the agency's areas of activity (mental health WG); contribute to improving the agency's methods of communication during crisis situations in particular (health crisis WG) and conditions governing the dissemination of public health knowledge to the population (new nutritional recommendations WG); and enable the agency to contribute to public debates on public health issues (TAUL).

Ethics and Professional Conduct Committee (Comité d'éthique et de déontologie – CED)

7 members appointed for a four-year period by decision of the Board of Directors.

Responsible for overseeing compliance with the ethical and professional conduct rules that apply to the agency, its staff and its occasional contributors, the Ethics and Professional Conduct Committee has continued its examination of the ethical questions raised by the public-private partnerships that Santé publique France could develop, in particular as part of its social marketing campaigns. The CED has also continued its work on the agency's scientific integrity policy and advocates adherence to the national charter on professional conduct in research professions. In addition, it believes that the agency should adopt a professional conduct code to which would be appended the "Best practices in relations with the private sector" developed by the agency.

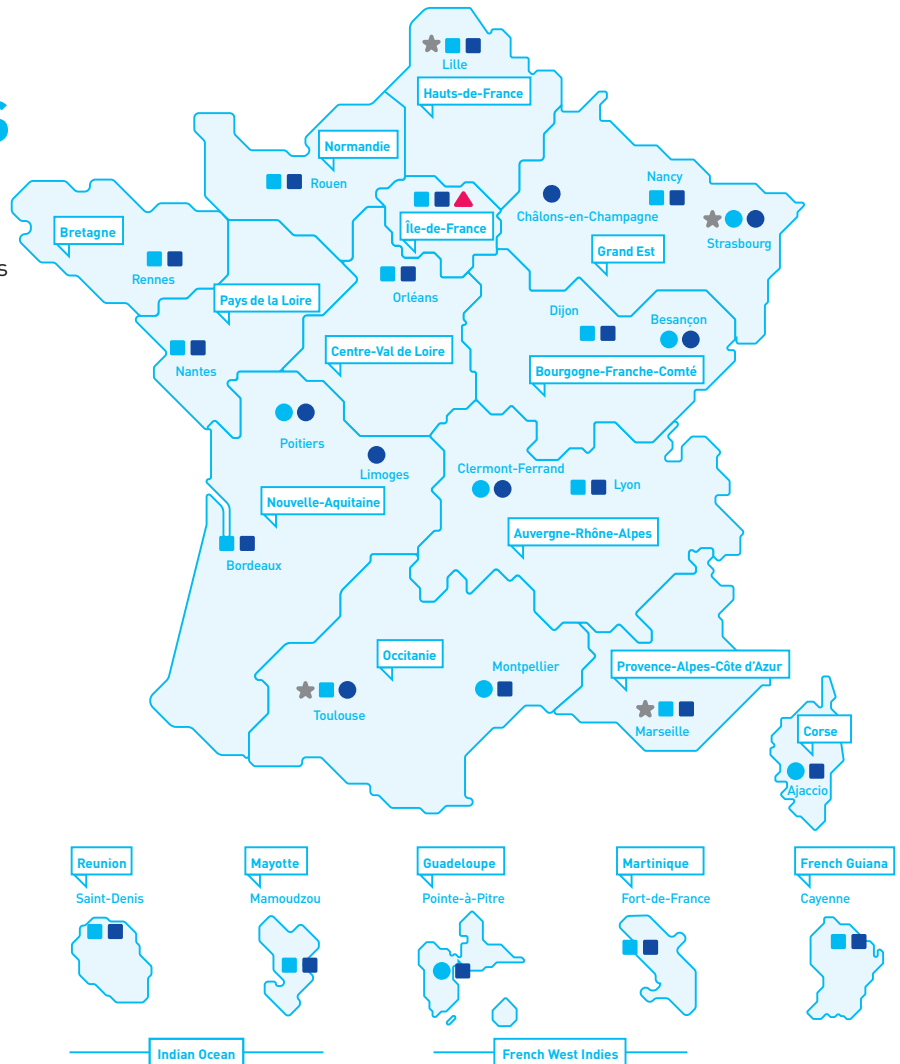
Learn more:
list of members on
<https://www.santepubliquefrance.fr/>

Organisation

Santé publique France is directed by a Chief executive, who is assisted by the deputy Chief executive, the scientific director and the cabinet director. It is structured around four boards, scientific and cross-functional divisions, and divisions that provide support and assist activity. To execute its monitoring and surveillance missions throughout French territory, the agency draws on its regional units.

IN THE REGIONS

Santé publique France has regional units under its authority, which work in collaboration with the general managers of the regional health agencies. A unit performs an operational mission in the field of monitoring, surveillance and alert. The agency also implements the national health monitoring and surveillance system, for which it defines orientations and oversees and coordinates actions in compliance with the missions entrusted to the regional health agencies. Santé publique France signs agreements with the regional health agencies that cover the implementation of its missions and stipulate how the regional units operate.



657 employees
throughout
France

881
training
actions

Regional health agencies (ARS)

- Head offices
- Regional offices

Santé publique France in the regions

- Head offices
- Regional offices

Head office of Santé publique France (Saint-Maurice)

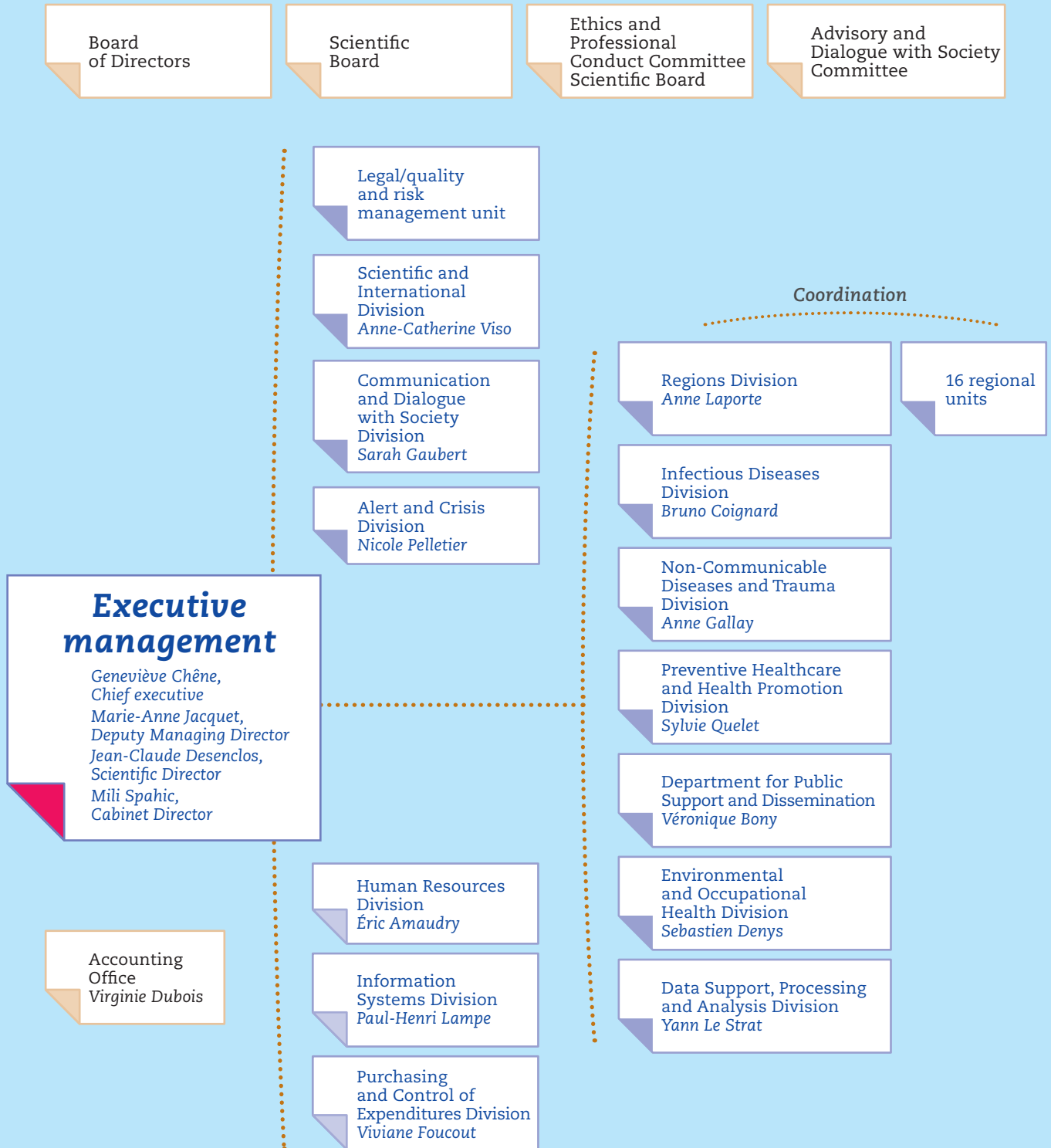


Remote support hubs



*Figures as at 31 December 2019.

ORGANISATION CHART

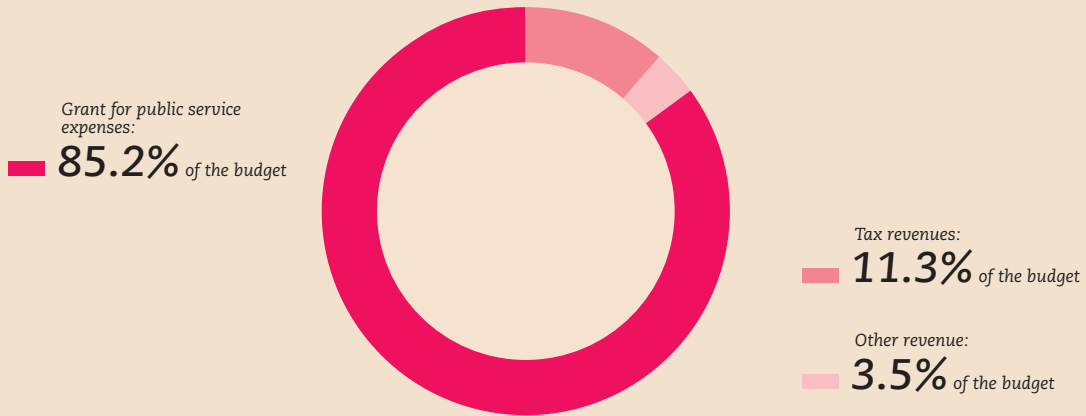


OPERATING budget

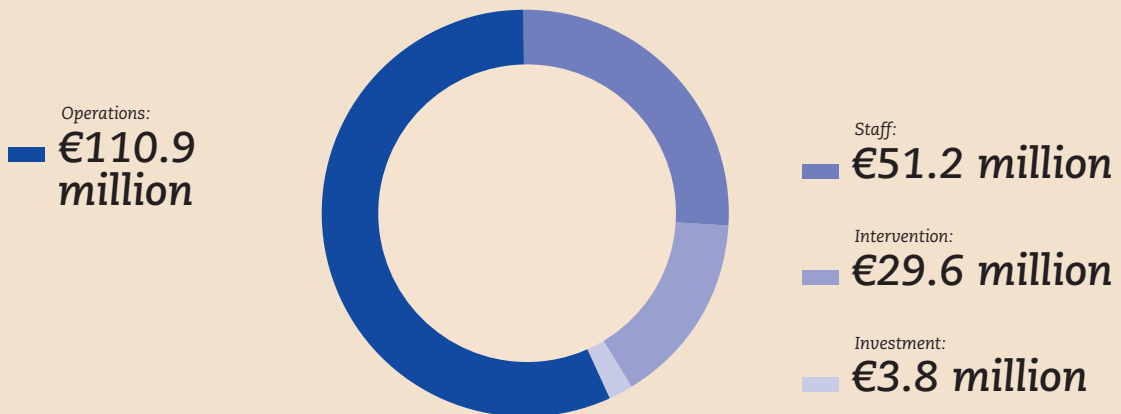
€195.5 million

The budget for implemented expenditure (2019 commitment authorisation)

2019 revenue

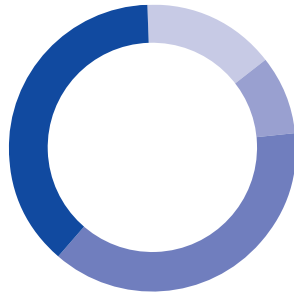


Executed budget 2019



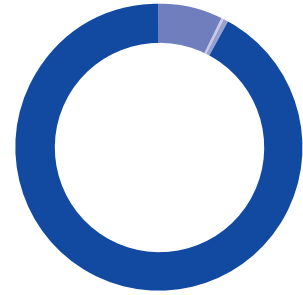
Support and day-to-day operations
€21.5 million

- Operations: €8.2 million
- Staff: €8.2 million
- Intervention: €1.9 million
- Investment: €3.2 million



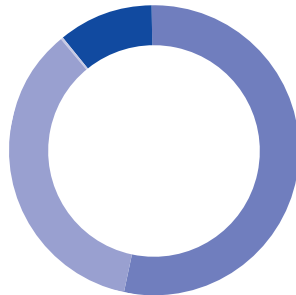
Intervention in exceptional or emergency health situations
€51 million

- Operations: €47 million
- Staff: €3.8 million
- Intervention: €0 million
- Investment: €0.2 million



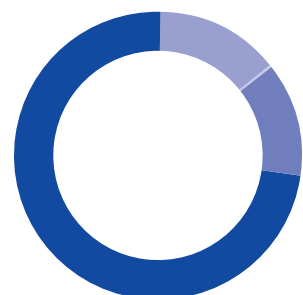
Monitoring and surveillance
€50.1 million

- Operations: €5.3 M€
- Staff: €26.9 M€
- Intervention: €17.9 M€
- Investment: €0.02 M€



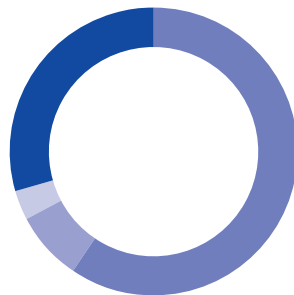
Preventive healthcare and health promotion
€66.6 million

- Operations: €48.6 million
- Staff: €8.5 million
- Intervention: €9.4 million
- Investment: €0.02 million

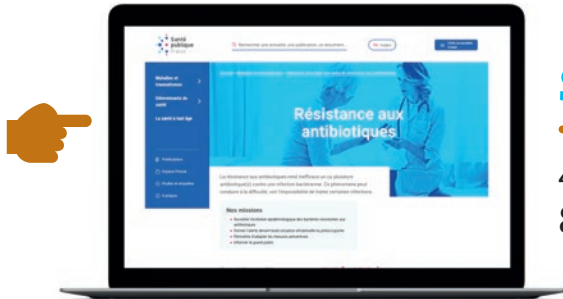


Cross-functional expenses
€6.4 million

- Operations: €1.9 million
- Staff: €3.8 million
- Intervention: €0.5 million
- Investment: €0.2 million



Our prevention WEBSITES



[santepubliquefrance.fr](https://www.santepubliquefrance.fr)

4 million visits
8.6 million page views

 [mangerbouger.fr](https://www.mangerbouger.fr)

3.2 million visits
9.7 million page views

[mangerbouger.fr/pro](https://www.mangerbouger.fr/pro)

128,600 visits
498,000 page views

[pourbienvieillir.fr](https://www.pourbienvieillir.fr)

320,000 visits
782,000 page views

[vaccination-info-service.fr](https://www.vaccination-info-service.fr)

5.2 million visits
7.6 million page views

[professionnels.vaccination-info-service.fr](https://www.professionnels.vaccination-info-service.fr)

406,000 visits
555,000 page views

 [choisirsacontraception.fr](https://www.choisirsacontraception.fr)

2.5 million visits
6.8 million page views

[onsexprime.fr](https://www.onsexprime.fr)

1.4 million visits
2.4 million page views

[info-ist.fr](https://www.info-ist.fr)

276,500 visits
813,000 page views

[sexosafe.fr](https://www.sexosafe.fr)

380,000 visits
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