

New versions of the GALI proposed by Eurostat

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Surveys, lifestyle and chronic diseases

Modernisation of social statistics: context (1)

- Current ESS is made up of separate domain-specific Regulations
- Modernisation of social statistics aims to streamline the European social statistics collected from samples and to make the data collection process more efficient and the statistical output more relevant given...
 - ever-increasing demand for data
 - the demand from respondents to statistical surveys to reduce the burden
 - considerable costs for MS to conduct the surveys
- Preparation of an EU Regulation establishing a common framework for European statistics relating to persons and households, based on data at individual level collected from samples.
- Timing: EU Regulation to be finalized/accepted by EU Parliament in 2019

Modernisation of social statistics: context (2)

Seven household surveys are targeted with this Regulation:

- Labour Force Survey (LFS) (*)
- European Statistics on Income and Living Conditions (EU-SILC) (*)
- Adult Education Survey (AES) (*)
- European Health Interview Survey (EHIS) (*)
- Survey on Information and Communications Technologies (ICT) usage in households (ICT-HH) (*)
- Household Budget Survey (HBS) (**)
- Harmonized European Time Use Survey (HETUS) (**)

(*) Conducted in the framework of survey specific EU Regulations

(**) Conducted on the basis of an informal agreement only

Modernisation of social statistics: standardisation of variables in social micro-data collections (1)

- Priority setting by DSS (13 P1, 15 P2 variables)
- “Core” variables versus “non-core variables”
 - Core variables : to be implemented in all social micro-data collections
 - Non-core variables: to be implemented in more than one micro-data collections (what justifies its standardization)
- 3 health variables are listed as P2, non-core variables (DSS meeting October 2016):
 - ...
 - (25) Self-perceived general health
 - (26) Long-standing health problem
 - (27) Limitation in activities because of health problems (GALI)
 - ...

Modernisation of social statistics: standardisation of variables in social micro-data collections (2)

- Once selected as P (1 or 2) variables: development of “standard descriptions” through a process of consultations:
 1. Draft proposal by Eurostat (all concerned teams are involved)
 2. Consultation with subject-matter WG (for each variable/s)
 3. Eurostat consolidated proposal
 4. Consultation with all concerned WGs
 5. Revision by Eurostat and subsequent presentation to the DSS (P2) (October 2016)
 6. DSS approval of the standards (P2) (March 2017)

Modernisation of social statistics: standardisation of standardization of the GALI variable – recommendations TF GALI (2015)

- Keep the concepts underlying the GALI variable, unchanged i.e. 1) having ‘restrictions’ in activities, 2) ‘activities people usually do’, 3) ‘because of a health problem’, and 4) ‘for at least the past 6 months’;
- Any conceptual change to the GALI variable should be tested qualitatively and quantitatively;
- Do not introduce any change in the operationalization of GALI in SILC and EHIS (single-question instrument). However a routed version could facilitate the implementation of the variable in the LFS and other ESS surveys;
- Recommends adopting the proposed technical guidelines for GALI and implementing them in all concerned data collections;
- Move from output-harmonization to input-harmonization (standardization);
- Monitor and assess the implementation of GALI in all concerned data collections;
- Adopt GALI as a core variable to be included into LFS and other ESS surveys;
- Introduce a version of GALI adapted for children and in particular in 3yearly module on children and childcare in SILC;
- Recommends that the Technical Group HIS investigates the possibility to introduce a module related to children into the future EHIS survey.

Modernisation of social statistics: standardization of P2 variable 'Limitation in activities because of health problems' – reference question

Scope: The social micro-data collections EU-SILC, EHIS (EU-LFS and HETUS)

Reference question:

Q_1: "Are you limited because of a health problem in activities people usually do? Would you say you are... severely limited, limited but not severely, or not limited at all?"

If answer to QUESTION_1 is 'severely limited' or 'limited but not severely' ask QUESTION_2:

Q_2: "Have you been limited for at least the past 6 months? Yes, No".

Modernisation of social statistics: standardization of variable 'Limitation in activities because of health problems' – final variable

Final variable for data transmission is constructed as follows:

VARIABLE_CATEGORY = 'severely limited'

if Q_1 = 'severely limited' and Q_2 = 'Yes'

VARIABLE_CATEGORY = 'limited but not severely'

if Q_1 = 'limited but not severely' and Q_2 = 'Yes'

VARIABLE_CATEGORY = 'not limited at all'

if Q_1 = 'not limited at all' or Q_2 = 'No'

VARIABLE_CATEGORY = 'not stated'

if Q_1 is missing or [(Q_1 = 'severely limited' or 'limited but not severely') and (Q_2 is missing)]

Modernisation of social statistics: streamlining planning of surveys (1)

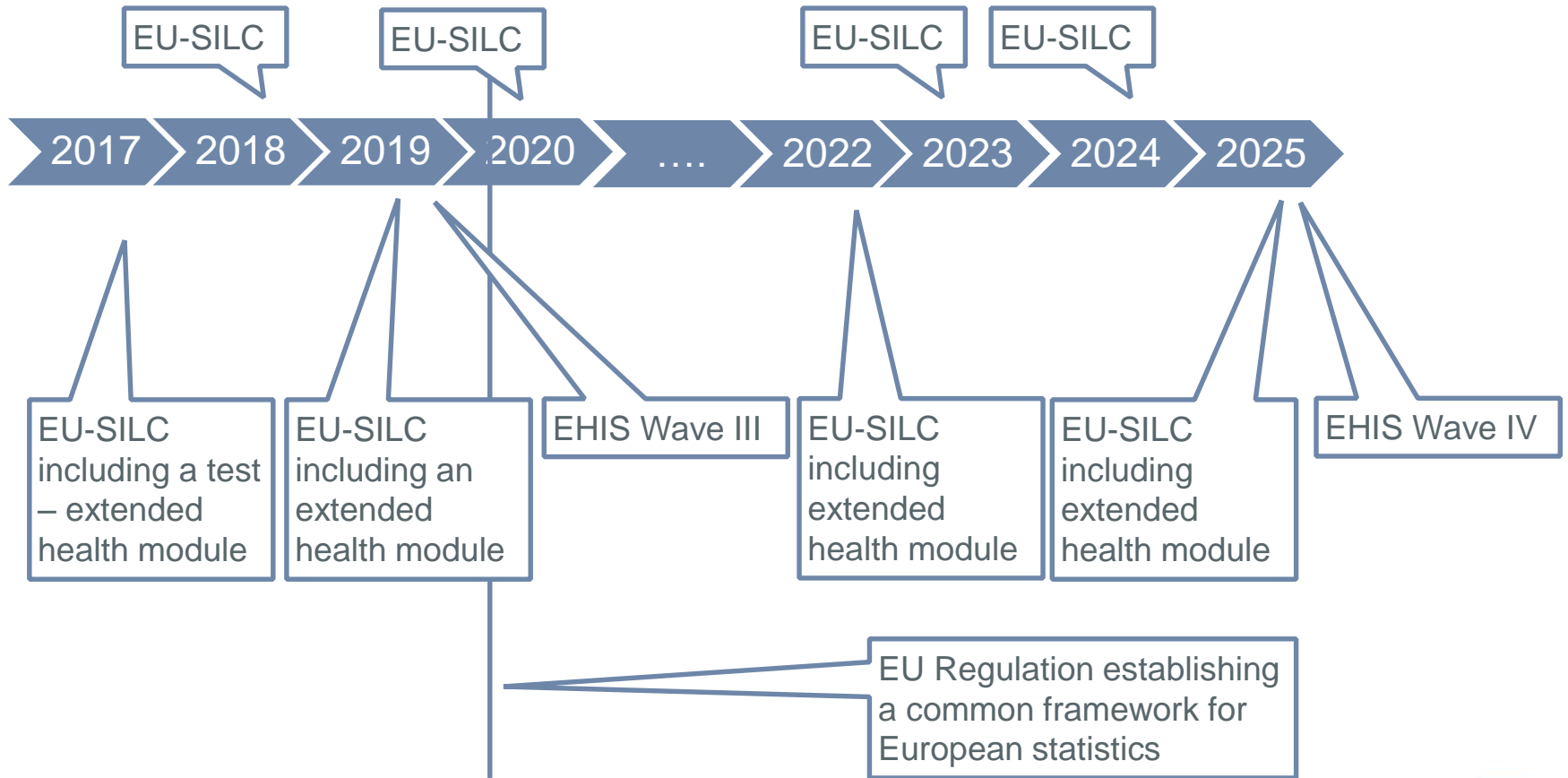
Former planning:

- EU-SILC (including MEHM) organized on a yearly basis
- EHIS (including MEHM) organized in (2006 – 2008) (Wave I – Gentlemen’s Agreement) and (2013 -2014 – 2015) (Wave II – EU Regulation No 141/2013)
- Periodicity of EHIS: 5 years

New planning:

- Extended (ad hoc) health module added to EU-SILC every 3 years
- Periodicity of EHIS: 6 years (Wave III scheduled for 2019) – every 6 years coinciding EU-SILC and EHIS

Modernisation of social statistics: streamlining planning of surveys (2) – NOT confirmed



Modernisation of social statistics: content of SILC 2017 ad hoc module on health (EU regulation)(2)

- **Individual level (15+)**
 - Nucleus health module (MEHM + unmet needs) unchanged
 - Number of visits to a dentist or orthodontist
 - Number of consultations of a GP or family doctor
 - Number of consultations of a medical or surgical specialist
 - Body Mass Index
 - Frequency of eating fruit
 - Frequency of eating vegetables or salad
 - Type of physical activity when working
 - Time spent on physical activities (excluding working) in a typical week

Modernisation of social statistics: content of SILC 2017 ad hoc module on health (EU regulation)(2)

- **Household level**
 - Financial burden of medical care
 - Financial burden of dental care
 - Financial burden if medicines

Modernisation of social statistics: content of SILC 2017 ad hoc module on health (EU regulation)(3)

MEHM minus “longstanding health problem”

- **Children’s health (-15)**

- General health
- Limitation in activities because of health problems

⇒ to be completed by proxy for **every** child aged < 15 years

- Unmet need for medical examination or treatment
- Main reason for unmet need for medical examination or treatment
- Unmet need for dental examination or treatment
- Main reason for unmet need for dental examination or treatment

⇒ to be completed by proxy for **all** children aged < 15 years

Modernisation of social statistics: content of SILC 2017 ad hoc module on health (ESS Agreement)

- **Individual level (15+)**
 - Difficulty in seeing, even when wearing glasses or contact lenses
 - Difficulty in hearing, even when using a hearing aid
 - Difficulty in walking or climbing steps
 - Difficulty in remembering or concentrating
 - Number of nights spent as a patient in a hospital
 - Use of any home care services for personal needs
 - Use of any medicines prescribed by a doctor
 - Type of smoking behaviour
 - Average number of cigarettes a day
 - Frequency of consumption of an alcoholic drink of any kind
- ⇒ Only to be implemented in:
Bulgaria, Estonia, France, Greece, Romania, Slovenia

Modernisation of social statistics: EU SILC 2017

GALI model questionnaire version

- MODEL QUESTIONNAIRE GALI VERSION (Nucleus EU SILC 2017)
- For at least the past six months, to what extent have you been limited because of a health problem in activities people usually do? Would you say you have been ...
 1. Severely limited
 2. Limited but not severely or
 3. Not limited at all?
- MODEL QUESTIONNAIRE GALI VERSION CHILDREN (Extended module EU SILC 2017)
- Q1: Is [child's name] limited because of a health problem in activities most children of the same age usually do? Would you say he/she is ...
 1. severely limited => go to Q2
 2. limited but not severely, or => go to Q2
 3. not limited at all? => go to next module/skip Q2
- Q2: Has [he/she] been limited for at least the past 6 months?
 1. Yes
 2. No

Current activities of IPH related to EU SILC 2017 health module: NET SILC III Project WP 1.6.a

Main objectives of WP 1.6a *“Validity/comparability including external validation of non-income components (health)”*

1. Assessment of potential **deviations** (content, wording, order,...) in the EU SILC health questions used in the different MS in comparison with the model questions;
2. External **validation** of EU SILC health questions against the results of EHIS Wave II [(2008) (MEHM)];
3. Analysis of **item-non response** to assess the comprehensibility, complexity and sensitivity of the (national translations of) variables, questions and response-categories;
4. Assessment of potential **effects of adding variables** in the context of ESS agreement on the results of the Regulation grounded variables;
5. Recommendations to **enhance** the **comparability** and **quality** of the 3-years EU-SILC extended health module.

Thanks!