

June 2006

Ehemu Second Annual Report
on
European Population Health



Executive Summary

Whether the extra years of life gained across the EU Member States are being spent in good or bad health is a crucial question both for individual Member States (MS) and the EU as a whole. This report details the second years work completed by the European Health Expectancy Monitoring Unit (EHEMU), a project funded by the EU Public Health Programme from 2004-2007. EHEMU is a collaboration between four teams based in: CRLC and the University of Montpellier in France; the University of Leicester, UK; the Scientific Institute of Public Health, Belgium; and the French National Institute of Demography, INED.

The main aim of EHEMU is to provide a central facility for the co-ordinated analysis and synthesis of life and health expectancies. This joint analysis of health and life expectancies adds a quality dimension to the quantity of life lived by the European populations. The results will provide evidence of inequalities between MS in terms of health gaps and highlight potential targets for public health strategies both nationally and at a pan-European level.

EHEMU will contribute to improving and developing the European health monitoring system through collaboration with initiatives aimed at improving the quality and comparability of EU data, through its specific objectives to:

- undertake analysis of health expectancies from current harmonized data;
- co-ordinate the dissemination of results, through paper and web-based reports;
- act as repository for past and current data on EU health expectancies;
- undertake regular transfers of meta-information to European databases;
- develop web-based training material for interpreting and calculating health expectancies for a wide audience;
- promote harmonization of practice;

During the second year EHEMU has produced material in six specific areas:

- The **EHEMU Information System** has been developed to facilitate the calculation of life and health expectancies in the 25 countries within the European Union. This system, comprising a database (containing demographic and health questionnaire data) and an interface enabling analyses and calculations, has provided the indicators for the country reports and the analysis of the SHARE data. The system has been designed to be maximally user-friendly, with specific care taken to provide definitions of quantities calculated, underlying health surveys used and their questions as well as linking methods through to the Sullivan guide (see below).
- **A major report** of analyses of health expectancies across the subset of MS using the Survey of Health and Retirement in Europe (SHARE). These analyses were undertaken due to the delay in receiving the first round of the Survey of Income and Living Conditions (SILC 2004). However, in addition to including the Minimum European Health Module (MEHM) that SILC will provide, SHARE includes a wider range of health variables on which to compare MS.
- **The step-by step guide to calculating health expectancies (Sullivan Guide)** has been updated with more recent data and the methods revised to be consistent with the EHEMU Information System.
- The two networks (an **Experts Network** and a **Public Health Network**) have been further consolidated and now cover 24 countries. The networks have been essential in

evaluating the form and content of the **country reports** for which there is now a first version for 14 MS.

- The **EHEMU website** has been further developed and the first year annual reports are accessible there in addition to a range of presentations of the EHEMU project.
- A **European conference** entitled Europe Blanche XXV1: Living Longer and Healthier Lives was organised by the Institut des Sciences de la Santé in Budapest with over 150 participants. The EHEMU project was the main focus of this meeting and provided three presentations:
 - Changes in life expectancy in the European Union since 1995 : similarities and differences between the 25 EU countries
 - Healthy Life Expectancy in the EU 15
 - Living longer healthier lives, comments on the changes in life expectancy and disability free life expectancy in the European Union since 1995

These outputs, together with the financial outlays and the workplan for the third year are detailed overleaf.

Description of Ehemu tasks

The Ehemu proposal describes 7 tasks:

- Task 1. Data analysis and annual calculation of selected health expectancies (see section 3 overleaf for full definitions) by sex and at specific ages and with confidence intervals for the 15 MS from harmonized data collected through existing European surveys: Eurobarometer (2002) and the Survey of Income and Living Conditions (SILC) from 2003 onwards and age and sex specific mortality data for the same time period. The selected indicators cover the spectrum of severity of disease and disability. As new harmonized data become available throughout the MS, appropriate health expectancies will be calculated and included in the suite of indicators. Both survey and mortality data will be obtained through Eurostat. In addition we will utilise the last data from the European Community Household Panel (2000 and 2001), which will be available from 2004.
- Task 2. Production of a detailed annual report on the quantity and quality of life in the countries of the Community, with comparative tables of indicators (and confidence intervals), maps and graphs of trends over time. MS will be given the opportunity to comment before the report is finalised on both the results for their country and on the quality, appropriateness and format of the report.
- Task 3. Production of an executive summary, for inclusion in the introductory chapter "Living longer, living better?" of an annual report on the health of Europeans.
- Task 4. Creation of a repository of existing calculations from MS (where data is not harmonized between MS) as well as ongoing collation of new calculations from future national and multi-national surveys, such as the Survey on Health, Ageing and Retirement in Europe (SHARE) with summary reports.

- Task 5. Development of a website offering on-line assistance to calculate, analyze, interpret or use health expectancies. The website will provide permanent training so that a wide variety of audiences (statisticians, policy makers, journalists) may be informed when and where they require and will promote harmonization of practice. The website will also provide a vehicle for the widest dissemination of European comparisons of health expectancies throughout the countries of the Community. In the website development particular attention will be paid to the needs of the newly joining MS who have little or no experience in this field.
- Task 6. Production of two handbooks detailing the calculation and interpretation of health expectancies in Europe, Handbook 1: "Calculating health expectancies in Europe" aimed at demographers, epidemiologists and statisticians and Handbook 2: "Interpreting and using health expectancies" aimed predominantly at policy makers. These handbooks will form the basis of on-line assistance (see 5.).
- Task 7. Transfer of meta-data, specifically detailed life and morbidity tables, to appropriate European databases and statistical systems and, with agreement by DG SANCO, to OECD and WHO (Copenhagen and Geneva).

Comparative table between the planned and the realised work:

Task	Period	Planned	Realized
1	M13-20	Data Collection:	
		SILC 2004	Data only obtained from Eurostat in Month 24
		Calculations	
		SHARE 2004	
		For 9 MS at age 65	+
		LE in good perceived health	+
		LE without morbidity	
		• Undiagnosed (symptoms)	+
		• Diagnosed	+
		LE without activity limitation (HLY)	+
		LE without physical functional limitations	+
		LE without disability	
		• Mild (IADL restrictions)	+
		• Moderate/severe (ADL restrictions)	+
2	M13-23	Country reports	Country reports prepared for 14 MS (those included in ECHP)
		Assessment by member states	Country reports and evaluation questionnaire sent to MS contacts in the two networks.
			Summary of responses from networks made
		Uploading of country reports to websites	Not completed due to views of MS that inclusion of Eurobarometer data too speculative
			Country reports presented to Experts and Public Health Networks in Budapest on 25-26 November, 2005 during the 26 th meeting <i>Europe Blanche</i> on Living Longer and healthier lives
3	M23-24	Annual report	+
		Executive summary	+
4	M13-24	Collection of data	EHEMU Information System developed

		Summary report	EHEMU Information System documented and presented to 2 nd Task Force on Health Expectancy June 2006
6	M16-23	Development of Web site	Only β version still currently available as website developer left team
5	M14-22	First Handbook	+
		Second handbook: to be commenced month 21	Not yet begun
7	M23-24	Transfer of Metadata for year 2	+

Commentary on the comparison between the planned and realised work.

In general, the planned work for the second year was successfully completed:

- The Expert and Public Health networks were further enlarged providing coverage of 24 MS (Task 2)
- the first versions of the country reports were completed for 14 MS and evaluated by the Expert and Public Health networks (Task 2)
- the handbook on calculating health expectancies was completed (Task 5)
- the EHEMU Information System was developed to provide data and calculations online and presented to the 2nd Task Force on Health Expectancy (Task 4)
- the transfer of metadata (Task 7)

There were two major events that impacted on the work plans for year 2. The first was the loss of the web developer from the Leicester team. The specialist nature of this post and that it is only part-time for a limited period meant that it was not worthwhile attempting to advertise the post. However, although further development has been delayed, the website has been kept as up-to-date as possible with presentations and reports. The EHEMU Information System has during the year reached the stage where it can be made accessible through the website and this will require modification of the website. The project team have therefore been revisiting the structure of the website and, more importantly, where it is currently hosted.

The second event that has impact on planned work was the delay in receiving the SILC data. Initially we expected to receive the results of the SILC pilot (SILC 2003) for a limited number of countries but these data were not released. SILC 2004 was received from Eurostat during Month 24 and thus will form the basis of the third year report. The lack of SILC data provided us with the opportunity to explore another survey, the Survey of Health and Retirement in Europe (SHARE). Not only does this survey contain the activity limitation item that form Health Life Years (HLY), the new structural indicator, but it also contains a wider range of items on functional health than SILC. However it covers only 9 MS.

The first handbook on calculating health expectancies (Sullivan Guide) has been completed (Task 5). It will be uploaded to the website and linked into the Information System during year 3. The second handbook on interpretation of health expectancies for a lay audience will be completed during the third year. This will be a much shorter document and will be based upon a recent document prepared by the UK Parliamentary Office for Science and Technology to inform government ministers on healthy life expectancy.

In addition to presentations of the project at the 2nd Task Force on Health Expectancy in June 2006, members of the team presented results of calculations at the:

- 18th World Congress of Gerontology, Rio June 2005
- European Population Day on Ageing as part of the IUSSP Annual meeting, Tours July 2005
- Gerontological Society of America annual meeting, Orlando, November 2005
- *Europe Blanche* on Living Longer and Healthier Lives, Budapest November 2005
- International Network on Health Expectancy and the Disability Process (REVES), Amsterdam May 2006

Work plan for Year 3 of the EHEMU project

Task 1

Data collection and calculations:

The first wave of SILC covering 15 MS (SILC 2004) was not received until Month 24 (April 2006). Thus the calculations will be finalised by Month 31 (November 2006) in time for presentation at the third Task Force on Health Expectancy in December 2006.

The second wave of SILC covering the 25 MS (SILC 2005) should be available before the end of 2006. Data analysis and calculations will be completed by Month 34 (March 2007) in time for the Spring Council.

Task 2:

Country reports (Issue 1) based on SILC 2004 will be prepared. These will be ready to send to the country experts during Month 31 (mid November 2006) and will be presented to the Task Force in Luxembourg in December 2006. The final pdf versions will be uploaded to the website in Month 33. If the SILC 25 MS 2005 is delivered on time by Month 32 (December 2006) Country Reports Issue 2 will be produced by the end of Month 34 (February 2007) in time for the Spring Council.

Task 3: No change

Task 4: No change

Task 5: Final publication will be achieved by Month 33. First draft will be available by Month 31.

Task 6: There is no change to the work planned. However further development of the webpages are planned to be undertaken in Montpellier if transfer of monies can be authorised by the funders. This has been requested (see letter dated 28th April 2006 to Antoni Montserrat Moliner).

Task 7: No change

List of Annexes:

- Annex 1. EHEMU Technical report 2006_1: June 2006
EHEMU Information System
- Annex 2. EHEMU Technical report 2006_2: June 2006
Health Expectancies at age 65 from the SHARE survey
- Annex 3. EHEMU Technical report 2006_3: June 2006
Calculation guide to health expectancies using the Sullivan Method
- Annex 4. EHEMU Technical report 2006_4: June 2006
Update of website
- Annex 5. EHEMU Technical report 2006_5: June 2006
Development of the Networks of EHEMU collaborators
- Annex 6. Country reports issue 0
- Annex 7. EHEMU Technical report 2006_6: June 2006
Summary of responses of network to evaluation of country reports
- Annex 8. Minutes of EHEMU meeting year 2
- Annex 9. Report of ISS Europe Blanche XXV1 meeting