

*Workshop « Datengrundlagen für die
Gesundheitsforschung in Deutschland »
Robert Koch Institut – Statistische Ämter des Bundes
und der Länder Forschungsdatenzentren -
Statistisches Bundesamt*

Eurostat Public Health Statistics database and data collections

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About Eurostat

- Statistical Office of the European Communities
- Directorate-General of the European Commission
- **European Statistical System - ESS:** Eurostat and the statistical offices, ministries, agencies and central banks that collect **official statistics** in EU Member States, Iceland, Norway and Liechtenstein
- Objective: **comparable statistics** at EU level, i.e. regular data collection on a basic set of statistics
 - ⇒ Production : *European Statistics Code of Practice*
 - ⇒ Community policies drive the demand
 - ⇒ Cooperation with Member States
 - ⇒ and with international organisations (*OECD, UN, etc.*)

About the Code of Practice

The European Statistics Code of Practice is based on 15 principles. Governance authorities and statistical authorities in the European Union commit themselves to adhering to the principles fixed in this code covering the institutional environment, statistical processes and outputs.

The 15 principles are: professional independence, mandate for data collection, adequacy of resources, quality commitment, statistical confidentiality, impartiality and objectivity, sound methodology, appropriate statistical procedures, non-excessive burden on respondents, cost effectiveness, relevance, accuracy and reliability, timeliness and punctuality, coherence and comparability, accessibility and clarity.

Health and safety statistics EU policy context

- Community action in the field of public health 2003-2008 and next 2007-2013
- « Open method of coordination » (OMC) on health care and long-term care
- Related indicators: European Community Health Indicators (ECHI), Structural indicators, Sustainable development indicators, OMC health/ long-term care indicators, etc.

Health and safety Statistics

- Public health - Three main topics:
 - ✓ Causes of death statistics (**COD**)
 - ✓ Health care statistics (**CARE**)
 - ✓ Health Interview Survey (**HIS**); incl. disability
 - ✓ Morbidity (new strand)
- Structure: Partnership on Public Health Statistics
 - ✓ Steering of methodological developments
 - ✓ Implementation of data collection and quality assurance
 - ✓ All 27 MS involved, 5 leadings countries
- Also Health and safety at Work Statistics
 - ✓ Accidents at work,
 - ✓ occupational diseases and other work-related health problems

Causes of death statistics (CoD)

- Annual data collection (since 1994)
 - ✓ total number, standardised death rates (**SDRs**), crude death rates (**CDRs**)
 - ✓ national and regional (NUTS 2)
 - ✓ **65 causes**
 - ✓ age, sex
- more detailed data (**ICD-10** 3 character level) available on request
- **Certification training tool** (web), TF on **automated coding**, **CoD glossary**

Health care statistics (CARE)

non-expenditure statistics

(Numbers and rates, series since 1970)

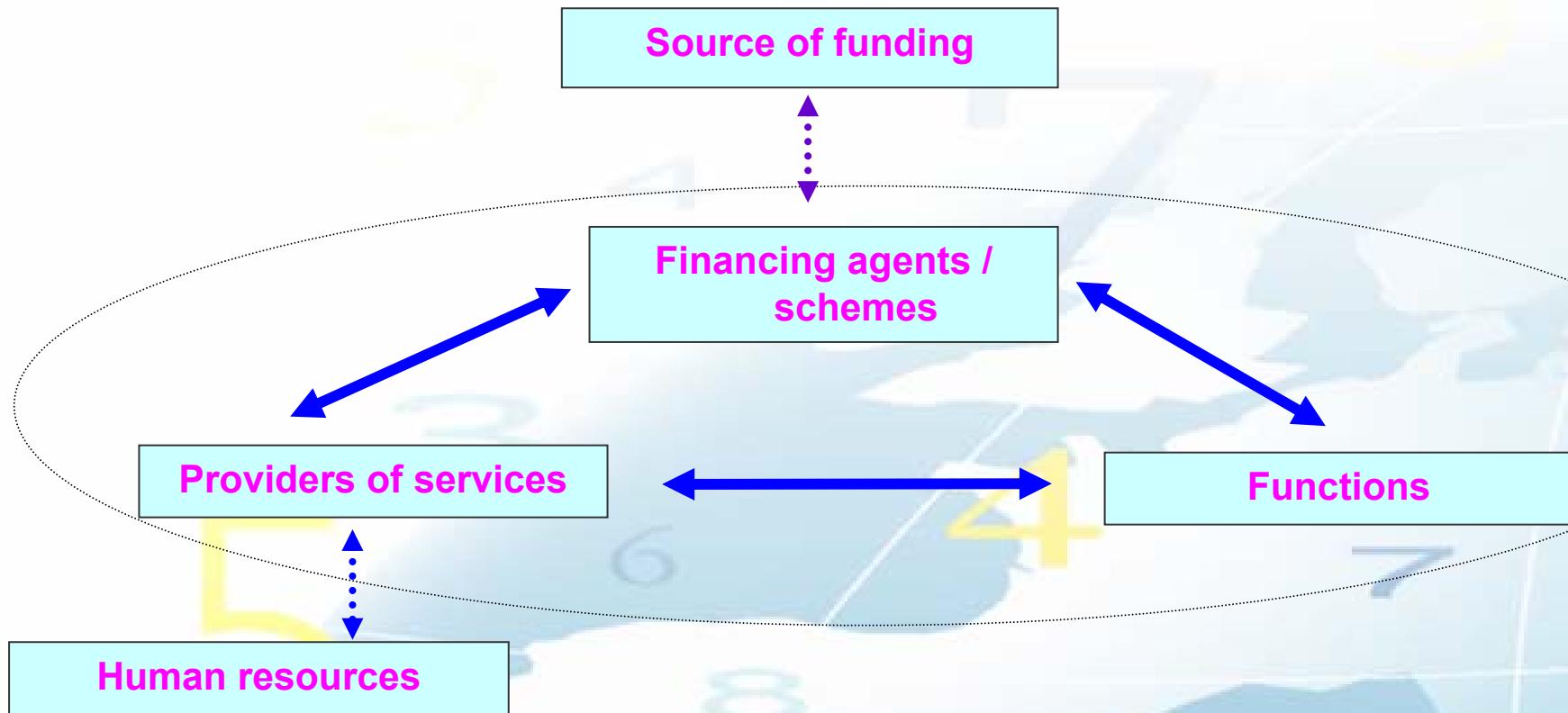
- 'Manpower' : Physicians, dentists, nurses, etc. , by NUTS2
- Hospitals statistics:
 - ✓ Beds by NUTS 2
 - ✓ Discharges by ISHMT, NUTS 2, age, sex, n° of nights
 - ✓ Procedures
 - ✓ High-tech equipment
- Common definitions agreed in 2006 with OECD

Health care statistics (CARE) expenditures statistics

- First System of Health Accounts - SHA collection
 - ✓ Joint questionnaire ESTAT/OECD/WHO sent end 2005 on 2003-2004 reference years - to be submitted by end of March 2006
 - ✓ About 20 EU MS sent the data, already checked, 1st dissemination by end of the year
 - ✓ Next request in December 2006 (in principle other MS will join)
 - ✓ Manuals, ICCHA classifications

Health care statistics (CARE) SHA Joint Questionnaire (expenditures)

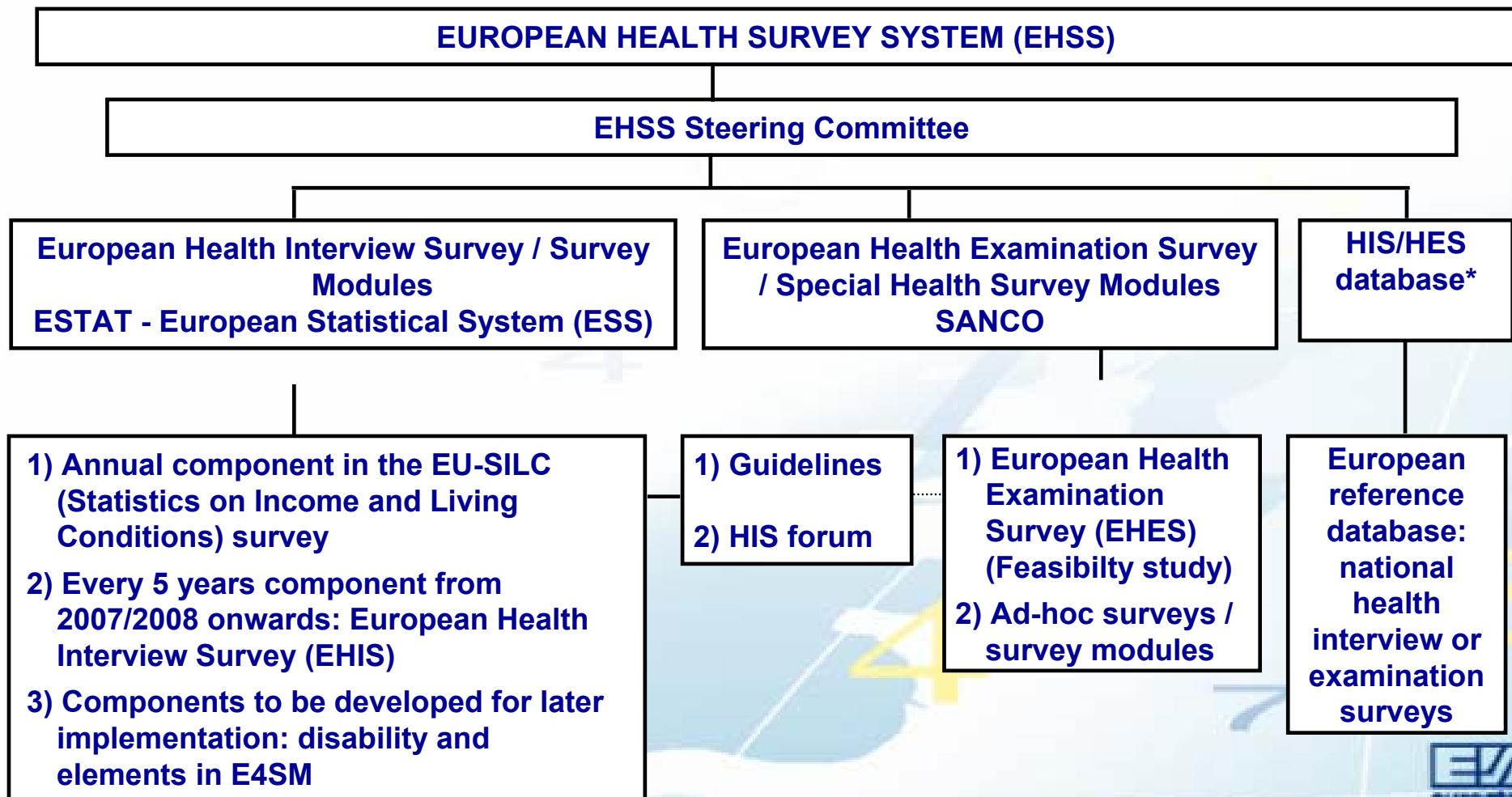
Structure of the Joint Questionnaire



Health Interview Survey (HIS); incl. disability

- Health Interview Surveys (HIS):
 - ✓ < 2004: 18 HIS items, post-harmonised: poor comparability
 - ✓ EU-SILC: Minimum European Health Module - MEHM + unmet needs of medical or dental care
 - ✓ EHIS (2007/08) and then every 5 years : better harmonisation (same questions, translation protocol, all MS involved in testing, etc.)
- Disability: LFS ad-hoc module 2002 on the "employment of disable people", special module to be developed in 2007-2008 (incl. social integration), cooperation with DG EMPL

European Health Survey System (EHSS)



* <https://www.ipb.fgov.be/hishes/>

European Health Interview Survey (EHIS)

- Questionnaire: health status, health care, health determinants + background variables; agreed 10/2006
- Flexibility in implementing the EHIS modules: they may be grouped in one separate national survey or they may be included in existing national surveys (i.e. national HIS, LFS, other household survey).
- 2 MS in 2006, majority of MS in 2007-2008 and few in 2009
- Then every 5 years, same year in all MS

Morbidity - 1st developments

- Non-survey Morbidity statistics
 - ✓ Aim: have a EU-wide system of official disease-specific morbidity statistics
 - ✓ **Morbidity Statistics Development Group** implemented in 2006 to develop proposals, implementation plans
 - ✓ Communicable diseases: data from registers and networks currently in Eurostat data but to be taken over by the **European Centre of Diseases Control** (Stockholm)
 - ✓ Cancer: IARC; AIDS; Euro-HIV; etc.

Access to Eurostat's statistics

- 'New' dissemination policy
 ⇒ free of charge (October 2004)
- <http://epp.eurostat.ec.europa.eu/>
 - ✓ 'Data' - self-defined extractions of the databases
 - ✓ 'Tables' - predefined tables
 - ✓ 'Indicators' (structural - HLY - , sustainable development, link with ECHI site of SANCO)
 - ✓ 'Publications' - pdf files
- Access to micro data for researchers: Regulation of 2002, limited to few surveys (LFS, SILC)