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**STATISTICAL OFFICE OF THE
EUROPEAN COMMUNITIES
(EUROSTAT)**

**CONFERENCE OF EUROPEAN
STATISTICIANS**

**WORLD HEALTH
ORGANIZATION (WHO)**

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on the Measurement of Health Status
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Session 3– Supporting paper

**ESTONIAN HIS 1996 IN THE EUROPEAN CONTEXT: SOME METHODOLOGICAL
ASPECTS**

Submitted by Ministry of Social Affairs, Estonia*

I. Estonian HIS 1996

‣ **General indicators of the survey**

- First nation-wide representative health-related survey in Estonia
- Based on census sample-frame, weighted sample size 4070, male 1911, female 2159, age range 15-79
- Response rate 84,3%
- 375 questions asked, average duration 107 minutes
- Applied event history methodology

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II. Event history modules in Estonian HIS 1996

- Household
- Health
- Reproductive health (separately for men and women)
- Education and occupation
- Home and childhood
- Medical assistance

See further in: Leinsalu, M., M. Grintshak, R. Noorkõiv and B. Silver. *Estonian Health Interview Survey. Methodological Report*. Institute of Experimental and Clinical Medicine. Tallinn 1998

III. Definition of health status in Estonian HIS 1996

- Focus on measurement of health loss
- Restriction in usual activities as the measurement unit
 - Usual activities defined as work, studies, partnership relations and daily self-managing in correspondence to one's age, gender and social status
- Definition through the health disorders
 - Without permanent health disorders
 - Disorders without repeated illness periods
 - Severe permanent disorders without restrictions in usual activities
 - Severe health disorders with restrictions in usual activities

IV. Health Disorders

	15-24	25-34	35-44	45-54	65-74	75+	Total
Healthy	28,53	30,67	30,53	35,69	35,13	31,17	32,32
No repeated disorders	27,09	26,52	34,34	26,05	24,08	25,33	27,87
Severe disorders, no restrictions	31,41	29,78	23,95	27,97	28,62	30,24	28,03
Disorders with restrictions	12,97	13,04	11,18	10,29	12,17	13,26	11,78

EUROHIS relevant question too vague: Do You have any long-standing illness or health problem?

➤ ESTHIS correspondence: Let us talk about the most substantial long-term health problems that you have ever had in your life. Try to recall them by areas of your body (5 main areas and other). Next are asked questions, if

- Ever had have (year)
- Did it bring about a long-term illness period in bed for at least 1 month or limited usual daily activities
- Has it recurred (when first, duation, last event)
- Have you had this health problem/illness also during last 12 months?
- Last question with greatest correspondence with EUROHIS gives the following result:

15-24	25-34	35-44	45-54	55-64	65-74	75+	Total
•17,72	18,81	22,11	21,22	16,85	23,95	27,31	20,27

V. Limitations in activities

➤ A person is limited in its usual activities if he or she has any limitations which have significantly restricted its usual activities, including restricted access to at least primary education, to working life (never worked or stopped working), to official institutions or concrete physical, sensory or self-managing limitations.

15-24	25-34	35-44	45-54	55-64	65-74	75+	Total
0.86	1.19	2.63	4.82	5.98	12.42	24.40	4.96

➤ In accordance with EUROHIS more general question: Do you feel healthy enough to do what you want each day (almost always, rather frequently, rarely, almost never)? Last 2 answers correspond to strongly limited

15-24	25-34	35-44	45-54	55-64	65-74	75+	Total
0.14	0.00	0.40	0.97	1.74	4.83	12.13	1.55

VI. Self-management limitations

➤ EUROHIS suggests 5 separate items for self-management whereas it is not so relevant in which item a person cannot manage exactly oneself. Estonia suggests

- one question which explores the severity in self-management in respect to performance of elementary management activities,
- another one whether one can manage by itself main tasks in homework (cooking, cleaning up, heating etc).

	15-24	25-34	35-44	45-54	55-64	65-74	75+	Total
Continuous help needed in homework tasks (cooking etc)	0.43	0.59	0.79	0.64	0.94	5.99	15.38	1.86
Continuous help needed in self-managing items (eating etc)	0.4	0.2	0.3	0.5	0.6	1.5	4.24	0.7

VII. SUGGESTIONS to EUROHIS

- Launch an all-European methodologically coordinated health survey under the aegis of UN or Eurostat
- Methodologically coordinate the application of event history methodology with UN ECE PAU (their valuable experience in FFS and GGS should be taken into account)
- Estonia could offer itself as a laboratory for such a survey and disseminate the experience from ESTHIS survey as the basis for a pilot project
- As health is a cumulative effect of all events in one's life cycle it should not be restricted to an estimation of the health status as a cross-sectional value as the effects of events and behaviours cannot be related and the real reasons for health loss cannot be brought out.
