

EURO-PERISTAT and EUROSTAT collaboration

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Collaboration with DG Health and Consumers and EUROSTAT

- Integrate the EURO-PERISTAT perinatal health indicators into routine European statistical and public health monitoring systems.
- The aim is to establish the legal and technical rules for a permanent system at the European level and within each member state **in collaboration with EUROSTAT, ECHIM and members of the EURO-PERISTAT Scientific Committee.**
 - Indicators which can be integrated into these systems will be identified and the most appropriate institutional organisation for each member state will be located.



Collaboration with DG Health and Consumers and EUROSTAT

1. DG Health and Consumers (SANCO) with contacts to Ministries of Health
2. EUROSTAT is the Statistical Office of the European Union with contacts to National Statistical Offices

DG Health and Consumers

- Health Programme 2008-2013:
 - Health Threats
 - Health Determinants
 - Health Information

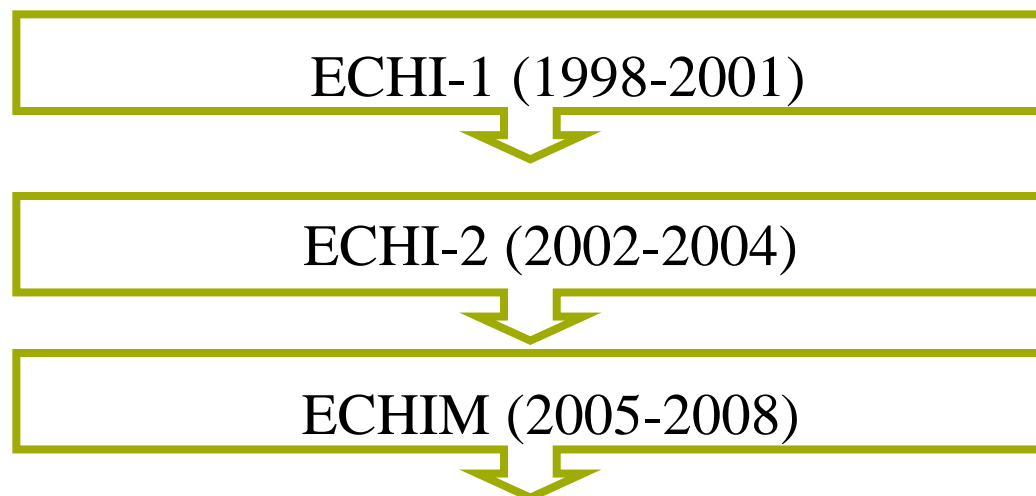
- Health for Growth 2014-2020:
 - http://ec.europa.eu/health/programme/policy/proposal2014_en.htm
 - Aims:
 - To develop innovative and sustainable health systems
 - To increase access to better and safer healthcare for citizens
 - To promote health and preventing disease
 - To protect citizens from cross-border health threats
 - Limited resources for health information. Health knowledge emphasised.

DG Health and Consumers (SANCO)

- Public Health Monitoring is an important part of DG's work. Unit C2 is working with health information and knowledge.
- The monitoring includes:
 - Health Reports: EUGLOREH, EUROPERISTAT, REPROSTAT, Report on women's health, Report on men's health, Healthy Life Years...
 - HEIDI Health in Europe: Information and Data Interface - is a comprehensive search tool for European health information and data. It contains information about health status, determinants, diseases, health systems, trends, institutional and policy aspects etc.
 - https://webgate.ec.europa.eu/sanco/heidi/index.php/Main_Page
 - Health data: Indicator database and presentation tool

HISTORY OF ECHI

European Community Health Indicators



JOINT ACTION FOR ECHIM (2009-2012)

1. To **consolidate** and **expand** the ECHI Indicator system towards a sustainable health monitoring system in Europe
2. To **collect** and **disseminate** comparable health data and information based on the ECHI shortlist

Joint Action ECHIM

1. **To improve, document and maintain the ECHI Indicators**
2. **To develop guidelines and Member State specific plans** for ECHI shortlist indicators implementation at Member State, regional and EU-level, as needed
3. **To implement ECHI shortlist indicators** in Member States and to achieve a good coverage
4. **To maintain a network** of national health indicator experts for ECHI Indicators and the needed data collection
5. **To map, design and test the data flow** between Member States and a central capacity for health monitoring
6. **To present health data** based on the ECHI shortlist
7. **To produce the first joint analysis** and report on data based on the ECHI shortlist indicators

Relevant ECHI indicators

2. Birth rate, crude	Eurostat	Live births per 1000 population
3. Mother's age distribution	Eurostat	Percentage of live births in mothers in five year age groups
4. Total fertility rate	Eurostat	Total fertility rate
11. Infant mortality	Eurostat	Infant mortality per 1000 live births
12. Perinatal mortality	WHO-HFA	Weight specific (1000 g +) fetal deaths and early neonatal deaths per 1000 births (live births and stillbirths).
28. (Low) birth weight	WHO-HFA	Percentage of live births with weighing less than 2500 grams
45. Pregnant women smoking		Indicator to be developed
51. Breastfeeding		Indicator to be developed
61. Timing of first antenatal visits among pregnant women		Indicator to be developed
73. Surgical procedures	Eurostat	Including Caesarean sections

European
Community
Health
Indicators
Monitoring
ECHIM

FUTURE?

- Permanent functions must not be funded by project funds.
- Some of the functions may be taken by DG Sanco.
- The ideal solution would be to initiate a unit or centre for public health monitoring and reporting.
- These tasks may also be given to an existing EU unit.



Social Statistics at EUROSTAT

European Statistical System

Unit F for Social Statistics at EUROSTAT

F5 Education, health and social protection

Directors of Social Statistics

Working Group of Public Health Statistics



- | | |
|------------------------------------|--------------------|
| 1. Cause-of-Death Statistics | 2014 → |
| 2. European Health Interview Study | 2014, 2019 → |
| 3. Health Care Statistics | |
| Health expenditure data | 2014 → |
| Non-health expenditure data | 2017 → |
| 4. Morbidity Statistics | Task force 2011-13 |

Several constraints

1. EUROSTAT has one principal partner in each country, while EURO-PERISTAT often gets data from several sources.
2. The contact people for the two systems are probably not the same.
3. To include an indicator in the Eurostat system, agreement is required from all member states. Many of the EURO-PERISTAT indicators are not available in all countries.
4. The negotiation of new regulations is a lengthy process and Eurostat has just completed new implementation measures of the regulation specifying the rules for collection of data on fetal and neonatal deaths.

Positive points

1. Eurostat is currently assessing which routinely collected morbidity indicators it can integrate into its system.
2. The current version does not include any data related to pregnancy or newborns, but an interest in having perinatal morbidity indicators was raised during the meeting.

Core indicators 1-5

1	Fetal mortality by gestational age and birth weight	New implementation regulation, but detailed information collected on voluntary bases	No common definition. Induced abortions after 22 weeks are not included.
2	Neonatal mortality by gestational age and birth weight	Not available	Only total numbers collected.
3	Infant mortality by gestational age and birth weight	Not available	Only total numbers collected.
4	Infant mortality by birth weight	Not available	Only total numbers collected.
5	Distribution of birth weight, total and by gestational age	Not available	



Core indicators 6-10

6	Maternal mortality by maternal age and mode of delivery	Age-specific data from mortality data.	No data for mode of delivery.
7	Multiple births	Not available	
8	Distribution of maternal age	Available	Calculated per live births instead of deliveries.
9	Distribution of parity	Available	Calculated per live births instead of deliveries.
10	Mode of delivery by parity, previous section, presentation and plurality	Not available	Only the number of sections available in hospital procedures

Recommended indicators

1	Prevalence of congenital anomalies	Not available	Alternative data source: EUROCAT
3	Maternal mortality by cause of death	Can be collected from detailed mortality data.	
4	Women who smoke during pregnancy	Not available	Alternative future data source: ECHIM
6	Births after fertility treatment	Not available	Alternative data source: ESHRE
10	Breastfeeding at birth	Not available	Alternative future data source: ECHIM

Other variables (Distribution of Apgar score at 5 minutes, Mother's education, Timing of 1st antenatal visit, Mode of onset of labour by gestational age, Place of birth and Very-preterm births by level of care not available).

The way forward

- Create contacts with Eurostat Population Statistics.
- EURO-PERISTAT will prepare reports for each country to identify the data sources and the individuals/institutions responsible for data collection for EURO-PERISTAT and EUROSTAT.
- After London meeting, country-specific scenarios for transmission of perinatal health indicators within each member state will be discussed. A strategy for promoting these objectives on the national/European level will be developed.

The way forward

- An advisory group to develop recommendations about the indicators which could be included in the Eurostat system.
 - the next Eurostat technical meeting on Causes of Death Statistics (2013)
- Available data sources/indicators will be compared and any discrepancies reported in the next EURO-PERISTAT report.
- Eurostat will be an external advisor to EURO-PERISTAT feasibility study on using hospital discharge data for constructing maternal morbidity indicators.