

EUROPEAN COMMISSION EUROSTAT Directorate F: Social Statistics Unit F-4: Income and living conditions; Quality of life

2017 EU-SILC Module "Health and Children's Health"

Assessment of the implementation

18 June 2019



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Abbreviation

BMI	Body Mass Index
EC	European Commission
ESS	European Statistical System
EU-SILC	Statistics on Income and Living Condition
ISCO	International Standard Classification of Occupations



0. Introduction

This report will present the analyses of the data of EU-SILC 2017 ad-hoc module on Health and Children's Health.

The variables to be implemented are according to the Commission Regulation (EU) 2016/114 of 28 January 2016 implementing Regulation (EC) No 1177/2003 of the European Parliament and of the Council concerning Community statistics on income and living conditions (EU-SILC) as regards to the 2017 list of target secondary variables on health and children's health¹.

The SILC 2017 ad-hoc module was used as a tool for further testing rolling modules' variables with focus on health-related variables but including other topics as well.

The module was divided into two parts:

- Part 1: Module on Health and Children's Health, which includes variables proposed for future 3-yearly module on health and variables on health of children intended for future 3-yearly module on children. This part is implemented according to regulation which means that all variables would be collected in all countries bound by SILC legislation;
- Part 2: Supplementary variables on health, labour, over-indebtedness, consumption and wealth, which cover various topics considered for future SILC modules. This part is implemented via a special legal instrument called ESS Agreement², which consists of a commitment of countries to implement variables for at least one topic. Part 2 was tested in several countries and will not be part of this assessment.

After a brief introduction in sections 1 and 2 on the context and main features of the 2017 Module, section 3 presents the availability of the data, and section 4 focuses on the main definitions agreed to describe the variables. Section 5 introduces an analysis of the frequencies for each variable among countries and questions characteristics applied to national version. In section 6 the flags are analysed. Finally, the last section concludes this document.

1. Main characteristics

1.1 Relevance

The 2017 ad-hoc module include a list of target secondary variables on health and children's health, part of the cross-sectional component of EU-SILC. The list of variables on health and children health responds to policy needs expressed in the Commission Regulation.

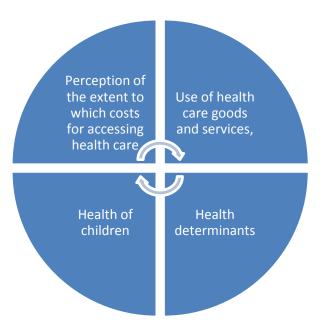
Ad-hoc modules are developed each year in order to ensure the need for updated data and fulfil uncovered aspects of measured indicators collected at household and individual level related with social inclusion. Ad-hoc modules ensures productions of several cross-sectional comparable indicators disaggregated with poverty and social inclusions indicators. An important aspect with an impact on living conditions, income and social inclusion is the health.

¹ https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32016R0114&from=EN

² https://ec.europa.eu/eurostat/documents/1012329/6073921/ESS+A+2017+SILC+adm+-

⁺clean+version+after+last+DSS+consultation.pdf/b83e7a0c-ec50-4f68-b952-8cd50df2a67b





The 2017 SILC ad-hoc module variables measure

- Perception of the extent to which costs for accessing health care (medical care, dental care, medicines) are a financial burden to the household. The variable would enable collecting qualitative information about the need to pay and the consequences of paying out of pocket,
- Use of health care goods and services,
- Health determinants (Body Mass Index (BMI), the work-related physical activity, the total time in a typical week spent on physical activity, consumption of fruit and vegetables),
- Health of children: For each child aged 0 15 years currently living in the household: perceived general/overall health of a child, long-standing limitation (and its severity) in activities of a child of certain age (0 to 15 years old) because of health problems, restricted access to medical care via the person's own assessment of whether the children in the household needed medical examination or treatment, but didn't get it, experienced a delay in getting it or didn't seek for it.

1.2 List of supplementary target variables

The 2017 ad-hoc module on health and children health was included in the 2017 EU-SILC operation. It contains 17 variables of which 11 are 'adult items': 3 asked at household level and 8 at personal level. The remaining 6 variables are related to children aged 0-15 years old and 4 are collected at household level and 2 in the household grid for each child under 16. The respective children weights are computed for children part of the household and children included to the household grid.

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Compulsory adult items collected at household level

Health/Access to health care HS200: Financial burden of medical care HS210: Financial burden of dental care HS220: Financial burden of medicines

Compulsory adult items collected at household level

<u>Health/Health care</u> **PH080**: Number of visits to a dentist or orthodontist **PH090**: Number of consultations of a general practitioner or family doctor **PH100**: Number of consultations of a medical or surgical specialist

<u>Health/Health determinants</u> **PH110**: Body mass index (BMI) **PH120**: Type of physical activity when working **PH130**: Time spent on physical activities (excluding working) in a typical week **PH140**: Frequency of eating fruit **PH150**: Frequency of eating vegetables or salad

Compulsory child items collected at household grid for every child

<u>Children's health/Health status (children)</u> **RC010T**: General health (child) **RC020T**: Limitation in activities because of health problems (child)

Basic data/Basic personal data RC030T: Module child 0-15 personal weight (optional)

Compulsory child items collected at household level:

Children's health/Access to health care (children)

HC010T: Unmet need for medical examination or treatment (children)
HC020T: Main reason for unmet need for medical examination or treatment (children)
HC030T: Unmet need for dental examination or treatment (children)
HC040T: Main reason for unmet need for dental examination or treatment (children)

Basic data/Basic personal data HC050T: Module child 0-15 household weight (optional)



1.3 Unit of analysis

The target variables relate to different types of units:

- Information on financial burden applies at household level and refers to the household as a whole.
- Information on health is to be provided for each current household member or, if applicable, for all selected respondents aged 16 and over.
- Information on general health and limitation in activities because due to health problems is to be provided for each child aged 0-15.
- Information on unmet need for dental or medical examination or treatment for children applies at household level and refers to all children aged 0-15 living in the household as a whole.
- Age refers to the age at the time of the interview (described in methodological guideline: <u>2017 EU-SILC 2017 operation (Version May 2017)</u>).

1.4 Mode of data collection

The information collected in 2017 EU-SILC ad-hoc module pertains to the following types of units: household and individual level.

For variables applying at household level the mode of data collection is personal interview with the household respondents.

For variables applying at individual level, the mode of data collection is personal interview with all current household members aged 16 and over or, where applicable, with each selected respondents.

For children's variables, the mode of data collection is personal interview with the household respondents.

The information is collected through using personal interviews (proxy interviews as an exception for anyone temporarily absent or incapacitated) were acceptable. The body mass index (BMI) variable is computed from height and weight collected during the interview or directly collected from the interviewee using a show card. Only the BMI value has to be transmitted to Eurostat.

1.5 Reference period

The target variables relate to the different types of reference period:

- Current reference period: for the BMI variable, the general health for children and the limitation in activities because of health problems for children,
- A typical week: for the variables related to physical activity,
- A typical week in a given season: for the frequency of eating fruit and vegetables,
- Last 12 months: for all other variables.

1.6 Data transmission

The target secondary variables should be sent to the Commission (Eurostat) in the Household Data File (H-File), the Register Data File (R-File) and in the Personal Data File (P-file) after the target primary variables. The ad-hoc 2017 module variables shall be recorded with EU-SILC nucleus and corresponds these three aggregate files.

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2. Description of the definitions

This section describes the main definitions used for describing the variables in the 2017 ad-hoc module.

2.1 Health/Access to health care

- Medical care: refers to individual health care services (examinations or treatments) provided by or under direct supervision of medical doctors, traditional and complementary medical or equivalent professions according to national health care systems. Included: -health care provided for different purposes (curative, rehabilitative, long-term health care) and by different modes of provision (inpatient, outpatient, day, and home care), medical mental health care, and preventive medical services. Excluded: taking prescribed or non-prescribed drugs, dental care.
- Dental care: refers to individual health care services (examination or treatment) provided by or under direct supervision of stomatologists (dentists). Included: health care provided by orthodontists, preventive dental services. Excluded: self-medication (taking prescribed or non-prescribed drugs), medical care.
- Medicines: are products that are used to alleviate symptoms, to prevent illness, or to improve poor health, and which are ordinarily purchased from a pharmacy (including hospital pharmacy).

2.2 Health care

- Dentist/stomatologist: a professional who provides comprehensive care regarding teeth and oral cavity, including prevention, diagnosis and treatment of aberrations and diseases. Dentist's tasks include: making diagnosis, advising on and giving necessary dental treatment, giving surgical, medical and other forms of treatment for particular types of dental and oral diseases and disorders.
- Orthodontist: a dental specialist who diagnoses, prevents and corrects irregularities of the teeth and jaw problems (for example, correcting misaligned teeth through the use of braces).
- Visit: consultation in a dentist/stomatologist's or orthodontist's office.
 - Included: Visits to a dentist or orthodontist in foreign countries, e.g. during vacations abroad.
 - Excluded: Home visits and consultations by telephone. Visits due to oral health of other persons, such as children or elderly relatives.
- General practitioner (GP): or family doctor is a physician (medical doctor) who does not limit his/her practice to certain disease categories and assumes the responsibility for the provision of continuing and comprehensive medical care or referring to another health care professional. In some countries, GP is treated as a specialisation.
- Consultation: a visit to the doctor's office, home visit, emergency department at hospital, a
 consultation by telephone or e-mail. Only consultations on respondent's behalf are considered that is
 contacts that focus on respondent's health.



- Medical or surgical specialists: refers to physicians that are medical specialists, including dental and other surgeons, but not general dentists. Their tasks include: conducting medical examination and making diagnosis, prescribing medication and giving treatment for diagnosed illnesses, disorders or injuries, giving specialized medical or surgical treatment for particular types of illnesses, disorders or injuries, giving advice on and applying preventive medicine methods and treatments. Included are also general gynaecologists or other specialities that may be called in some countries as 'general' but fulfilling the above definition.
- Visits to doctors at the workplace or school: tasks of doctors at the workplace or school may differ between countries. If their tasks cover mainly or the reason for visiting these doctors is occupational health care (preventive, curative or any other) then the doctors should be treated as specialists. If the nature of their task is mainly general medicine, they should be treated as GPs.

2.3 Health determinants

- Body mass index (BMI): the body mass index (BMI) is a measure of a person's weight relative to their height that links fairly well with body fat. The BMI is used as a measure of obesity for adults (those aged 18 years and over) when only weight and height data are available. It is calculated as a person's weight (in kilograms) divided by the square of his or her height (in metres): BMI = weight (kg) / [height * height] (m²).
- Height: the concept of height refers to body length measured without wearing shoes.
- Weight: the concept of weight refers to weight without clothes and shoes. For women who are
 pregnant the weight before pregnancy is of interest.
- Working: refers to a broad understanding of 'work' including all the things that people have to do as a
 part of their daily work activities. 'Doing work' includes not only paid and unpaid work, work around
 the person's home, taking care of family, studying or training, but also seeking a job, doing volunteer
 work or care for the elderly.
- Mostly sitting or mostly standing: refers to working tasks involving light physical effort which involve mostly sitting or standing activities. Only standing activities that do not involve extra physical effort should be included.
- Mostly walking or tasks of moderate physical effort: refers to working tasks which involve mostly walking or tasks involving moderate physical effort.
- Mostly heavy labour or physically demanding work: refers to working tasks involving heavy physical effort. Examples: using heavy power tools, heavy construction work, mining, carrying heavy loads, loading, stacking or chopping wood, clearing land, shovelling or digging, spading, filling - garden, etc.



- Sport: refers to physical activity which is structured, repetitive and usually requires skills. Sports are
 often aerobe physical activities, competitive or performed as a game. Examples: ball games, athletics,
 competitive bicycling, running, swimming, etc.
- Fitness: refers to the act or process of retaining or improving physical fitness. Fitness often relates to
 physical exercise. Examples: endurance training, strength exercise, flexibility training, etc.
- Recreational (leisure) physical activity: refers to the act or process of creating regeneration by performing physical activities that cause at least a small increase in breathing or heart rate. 'Recreational activities' are physical activities performed in leisure time (nordic walking, brisk walking, ball games, jogging, bicycling, swimming, aerobics, rowing, badminton, etc.).
- Transport physical activity (commuting activity): refers to activities of getting to and from places. Travelling for long journeys (irregular travelling) are not to be included here (walking or cycling from home to work/school and back home, from work to market, from market to home.
- Causing at least a small increase in breathing or heart rate: refers to moderate- or vigorous-intensity sports, fitness or recreational (leisure) activities which are physically demanding and lead at least to a small increase in breathing or heart rate.
- At least 10 minutes continuously: refers to an activity (brisk walking, ball games or jogging) which is
 performed for at least 10 minutes at a time without interruption.
- A typical week in given season: it refers to a 'typical' 7-day week, including weekdays and weekend days in given season (the season of the interview).

2.4 Children's health/Health status (children)

- Health problems: limitations due to financial, cultural or other none health-related causes should not be taken into account.
- Activity: an activity is defined as: 'the performance of a task or action by an individual' and thus activity limitations are defined as 'the difficulties the individual experience in performing an activity'.
- Activity limitations: the activity limitations of the child are assessed against typical activities in reference to that child's cohort. Activities cover all spectrums of activities: self-care and transportation, work or school, home and leisure activities. Temporary or short-term limitations are excluded. This means that a positive answer ("severely limited" or "limited but not severely") should be recorded only if the person is currently limited and has been limited in activities for at least the past 6 months.



2.5 Children's health/Access to health care (children)

Delay in getting care: however, a specification of time reference between emerging the need for the service and the time of having the service is not possible as for different health conditions/problems different time references would be needed. It is up to respondents to consider if the delay was too long and if they consider it as unmet need. The variable refers to all children in the household aged under 16 years old. Even if only one child in the household does not receive care, the whole group of children in the household are assumed not to have access to health care.

3. Availability of data

Module on Health and Children's Health includes variables proposed for future 3-yearly module on health and variables on health of children intended for future 3-yearly module on children. This module is implemented according to Commission Regulation, which means that all variables are collected in all countries bound by SILC legislation. So, it is obligatory for countries taking part in this agreement, i.e the EU-28 member states. These data are also collected from the EFTA countries, Iceland, Norway and Switzerland and from the EU candidate countries such as the North Macedonia, Montenegro and Serbia that are implementing EU-SILC.

After evaluation of results of 2017 ad-hoc module, finalization of 3-yearly health module will need to be aligned with EHIS and SILC modules on Children, Access to services and Quality of life in order to ensure coherence among sources, harmonisation of the implementation and statistical unit in order to ensure high level of comparability of results.

All countries collected and sent data for individual variables collected for individuals aged 16 years and over (PH080, PH090, PH100, PH110, PH120, PH130, PH140, PH150) and for children variables (RC010T, RC020T, HC010T, HC020T, HC030T). From the EFTA countries, Norway and Switzerland collect and submitted data while, Iceland has collected but still not send the data. From the EU candidate countries North Macedonia, Montenegro and Serbia collected and submitted data for all the 17 variables.

4. Analysis of the variables

The analysis below describes each variable modalities and flags used by the countries. The guidelines detail the definitions of variables, way of asking, reference periods, reference age, and flags; as described here <u>2017 EU-SILC 2017 operation (Version May 2017)</u>.



4.1 Variable list

HS200: Financial burden of medical care

Values		
1	Heavy burden	
2	Somewhat burden	
3	Not a burden at all	

Table 1: HS200- Descriptive statistics

HS200	Mean	Std Dev
1.Heavy burden	13.8	10.0
2.Somewhat burden	32.1	15.9
3 Not a burden at all	54.1	24.5

Main results

The most frequent answer is the third modality 'not a burden at all' with an average of 54.1% and a standard deviation of 24.5. The highest frequency for this answer is found in United Kingdom (91.6%) and the lowest in Italy (2.6%).

The least frequent answer is the first modality 'heavy burden' with an average of 13.8% and a standard deviation of 10.0. The highest frequency for this answer is found for Cyprus (39.4%) and the lowest in United Kingdom (1.9%).

- Countries that are above 80% "not a burden" (modality "3" >80%): DK, SE, NO, SI, EE, FR, UK.
- Countries that are between 80% and 50% "not a burden" (50% modality "3" <80%): DE, LT, HU, LU, HR, BE, CZ, RS, ES, AT, IE, FI, NL, PT.
- Countries that are below 50% "not a burden" (modality "3" <50%): IT, CY, BG, MK, LV, MT, PL, EL, SK, RO, ME, CH.



HS210: Financial burden of dental care

Values		
1	Heavy burden	
2	Somewhat burden	
3	Not a burden at all	

Table 2: HS210- Descriptive statistics

HS210	Mean	Std Dev
1.Heavy burden	17.6	10.6
2.Somewhat burden	33.9	13.1
3 Not a burden at all	48.7	21.9

Main results

The most frequent answer is the third modality 'not a burden at all' with an average of 48.7% and a standard deviation of 21.9. The highest frequency for this answer is found in United Kingdom (79.8%) and the lowest in Italy (2.2%).

The least frequent answer is the first modality 'heavy burden' with an average of 17.6% and a standard deviation of 10.6. The highest frequency for this answer is found for Cyprus (46.4%) and the lowest in Netherlands (4.4%).

- Countries that are above 80% "not a burden" (modality "3" >80%): no countries.
- Countries that are between 80% and 50% "not a burden" (50% modality "3" <80%): AT, BE, CZ, DE, DK, EE, FI, FR, HR, HU, IE, LU, NL, NO, RS, SE, SI, UK.
- Countries that are below 50% "not a burden" (modality "3" <50%): PL, IT, BG, CY, MK, LV, SK, MT, LT, EL, ME, PT, RO, CH, ES.



HS220: Financial burden of medicines

Values		
1	Heavy burden	
2	Somewhat burden	
3	Not a burden at all	

Table 3: HS220- Descriptive statistics

HS220:	Mean	Std Dev
1.Heavy burden	16.0	10.7
2.Somewhat burden	36.5	15.6
3.Not a burden at all	47.5	24.3

Main results

The most frequent answer is the third modality 'not a burden at all' with an average of 47.5% and a standard deviation of 24.3. The highest frequency for this answer is found in France (90.0%) and the lowest in Poland (3.4%).

The least frequently used answer is the first modality 'heavy burden' with an average of 16.0% and a standard deviation of 10.7. The highest frequency for this answer is found for Poland (39.8%) and the lowest in France (1.6%).

- Countries that are above 80% "not a burden" (modality "3" >80%): DK, FR, NO, UK.
- Countries that are between 80% and 50% "not a burden" (50% modality "3" <80%): AT, BE, DE, EE, FI, IE, LU, NL, SE.
- Countries that are below 50% "not a burden" (modality "3" <50%): PL, IT, BG, CY, MK, LV, SK, MT, LT, CZ, EL, ME, HU, PT, RS, HR, RO, ES, SI, CH.



PH080: Number of visits to a dentist or orthodontist

Values		
1	None	
2	1-2 times	
3	3-5 times	
4	6-9 times	
5	10 times or more	

Table 4: PH080- Descriptive statistics

PH080	Mean	Std Dev
1.None	47.1	19.7
2.1 to 2 times	40.7	17.2
3.3 to 5 times	9.5	3.9
4.6 to 9 times	1.7	0.9
5.10 times or more	0.9	0.5

Main results

The most frequent answer is the one modality 'none' with an average of 47.1% and a standard deviation of 19.7. The highest frequency for this answer is found in Romania (81.7%) and the lowest in Germany (13.8%).

The least frequently used answer is the fourth and five modality "6-9 times" and "10 times or more" grouped as more than 6 times with an average around 2.6%. The highest frequency for this answer is found for Slovenia (5.8%) and the lowest in Denmark (almost 0%).

- Countries that are above 70% 'none' (modality "1" >70%): BG, EL, HU, ME, MK, RO.
- Countries that are between 70% and 50% 'none' (50% modality "1" <70%): EE, ES, FR, HR, IE, IT, LT, PL, RS.
- Countries that are below 50% 'none' (modality "1" <50%): DE, NL, LU, CZ, NO, SK, UK, AT, SE, BE, DK, CY, SI, FI, MT, PT, LV, CH.



Values			
1	None		
2	1-2 times		
3	3-5 times		
4	6-9 times		
5	10 times or more		

PH090: Number of consultations of a general practitioner or family doctor

Table 5: PH090- Descriptive statistics

PH090	Mean	Std Dev
1.None	27.7	13.2
2.1 to 2 times	35.6	8.2
3.3 to 5 times	22.0	5.7
4.6 to 9 times	7.5	3.1
5.10 times or more	7.1	4.6

Main results

The most frequent answer is the second modality '1 to 2 times' with an average of 35.6% and a standard deviation of 8.2. The highest frequency is found in Slovakia (47.2%) and the lowest one in North Macedonia (17.3%). The following highest modality is 'none'. The highest frequency for this answer is found in Greece (60.5%) and the lowest in Germany (10.7%).

The least frequently used answer is the fourth and five modality "6-9 times" and "10 times or more" with an average of 14.6%. The highest frequency for this answer is found for Denmark (46.0%) and the lowest in Greece (3.8%).

- Countries that are above 50% 'none' (modality "1" >50%): BG, EL, and MK.
- Countries that are between 20% and 50% 'none' (20% modality "1" <50%): CH, CY, EE, ES, FI, HR, HU, IE, IT, LT, LV, ME, NL, NO, PL, RO, RS, SE, SI, UK.
- Countries that are below 20% 'none' (modality "1" <20%): DE, LU, CZ, DK, BE, FR, MT, AT, SK, PT.
 Countries that are above 20% "6 times or more" (modality "4+5"> 20%): AT, BE, DK, HU, and RS.



Values		
1	None	
2	1-2 times	
3	3-5 times	
4	6-9 times	
5	10 times or more	

PH100: Number of consultations of a medical or surgical specialist

Table 6: PH100-Descriptive statistics

PH100	Mean	Std Dev
1.None	53.9	15.6
2.1 to 2 times	28.2	8.8
3.3 to 5 times	11.5	4.8
4.6 to 9 times	3.5	1.8
5.10 times or more	2.9	1.7

Main results

The most frequent answer is the one modality 'none' with an average of 53.9% and a standard deviation of 15.6. The highest frequency for this answer is found in Romania (87.9%) and the lowest in Germany (21.7%).

The least frequently used answer is the fourth and five modality '6-9 times' and '10 times or more' with respectively with an average of 3.5% and a standard deviation of 1.8 for the modality '6-9 times' and an average 2.9% and standard deviation 1.7 for the modality '10 times or more'. The highest frequency for 6 or more times consultations of a medical or surgical specialist is found for Czechia (14.4%) and the lowest in Romania (1.0%).

Groupings:

- Countries that are above 70% 'none' (modality "1" >70%): RO, MK, EL, ME.
- Countries that are between 70% and 50% 'none' (50% modality "1" <70%): RS, CH, PL, HU, LT, NL, FI, HR, DK, NO, MT, UK, SE, BG, IE.
- Countries that are below 50% 'none' (modality "1" <50%): DE, CZ, LU, AT, CY, IT, FR, BE, SK, SI, ES, PT, EE, LV.

Countries that are above 10% "6 times or more" (modality "4+5"> 10%): AT, CY, LU, DE, and CZ.



PH110: Body mass index (BMI)

Values		
18	integer part of BMI value is equal or lower than 18	
19-24	an integer number when the integer part of BMI value is higher than 18.5 and lower than 25	
25-29	an integer number when the integer part of BMI value is higher than 25 and lower than 30	
30	integer part of BMI value is equal or higher than 30	

Main results

The values are grouped in four categories BMI less than 18 is labelled underweight; BMI between 18 and less than 25 is normal weight; BMI between 25 and less than 30 is grouped as pre-obese; BMI equal or greater than 30 is grouped as obese. The overall average of PH110 is 25.3% and the standard deviation is 4.6.

The highest frequency for 'underweight' modality is found in France (5.8 %) and the lowest in Romania (1.1%).

The country with the highest modality 'obese' is Malta (25.5%) while with the lowest one is Romania (10.2%). The highest frequency for modality 'normal' is found in Switzerland (52.6%) while the lowest one is found in Malta (35.4%).

Also, the modality 'pre-obese' have a considerable variation in the levels reported by the countries. The highest frequency for the 'pre-obese' is found in Romania (51.6%) and the lowest one in France (30.1%). Countries with obesity distribution over 20%: CZ (20.3%), EE (20.8%), FI (20.3%), LV (21.2%), MT (25.5%) and UK (22.6%).

DE, DK, EL, IT, ME, SE are not presented during low reliability.



PH120: Type of physical activity when working

Values		
1	Mostly sitting	
2	Mostly standing	
3 Mostly walking or tasks of moderate physical effort		
4	Mostly heavy labour or physically demanding work	

Table 7: PH120 – Descriptive statistics

PH120	Mean	Std Dev
1. Mostly sitting	37.1	6.4
2. Mostly standing	16.7	10.4
3. Mostly walking or moderate physical effort	38.6	8.9
4. Mostly heavy physical effort	7.6	2.0

Main results

The most frequently used activities are 'sitting' and 'moderate physical effort'.

The average o modality 'sitting' is 37.1% and a standard deviation of 6.4. The highest frequency for this answer is found in Germany (49.6%) and the lowest in North Macedonia (24.7%).

The countries with the highest modality 'standing' is found for Spain (45.9%) while with the lowest one is Lithuania (4.7%).

The third modality 'mostly walking or tasks of moderate physical effort' have an average 38.6% and standard deviation 8.9. The highest frequency for this modality is found for Lithuania (53.7%) and the lowest in Spain (15.3%).

The least frequently used is the fourth 'heavy physical effort' when the highest frequency found is for Latvia (11.4%) and the lowest are in Malta (3.9%).



PH130: Time spent on physical activities (excluding working) in a typical week

Values

vc	alues		
	ННММ	The total number of hours and minutes per week (4- digit code)	
	00 – 99	HH (hours)	
	00 – 59	MM (minutes)	

Main results

The most frequent answer is the third modality '0 hours'. The highest frequency for this answer is found in Serbia (66.7%) and the lowest in Slovakia (0%).

Grouping countries by time spend in physical activities and frequency is above 50%:

- Zero hours: Portugal (55.2%), North Macedonia (56.3%), Croatia (64.0%), Serbia (66.7%);
- Less than 1 hour: Luxembourg (72.1%);
- 1 hour to 5 hours: Slovakia (54.3%), Romania (57.3%), Germany (52.7%), Austria (59.7);
- 5 hours or more: Estonia (71.3%).

For each modality, we have a list of countries that have a frequency equal to 0:

- Zero hours: Austria, Slovakia;
- Less than 1 hour: Serbia (almost zero)
- 1 hour to 5 hours: Luxembourg
- 5 hours or more: Luxembourg



PH140: Frequency of eating fruit

Values				
1	Twice or more a day			
2	Once a day			
3	4 to 6 times a week			
4	1 to 3 times a week			
5	Less than once a week			
6	Never			

Table 8: PH140- Descriptive statistics

PH140	Mean	Std Dev
1. Twice or more a day	21.8	10.2
2. Once a day	36.4	5.3
3. 4 to 6 times a week	16.6	5.3
4. 1 to 3 times a week	18.1	6.3
5. Less than once a week	5.7	2.7
6. Never	1.5	1.1

Main results

The most frequent answer is the modality 'once a day' and 'twice or more a day'. The average of the modality 'twice or more a day' is 21.8% and standard deviation 10.2 and for the modality, 'once a day the average is 36.4% and standard deviation 5.3. If we group together category one and two, the highest frequency of consuming fruits 'per day: once or twice' is in Italy (84.6%) and the lowest in Latvia (35.0%).

The least frequently used answer is the sixth category 'never' where the answers varies from almost 0% in Spain to 4.0% to Belgium and United Kingdom (average 1.5% and standard deviation 1.1).

Many countries have their highest frequencies in average at their first and second modalities, 'above 50%'. All the countries have in average at the fifth modality 'less than once a week', less than 12%.

All the countries have in average at the sixth modality, 'never', less than 5%.



		5
Values		
1	Twice or more a day	
2	Once a day	

PH150: Frequency of eating vegetables or salad

3 4 to 6 times a week
4 1 to 3 times a week
5 Less than once a week
6 Never

Table 9: PH150-Descriptive statistics

PH150	Mean	Std Dev
1. Twice or more a day	18.4	8.7
2. Once a day	42.3	9.0
3. 4 to 6 times a week	20.0	6.3
4. 1 to 3 times a week	15.6	6.5
5. Less than once a week	3.1	2.4
6. Never	0.7	0.6

Main results

The most frequent answer is the modality 'once a day' and 'twice or more a day'. The average of the modality 'once a day' is 42.3% and for the modality 'twice or more a day' is 18.4% (Table 9). If we group together category one and two, the highest frequency of consuming vegetables or salad 'per day: once or twice' is in Ireland (84.1%) followed by Belgium (83.6%) and Italy (80.4%). The lowest frequency of the modality one and two is in Hungary (30.4%).

The least frequently used is in modality six 'never' where majority of countries reported less than 1% and all less than 4%. Spain has a 0 frequency for its sixth modality.

The highest frequency for the third modality '4 to 6 times a week' is found in Netherland (34.2%) and the lowest into the Ireland (7.7%). The modality '1 to 3 times per week' has an average 15.6% the highest frequency is founded in Hungary (31.7%) and the lowest in Ireland (5.3%). A non-considerable weight has the average frequency of the modality fifth 'less than once a week' (an average 3.1%) compared with other modalities. The modality fifth record a low average frequency. The highest value for this modality is found in Hungary (12.9%) and lowest in Netherlands (0.5%).



RC010T: General health (child)

Values	
1	Very good
2	Very good Good
3	Fair
4	Bad
5	Very bad

Table 10: RC010T-Descriptive statistics

RC010T	Mean	Std Dev
1. Very good	66.5	15.3
2. Good	29.3	14.0
3. Fair	3.3	2.0
4. Bad	0.7	0.3
5. Very bad	0.2	0.1

Main results

The most frequent answer is the modality 'very good' with an average 66.5% and standard deviation 15.3. The highest frequency of modality 'very good' is in Greece (94.1%) and the lowest frequency of the modality one is in Latvia (23.6%).

The least frequently used is in modality fifth 'very bad' where all the countries reported less than 1%. Also, the modality fourth has a low frequency of answer less than 2% (varies from 0.2% to 1.5%).

All the countries have high frequencies ("1"+"2" >90%) for these two modalities, 'very good' and 'good', above 90%.



RC020T: Limitation in activities because of health problems (child)

Values		
1	Severely limited	
2	Limited but not severely	
3	Not limited at all	

Table 11: RC020T-Descriptive statistics

RC020T	Mean	Std Dev
1 Severely limited	2.3	7.1
2 Limited but not severely	5.6	9.7
3 Not limited at all	92.0	16.6

Main results

The most frequent answer is the modality 'not limited at all' with an average 99.0% and standard deviation 16.6. The highest frequency of the third modality 'not limited at all' is in Montenegro (99.6%) and the lowest frequency of the modality one is in Latvia (88.2%). All the countries have above 80% the frequencies for this modality.

The least frequently used is in modality one 'Severely limited' with an average of 2.3% and a standard deviation of 7.1. The highest frequency for this answer is found in United Kingdom (3.2%) and the lowest in Romania (0.1%). The second modality 'limited but not severely' is higher in Latvia (10.7%) and lowest in Montenegro (0.2%).

Groupings:

- Countries that have less than 90 % of 'Not limited at all': LV (88.2%).
- Countries above 97% of 'Not limited at all': ES (97.2%), HR (97.2%), MT (97.4%), SK (97.5%), BG (97.6%), MK (97.7%), EL (98.2%), RS (98.3%), CY (98.4%), IT (99.2%), ME (99.6%).

RC030T: Module child 0-15 personal weight (optional)

Values

0+(Format 2.5) Weight



HC010T: Unmet need for medical examination or treatment (children)

Values

2

1 Yes (there was at least one occasion where at least one of the children did not have a medical examination or treatment)

No (the child (ren) had a medical examination or treatment each time it was needed)

Table 12: HC010T-Descriptive statistics

HC010	Mean	Std Dev
1.Yes	2.193	2.481
2.No	97.807	2.481

Main results

The most frequent answer is the second modality 'No' with an average of 97.8% and a standard deviation of 2.5. The highest frequency for this answer is found in Austria (100%) and the lowest in Ireland (85.3%).

- Countries that have less than 90% of 'No': Ireland (85.4%).
- Countries above 98% of 'No': Italy (98.1%), Netherland (98.1%), Estonia (98.1%), United Kingdom (98.1%), Montenegro (98.4%), Switzerland (98.4%), Slovenia (98.4%), France (98.5%), Cyprus (98.6%), Denmark (98.8%), Luxembourg (98.9%), Serbia (99.0%), Portugal (99.1%), Slovakia (99.4%), Malta (99.4%), Croatia (99.6%), Spain (99.6%), Hungary (99.8%), Germany (99.8%), Austria (100.0%).



HC020T: main reason for unmet need for medical examination or treatment (children)

Values	
1	Could not afford to (too expensive)
2	Waiting list
3	Could not make the time because of work, care of other children or of other people
4	Too far to travel or no means of transport
5	Other reason

Table 13: HC020T-Descriptive statistics

HC020	Mean	Std Dev
1. Too expensive	46.9	33.9
2. Waiting list	39.3	27.6
3. No time	9.5	9.0
4. Too far to travel	12.8	15.1
5. Other	31.2	25.3

Main results

Several countries have low reliability on this variable. As this question is asked after a filter used on HC010T, there are countries using flag '-2' more than 98%.

The most frequent answer is the first modality "could not afford-too expensive" with an average of 46.9% and a standard deviation of 33.9. There are countries like Cyprus or Germany that declare only this reason. Some of the countries have not cases answered 'too expensive' like: AT, DK, NL, NO, HR, SE, SI, UK (as free providing).

Other frequently used answer modality is 'waiting list'. The highest frequency for this modality is for Austria that declare only this reason maybe because even the cases with unmet need for medical examination or treatment for children for Austria are low (0.03%).

The highest frequencies for the modality 'no time' is found for Serbia (34.2%) and for the category 'too far to travel' is found for Lithuania (46.3%).

Frequencies over 50% for each modality:

- Too expensive: ES (53.9%), CH (55.0%), HU (56.8%), RO (62.6%), SK (68.5%), EL (77.9%), ME (73.1%), MT (78.4%), PT (81.0%), IT (85.6%), BE (92.4%), BG (93.8%), CY (100%), DE (100%);
- Waiting list: LV (51.6%), LU (53.7%), SE (54.6%), IE (56.8%), SI (66.9%), EE (67.4%), UK (74.7%), PL (72.1%), FI (79.1%), AT (100%);
- No time: No countries;
- Too far to travel: No countries;
- Other³: CZ (52.7%)⁴, FR (59.1%)⁵, HR (60.9%), DK (63.6%), NO (78.2%), NL (83.1%).

³ Low reliability

⁴ Low distributions

⁵ Other reasons could be: feared to see a doctor, to have an examination, a treatment, preferred to wait and see if would be better without any treatment, don't know any good doctor



HC030T: Unmet need for dental examination or treatment (children)

Values	
1	Yes (there was at least one occasion where at least one of the children did not have a dental examination or treatment)
2	No (the child(ren) had a dental examination or treatment each time it was needed)

Table 14: HC030T-Descriptive statistics

HC030	Mean	Std Dev
1.Yes	3.2	3.2
2.No	96.8	3.2

Main results

The most frequent answer is the second modality 'no' with an average of 96.8% and a standard deviation of 3.2. The highest frequency for this answer is found in Norway (99.9%) and the lowest in North Macedonia (85.3%).

- Countries that have less than 90 % of 'no': North Macedonia (85.3%) and Ireland (85.6%).
- Countries above 98% of 'no': Norway (99.9%), Hungary (99.8%), Croatia (99.7%), Germany (99.3%), Luxembourg (99.4%), Sweden (99.2%), Denmark (99.0%), Slovakia (99.2%), Austria (98.6%), France (98.9%), Serbia (98.5%), United Kingdom (98.4%), Switzerland (98.2%).



Values	
1	Could not afford to (too expensive)
2	Waiting list
3	Could not make the time because of work, care of other children or of other people
4	Too far to travel or no means of transport
5	Other reason

HC040T: Main reason for unmet need for dental examination or treatment (children)

Table 15: HC040T-Descriptive statistics

HC040	Mean	Std Dev
1. Too expensive	60.2	33.6
2. Waiting list	28.4	30.9
3. No time	14.6	13.7
4. Too far to travel	8.9	10.6
5. Other	29.7	28.6

Main results

Several countries have low reliability as the percentage of the children reported having unmet need on dental examination is low (Flag '-2' is over 98% for several countries).

The most frequent answer is the first modality 'could not afford-too expensive' with an average of 60.2% and a standard deviation of 33.6. Hungary and Luxembourg have reported this as the only reason of unmet need for examination or treatment. The unmet need for dental examination is 0.2% in case of Hungary and 0.6% in case of Luxembourg. Some of the countries have no respondents answered 'too expensive' like: DE, DK, FI, HR, MT, NO, SE, SI, UK (as free providing service).

The second option modality 'waiting list' is the only reason for Norway. The highest frequency for the modality 'no time' is for Malta (45.2%) and for the modality 'too far to travel' is for Denmark (36.2%).

A considered weight has also modality 'other reasons' for some countries like Austria (78.1%), United Kingdom (77.3%), Netherland (73.3%) and North Macedonia (73.2%).

Frequencies over 50% for each modality:

- Too expensive: HU (100.0%), LU (100.0%), ES (99.3%), CY (96.1%), EL (95.8%), CH (91.4%), BG (91.1%), BE (87.3%), PT (90.7%), IT (85.2%), ME (85.2%), SK (75.2%), RO (66.6%), LV (55.7%), IE (61.1%);
- Waiting list: NO (100.0%), FI (96.0%), SI (85.2%), LT (83.9%)
- No time: no countries;
- Too far to travel: no countries;
- Other: UK (77.3%), MT (54.8%), MK (73.2%), AT (78.1%), DE (60.7%), NL (73.3%), DK (56.9%).

HC050T: Module child 0-15 household weight (optional)

Values

0+ (Format 2.5) Weight



4.2 Main points of the analysis of the frequencies

Data on 'access to health care', variables HS200, HS210 and HS220 shows the same pattern of the frequency distribution where the most common answer is the third one 'not a burden at all'. This group of variables has even a significant statistically correlated coefficient with each other (Annex 3). Countries have the same pattern related with financial burden: the financial burden for medical care, dental care and medicines of households. More than 90% of the UK medical care and medicines are not a burden at all.

Majority of people across the countries report a high share of never had a visit during the last 12 months (PH080, PH090 and PH100, number of visits to dentist/GP or doctor or medical specialist).

In most of the cases, the share of the people who say they are underweight is low (PH110 on BMI).

Majority of people across countries state performing work 'sitting' or 'standing' (either modality one or two of the variable PH120, type of physical activity when working).

In the participated countries, majority of people say that they eat fruit and vegetable or salad (PH140 and PH150 frequency of eating fruit and vegetable or salad respectively) at least once a day (once or more per day).

Although the simple average of the frequencies show that most of the countries report the modality 2 'no' as the most common, these variables (HC010 and HC030) display the most spread across the countries and shows the highest share of the households that do not face the unmet need for medical or dental care for children. So people in all countries find medical or dental care for their children almost each time they needed; with a high rate for the second modality 'no' (not having so often restricted access, experienced a delay in getting it or didn't seek for medical/dental care for their children in the household when they needed medical/dental examination or treatment).

Data for variables HC020 and HC040, on the reason for unmet need variables (medical or dental) is flagged by several countries with low reliability. This is a result of placing HC010 as filter question for HC020 and also the HC030 as filter question for HC040.

Most of the people across countries report either modality 1 or 2 as more common reason for unmet need, expensive or waiting list.

This is visible in countries like Cyprus and Germany reported as the only reason for unmet need 'too expensive' and in countries like Austria it is reported as 'waiting list' as the only reason for unmet need for medical examination (HC020 variable). Countries like Luxembourg and Hungary report as the only reason of unmet need the option 'too expensive' and Norway report 'waiting list' as the only reason for unmet need for dental examination or treatment (HC040).

In most of the cases the share of the people that says that the health of the children is 'good' or 'very good' is over 90% (RC010T).

Data for variable HC020T shows a high percentage of people reporting the third modality 'not limited at all' as most common answer. The share of people who reports 'not limited at all' is more than 90%, except Latvia where this percentage is slightly lower compared with other countries.

Denmark, Netherlands, Slovenia, Finland, Sweden and Norway have a high value of '-3' flags for children questions (health status and access to health for children) as these countries use selected respondents.

Flags '-5' and '-2' in the children variables should be study further specifically for the variables that use filter question before as are inconsistency on using them.

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5. Analysis of the questionnaires

Further, to have a clear overview of the qualitative assessment of the 2017 EU-SILC ad-hoc module data, an analysis of the wording used in various national languages was considered. Different wordings may have led to variations in interpretation, non-response and affecting thus the quality of the module data.

Several countries are considered for the analysis: Austria, Italia, Finland, Germany, Slovenia and France⁵. For each module that show the same trend in distribution, only one variable is chosen:

- Health/access to health care (HS200);
- Health care (PH080);
- Health determinants (BMI);
- Children health/health status (RC010);
- Children health/access to health care (HC010, HC020);

The analysis of the national questions asked concludes that there are several differences applied in the national questionnaires:

- Using additional option for 'don't know' and 'refuse' influencing the '-1' flags;
- Countries use additional question to get the information (ex. First a question is asked if have and examination or treatment and then the question for financial burden (HS200));
- A slight difference in the answer categories applied;
- Detailed description of the modalities;
- Position of the BMI question (asked in the demographic part or at the end of questionnaire) or HC030 and HC040 (not together with HC010 and HC020);
- Question wording (questions on BMI: the detailed description in the guidelines 'without shoes' and 'without shoes and clothes' is not always mentioned

6. Analysis of the flags⁶

In this section, the flag variables used in the 2017 ad-hoc module on health and children health are analysed.

As for the flag variables several values were used: flag "1" (filled value), flag "-1" (missing value), flag "-2" (not applicable), flag "-3" (not selected respondent) and "-5" (no children aged under 16 in the household). Data used for the analysis of the flags can be found in Annex 2: "Frequencies of flags 1, -1, -2, -3, -5 and for each variable by country". The variables are grouped based on the same flags used.

⁵ These countries are chosen based on the data's characteristics phase, such as during analyzing data, item non- response, or the variable distribution frequencies and overviewas well as how the national adaption are made on the questions asked. ⁶ Analyse of flags is done using unweighted distributions of flags for each variable of the module.



Flag value	Flag name
1	Filled
-1	Missing
-2	Not applicable (no one in the household needed/had medical care)
-7	Not applicable (HB010 ≠ 2017)

HS200: Financial burden of medical care HS210: Financial burden of dental care HS220: Financial burden of medicines

Flag value	Flag name
1	Filled
-1	Missing
- 3	Non-selected respondent
-7	Not applicable (HB010 ≠ 2017)

PH080: Number of visits to a dentist or orthodontist

PH090: Number of consultations of a general practitioner or family doctor

PH100: Number of consultations of a medical or surgical specialist

PH110: Body mass index (BMI)

PH130: Time spent on physical activities (excluding working) in a typical week

PH140: Frequency of eating fruit

PH150: Frequency of eating vegetables or salad

Flag value	Flag name	
1	Filled	
-1	Missing	
-2	Not applicable (not performing any working tasks)	
-3	Non-selected respondent	
-7	Not applicable (HB010 \neq 2017)	

PH120: Type of physical activity when working



Flag value	Flag name
1	Filled
-1	Missing
-2	Not applicable: RB110 not equal to 1, 2, 3 or 4 (person is not a current household member)
-5	Not applicable (person is not 0 - 15 years old)
-7	Not applicable (RB010 \neq 2017)

RC010T: General health (child)

RC020T: Limitation in activities because of health problems (child) **RC030T**: Module child 0-15 personal weight

(optional)

Flag value	Flag name
1	Filled
-1	Missing
-2	Not applicable (none of the children really needed any medical examination or treatment)
-5	Not applicable (no children aged under 16 in the household)
-7	Not applicable (RB010 \neq 2017)

HC010T: Unmet need for medical examination or treatment (children)

HC030T: Unmet need for dental examination or treatment (children)

Flag value	Flag name
1	Filled
-1	Missing
-2	Not applicable (HC010 \neq 1 / HC010 not equal to Yes)
-5	Not applicable (no children aged under 16 in the household)
-7	Not applicable (RB010 ≠ 2017)

HC020T: main reason for unmet need for medical examination or treatment (children)



Flag value	Flag name
1	Filled
-1	Missing
-2	Not applicable (HC030 \neq 1 / HC030 not equal to Yes)
-5	Not applicable (no children aged under 16 in the household)
-7	Not applicable (RB010 \neq 2017)

HC040T: Main reason for unmet need for dental examination or treatment (children)

Flag value	Flag name
1	Filled
-1	Missing
-2	Not applicable No household member aged 0-15 at the time of interview with (RB110 equal to 1, 2, 3 or 4)
-7	Not applicable (RB010 ≠ 2017)

HC050T: Module child 0-15 household weight (optional)

6.1 Flag -1 "Missing"

This section analyses the flag "-1" which is to be used when the variable is not filled, or the respective variable is missing. This is related with item non-response and present the comparability among countries on the difficulties phased during implementation of this module.

The overall description of the list of items non- response is presented to the table 1 and detailed for higher non response by countries in table 2 and 3.

The "P" variables are the ones that are collected for all countries but are the ones that have the highest missing values. In average, the "P" variables have percentages of missing values higher than 3%. The "H" variables have the same pattern and also almost the same percentage of missing values. The children variables have the lowest percentage of missing values. The two variables with the highest percentages of missing values are PH110 and PH130.



Table 16: Distribution of the missing values for each variable

Variables	% of missing
HS200: financial burden of medical care	2.47
HS210: financial burden of dental care	2.55
HS220: financial burden of medicines	2.26
PH080: number of visits to a dentist or orthodontist	4.59
PH090: number of consultations of a general practitioner or family doctor	4.65
PH100: number of consultations of a medical or surgical specialist	4.67
PH110: body mass index (BMI)	6.02
PH120: type of physical activity when working	3.62
PH130: time spent on physical activities (excluding working) in a typical week	6.13
PH140: frequency of eating fruit	4.22
PH150: frequency of eating vegetables or salad	4.22
RC010T: general health (child)	2.81
RC020T: limitation in activities because of health problems (child)	3.17
HC010T: unmet need for medical examination or treatment (children)	2.92
HC020T: main reason for unmet need for medical examination or treatment (children)	0.14
HC030T: unmet need for dental examination or treatment (children)	2.9
HC040T: main reason for unmet need for dental examination or treatment (children)	1.26

Table 17: Distribution of missing values above 5%

Variables	Missing values above 5%
HS200: financial burden of medical care	AT (10.79%), UK (41.67%)
HS210: financial burden of dental care	AT (18.05%), UK (41.68%)
HS220: financial burden of medicines	AT (6.58%), UK (41.67%)
PH080: number of visits to a dentist or orthodontist	CZ (29.27%), EE (27.14%), PL (11.17%), UK (44.17%), CH (14.45%)
PH090: number of consultations of a general practitioner or family doctor	CZ (29.27%), EE (27.22%), PL (11.17%), UK (44.19%), CH (14.54%)
PH100: number of consultations of a medical or surgical specialist	CZ (29.27%), EE (27.16%), LT (5.16%), PL (11.17%), UK (44.16%), CH (14.44%)
PH110: body mass index (BMI)	BE(5.47%), FR(7.07%), LV(8.85%), PL(12.12%), LT(13.3%), CH(15.25%), IE(24.99%), EE(27.49%), CZ(30.76%), UK(47.09%)
PH120: type of physical activity when working	PL (13,31%), CH(14,81%), EE(27,15%), UK(44,23%)
PH130: time spent on physical activities (excluding working) in a typical week	LV(5,35%), FR(7,88%), PL(11,18%), CH(15,55%), DE(19,84%), LT(25,61%), AT(26,11%), EE(27,7%), SK(41,15%), UK(44,37%),
PH140: frequency of eating fruit	PL(11,29%), CH(14,4%), EE(27,17%), CZ(29,27%), UK(44,17%)
PH150: frequency of eating vegetables or salad	PL(11,38%), CH(14,43%), EE(27,18%), CZ(29,27%), UK(44,16%)
RC010T: general health (child)	UK (8,80%)
RC020T: limitation in activities because of health problems (child)	UK (8,81%)
HC010T: unmet need for medical examination or treatment (children)	UK (11,57%)
HC020T: main reason for unmet need for medical examination or treatment (children)	No countries
HC030T: unmet need for dental examination or treatment (children)	UK (11,57%)
HC040T: main reason for unmet need for dental examination or treatment (children)	HU (7,76%),



Analyses

- UK highest missing values for "H" and "P" variables.
- AT, UK high missing values for Compulsory adult items collected at household level: HS200, HS210, HS220
- CH, CZ, EE, PL, UK high missing values for health care: PH080, PH090, PH100.
- AT, BE, BG, CH, CY, CZ, EL, ES, FR, HR, IE, LV, ME, MT, PL, PT, RO, RS, SK, no missing values for health status of the children.
- EE have around 27% of missing data to the "P" variables.

Missing values above 5%

There are several variables and countries that have a considered percentage above 5% of missing values.

- Austria: HS220 (6,58%), HS200 (10,79%), HS210 (18,05%), PH130 (26,11%);
- Belgium: PH110 (5.47%);
- Czech: PH080, PH090, PH100, PH140 and PH150 (29.27%), PH110 (30.76%);
- France: PH110 (7.07%), PH130 (7.88%);
- Germany: PH130 (19.84%);
- Estonia: PH080 (27.14%), PH090 (27.22%), PH100 (27.16%), PH110 (27.49%), PH120 (27.15%), PH130 (27.70%), PH140 (27.17%) and PH150 (27.18%);
- Hungary: HC040 (7.76%);
- Ireland : PH110 (24.99%);
- Latvia: PH110 (8.85%), PH130 (5.35%);
- Lithuania: PH100 (5.16%), PH120 (13.3%), PH130 (25.61%);
- Poland: PH080, PH090, PH100 (11.17%); PH110 (12.12%), PH120 (13.31%), PH130 (11.18%), PH140 (11.29%), PH150 (11.38%);
- Slovakia: PH130 (41.15%);
- Switzerland: PH080 (14.45%), PH090 (14.54%), PH100 (14.44%), PH110 (15.25%), PH120 (14.81%), PH130 (15.55%), PH140 (14.40%), PH150 (14.43%);
- United Kingdom: HS200(41,67%), HS210(41,68%), HS220(41,67%), PH080(44,17%), PH090(44,19%), PH100(44,16%), PH110(47,09%), PH120(44,23%), PH130(44,37%), PH140(44,17%), PH150(44,16%),. RC010T (8.80%), RC020T (8.81%), HC010T (11.57%), HC030T (11.57%).



% of flag -1	No. of countries	Countries
Compulsory adult items collecte		
Health/Access to health care		
HS200: financial burden of med	ical care	
0%	10	CY, CZ, EL, ES, LT, PL, RO, RS, SI, SK
0 and .99%	15	PT, BE, EE, BG, HR, LU, LV, DK, FR, MK, FI, CH, DE, HU, ME
1 and 4.99%	6	SE, MT, IE, NL, IT, NO
>5 %	2	AT, UK
HS210: financial burden of dent	al care	,
0%	13	RO, SI, EL, CY, RS, SK, PT, BE, ES, LT, LV, PL, CZ
0 and .99%	13	HR, BG, EE, LU, DK, FI, FR, MK, CH, SE, HU, DE, ME
1 and 4.99%	5	NL, MT, IE, IT, NO
>5 %	2	AT, UK
HS220: financial burden of med	icines	
0%	12	CY, CZ, EL, ES, LT, PL, RO, RS, SI, SK, PT, LV
0 and .99%	13	HR, BE, BG, LU, EE, FR, HU, DK, MK, FI, CH, DE, NL
1 and 4.99%	6	SE, ME, MT, IE, NO, IT
>5 %	2	AT, UK
Compulsory adult items collecte	ed at individual level:	
Health/Health care		
PH080: number of visits to a de	ntist or orthodontist	
0%	4	RO, SI, DK, ME
0 and .99%	19	EL, CY, RS, AT, SK, HU, PT, BG, SE, DE, HR, FI, IE, LU, MK, MT, BE, NL, ES
1 and 4.99%	5	NO, FR, LV, IT, LT
>5 %	5	CH, CZ, EE, PL, UK
PH090: number of consultations	s of a general practition	
0%	4	RO, SI, DK, ME
0 and .99%	18	EL, CY, RS, AT, NL, SK, HU, PT, DE, BG, SE, LU, HR, FI, IE, BE, MT, ES
1 and 4.99%	6	NO, FR, LV, IT, MK, LT
>5 %	5	CH, CZ, EE, PL, UK
PH100: number of consultations		
0%	4	DK, ME, RO, SI
0 and .99% 1 and 4.99%	<u>19</u> 4	EL, AT, BE, BG, CY, DE, ES, FI, HR, HU, IE, LU, MT, NL, NO, PT, RS, SE, SK,
>5 %	6	FR, IT, LV, MK, LT, CH, CZ, EE, PL, UK
Health/Health determinants	0	
PH110: body mass index(BMI)		
0%	7	EL, FI, IT, ME, NO, RO, SI
0 % 0 and .99%	5	BG, CY, HU, MK, RS
1 and 4.99%	11	AT, DE, DK, ES, HR, LU, MT, NL, PT, SE, SK
>5 %	10	BE, CH, CZ, EE, FR, IE, LT, LV, PL, UK
PH120: type of physical activity		,,,,,,,,, .
0%	5	EL, IT, ME, RO, SI
0 and .99%	18	CZ, AT, BE, BG, CY, DK, ES, FI, HR, HU, IE, MK, MT, NO, NL, PT, RS, SK
1 and 4.99%	6	DE, FR, LT, LU, LV, SE
>5 %	4	CH, EE, PL, UK
PH130: time spent on physical a	activities (excluding wo	
0%	5	BG, EL, IT, RO, SI
0 and .99%	9	ME, CY, CZ, HR, MK, MT, NO, PT, RS
1 and 4.99%	9	FI, ES, BE, HU, DK, SE, LU, NL, IE
>5 %	10	LV, FR, PL, CH, DE, LT, AT, EE, SK, UK
PH140: frequency of eating fruit		
0%	5	RO, SI, EL, IT, ME
0 and .99%	19	NL, CY, AT, RS, DK, HU, IE, SK, PT, MK, DE, BG, LU, HR, FI, BE, MT, ES, NO
1 and 4.99%	4	FR, LT, LV, SE
>5%	5	CH, CZ, EE, PL, UK
PH150: frequency of eating veg		
0%	5	EL, IT, ME, RO, SI
0 and .99%	20	AT, BE, BG, CY, DE, DK, ES, FI, HR, HU, IE, LU, MK, MT, NO, NL, PT, RS, SK, SE
1 and 4.99%	<u>3</u> 5	FR, LT, LV
~0 %	U U	CH, CZ, EE, PL, UK

Table 18: Share of flag -1 (missing) in each variable of the Module 2017 among countries



% of flag -1	Number countries	of	Countries
Children's health/Health status (ch			
RC010T: general health (child)			
0%	14		BG, CY, CZ, EL, ES, LV, ME, PT, RO, RS, SK, EE, HU, FR
0 and .99%	17		CH, AT, BE, FI, SI, PL, NL, LT, IE, LU, MT, SE, HR, DE, NO, IT, DK
1 and 4.99%	1		MK
>5 %	1		UK
RC020T: limitation in activities bed	ause of health prob	lems (chi	ild)
0	12		BG, CY, CZ, EL, ES, LV, ME, PT, RO, RS, SK, HU
0 and .99%	18		BE, CH, AT, PL, HR, SI, LT, IE, MT, FI, LU, FR, SE, NO, NL, IT, DK, DE
1 and 4.99%	2		EE, MK
>5 %	1		UK
Compulsory child items collected a	at household level:		
Children's health/Access to health	care (children)		
HC010T: unmet need for medical	examination or treat	ment (ch	ildren)
0%	16		BG, CY, CZ, EL, ES, LV, ME, PT, RO, RS, SK, AT, HR, FI, LU, EE
0 and .99%	14		HU, BE, PL, SI, MT, FR, CH, LT, NL, NO, DE, DK, SE, IT
1 and 4.99%	2		IE, MK
>5 %	1		UK
HC020T: main reason for unmet n	eed for medical exa	mination	or treatment (children)
0%	29		AT, BG, CH, CY, CZ, DE, EE, EL, ES, HR, HU, IE, IT, LV, LT, LU, ME, MK, MT, NL, NO, PL, PT, RO, RS, SE, SI, SK, UK
0 and .99%	4		BE, FI, FR, DK
1 and 4.99%	0		
>5 %	0		
HC030T: unmet need for dental ex	amination or treatm	ent (child	dren)
0%	13		BG, CY, CZ, EL, ES, LV, ME, PT, RO, RS, SK, AT, EE
0 and .99%	17		LU, HU, SI, HR, PL, BE, FR, FI, LT, CH, MT, NL, NO, DE, DK, SE, IT
1 and 4.99%	2		MK, IE
>5 %	1		UK
HC040T: main reason for unmet n	eed for dental exam	ination o	
0%	26		AT, BG, CH, CY, CZ, EE, EL, ES, HR, IE, IT, LV, LT, ME, MK, MT, NL, NO, PL, PT, RO, RS, SE, SI, SK, UK
0 and .99%	6		BE, DE, DK, HU, FI, FR,
1 and 4.99%	0		
>5 %	2		LU

6.2 Flag -2 "Not applicable ..."

The flag "-2" is applied when the individual or household was not applicable for different reason:

- No one in the household needed to have/had medical care,
- No one in the household needed to have/had dental care,
- No one in the household needed/used medicines,
- Not performing any working tasks,
- Person is not a current household member,
- None of the children really needed any medical examination or treatment,
- HC010T ≠ 1 / HC010T not equal to "Yes",
- None of the children really needed any dental examination or treatment),
- HC030T ≠ 1 / HC030T not equal to "Yes".

All these cases are considered as not applicable and the flag of respective variables takes the code "-2".



Table 19.1: Share of flag "-2" (not applicable) in each variable of the Module 2017 among countries

u	11 7	
% of flag -2	Number	Countries
	of	
	countries	
Compulsory adult items collect	cted at household level:	
Health/Access to healt	<u>h care</u>	
HS200: financial burden of m	edical care2 Not applicable	e (no one in the household needed/had medical care)
0%	2	AT, NO
0 and .99%	0	
1 and 4.99%	5	CY, CZ, LU, PL, PT
>5 %	26	BE, BG, CH, DE, DK, EE, EL, ES, FI, FR, HR, HU, IE, IT, LT, LV, ME, MK, MT, NL, RO, RS, SE, SI, SK, UK
HS210: financial burden of de	ental care2 Not applicable	(no one in the household needed/had dental care)
0%	2	AT, NO
0 and .99%	0	
1 and 4.99%	0	
>5 %	31	BE, BG, CH, CY, CZ, DE, DK, EE, EL, ES, FI, FR, HR, HU, IE, IT, LT, LU, LV, ME, MK, MT, NL, PL, PT, RO, RS, SE, SI, SK, UK
HS220: financial burden of m	edicines – '-2' Not applicable	(no one in the household needed/used medicines)
0%	2	AT, SI
0 and .99%	0	
1 and 4.99%	6	CY, CZ, ES, FI, PL, SE
>5 %	25	BE, BG, CH, DE, DK, EE, EL, FR, HR, HU, IE, IT, LT, LU, LV, ME, MK, MT, NL, NO, PT, RO, RS, SK, UK
Health/Health determinants		
	ity when working-'-2' Not app	licable (not performing any working tasks)
0%	2	DK. EE.
0 and .99%	2	FI, PL
1 and 4.99%	8	AT, CY, LU, NL, PT, SE, SI, UK
>5 %	21	BE, BG, CH, CZ, DE, EL, ES, FR, HR, HU, IE, IT, LT, LV, ME, MK, MT, NO, RO, RS, SK



Table 19.2: Share of flag "-2" (not applicable) in each variable of the Module 2017 among countries

% of flag -2	Number	Countries
	of countries	
Compulsory child items coll		
, ,	, ,	
Children's health/Health sta		
	, ,,) not equal to 1, 2, 3 or 4 (person is not a current household member)
0%	32	AT, BE, BG, CH, CY, CZ, DE, DK, EE, EL, ES, FI, FR, HR, HU, IE, IT, LU, LV, ME, MK, MT, NL, NO, PL, PT, RO, RS, SE, SI, SK, UK
0 and .99%	1	LT
1 and 4.99%	0	
>5 %	0	
RC020T: limitation in activit	ies because of health problem	ns (child)2 Not applicable: RB110 not equal to 1, 2, 3 or 4 (person is not
a current household member		· · · · · · · · · · · · · · · · · · ·
0%	32	AT, BE, BG, CH, CY, CZ, DE, DK, EE, EL, ES, FI, FR, HR, HU, IE, IT, LU, LV, ME, MK, MT, NL, NO, PL, PT, RO, RS, SE, SI, SK, UK
0 and .99%	1	LT
1 and 4.99%	0	
>5 %	0	
Compulsory child items coll	ected at household level:	
Children's health/Access to		
		ent (children)2 Not applicable (none of the children really needed any
medical examination or trea		
0%	1	DK
0 and .99%	0	
1 and 4.99%	13	RO, CY, CZ, FR, HU, HR, SK, DE, LT, PL, SI, LU, LV
>5 %	19	PT, EE, UK, ES, BG, FI, BE, AT, RS, CH, MK, IT, MT, EL, ME, NO, SE, NL, IE
	unmet need for medical exami	ination or treatment (children)2 Not applicable (HC010T \neq 1 / HC010T
not equal to Yes)		
0%	0	
0 and .99%	0	
1 and 4.99%	0	
>5 %	33	AT, BE, BG, CHCY, CZ, DE, DK, EE, EL, ES, FI, FR, HR, HU, IE, IT, LT, LU, LV, ME, MK, MT, NL, NO, PL, PT, RO, RS, SE, SI, SK, UK
HC030T: unmet need for de	ental examination or treatment	(children)2 Not applicable (none of the children really needed any dental
examination or treatment)		
0%	1	DK
0 and .99%	0	
1 and 4.99%	3	RO, CZ, UK
>5 %	29	SI, HR, LV, DE, FI, LT, CY, FR, EE, PT, SK, CH, BE, IT, MT, LU, HU, ES, PL,
*	20	BG, RS, AT, NO, EL, MK, ME, SE, NL, IE,
	nmet need for dental examina	tion or treatment (children)2 Not applicable (HC030T \neq 1 / HC030T not
equal to Yes)		tion or treatment (children)2 Not applicable (HC030T \neq 1 / HC030T not
equal to Yes) 0%	0	tion or treatment (children)2 Not applicable (HC030T ≠ 1 / HC030T not
equal to Yes)		tion or treatment (children)2 <i>Not applicable (HC030T ≠ 1 / HC030T not</i>

Analysis

Several countries show inconsistency using the flag '-2' for children variables.

The same pattern for HC010T, HC020T, HC030T, HC040T among all countries where the distribution of the flag '-2'. The values of flag '-2' are more than 5% for all countries for variables HC020T and HC040T Denmark have the value '0' of the distribution of flag '-2' for HC010T and HC030T.



6.3 Flag -3 "Non-selected respondent"

The flag "-3" is used in the variables collected at personal level and is used only by selected respondent countries.

% of flag -3	Number of countries	Countries
Health/Health care	countries	
PH080: number of vi	isits to a dentist or	· orthodontist
0%	26	AT, BE, BG, CY, CZ, DE, EE, EL, ES, FR, HR, HU, IE, IT, LU, LV, LT, ME, MK, MT, PL, PT, RO, RS, SK, UK
0 and .99%	0	
1 and 4.99%	0	
>5 %	6	DK, FI, NL, NO, SE, SI
		eneral practitioner or family doctor
0%	26	AT, BE, BG, CY, CZ, DE, EE, EL, ES, FR, HR, HU, IE, IT, LU, LV, LT, ME, MK, MT, PL, PT, RO, RS, SK, UK
0 and .99%	0	
1 and 4.99%	0	
>5 %	6	DK, FI, NL, NO, SE, SI
PH100: number of c	onsultations of a n	nedical or surgical specialist
0%	26	AT, BE, BG, CY, CZ, DE, EE, EL, ES, FR, HR, HU, IE, IT, LU, LV, LT, ME, MK, MT, PL, PT, RO, RS, SK, UK
0 and .99%	0	
1 and 4.99%	0	
>5 %	6	DK, FI, NL, NO, SE, SI
Health/Health detern	<u>ninants</u>	
PH110: body mass i	ndex (BMI)	
0%	26	AT, BE, BG, CY, CZ, DE, EE, EL, ES, FR, HR, HU, IE, IT, LU, LV, LT, ME, MK, MT, PL, PT, RO, RS, SK, UK
0 and .99%	0	
1 and 4.99%	0	
>5 %	6	DK, FI, NL, NO, SE, SI
PH120: type of phys	ical activity when	
0%	26	AT, BE, BG, CY, CZ, DE, EE, EL, ES, FR, HR, HU, IE, IT, LU, LV, LT, ME, MK, MT, PL, PT, RO, RS, SK, UK
0 and .99%	0	
1 and 4.99%	0	
>5 %	6	DK, FI, NL, NO, SE, SI
		es (excluding working) in a typical week
0%	26	AT, BE, BG, CY, CZ, DE, EE, EL, ES, FR, HR, HU, IE, IT, LU, LV, LT, ME, MK, MT, PL, PT, RO, RS, SK, UK
0 and .99%	0	
1 and 4.99%	0	
>5 %	6	DK, FI, NL, NO, SE, SI
PH140: frequency of	<u> </u>	
0%	26	AT, BE, BG, CY, CZ, DE, EE, EL, ES, FR, HR, HU, IE, IT, LU, LV, LT, ME, MK, MT, PL, PT, RO, RS, SK, UK
0 and .99%	0	
1 and 4.99%	0	
>5 %	6	DK, FI, NL, NO, SE, SI
PH150: frequency of		
0%	26	AT, BE, BG, CY, CZ, DE, EE, EL, ES, FR, HR, HU, IE, IT, LU, LV, LT, ME, MK, MT, PL, PT, RO, RS, SK, UK
0 and .99%	0	
1 and 4.99%	0	
>5 %	6	DK, FI, NL, NO, SE, SI

Table 20: Share of flag -3, Non-selected respondent



Analysis

DK, FI, NL, NO, SE, SI same pattern to the "P" variables group. The distribution of the frequencies for those countries varies from 45% to 61%,

The distribution percentage of non-selected respondents for the variables PH080, PH090, PH100, PH110, PH120, PH130, PH140, PH150, are reported over 45% for countries: DK (45.44%), FI (48.79%), NL (45.84%), NO (48.34%), SE (48.77%), SI (60.71%).

6.4 Flag -5 "no children aged under 16 in the household"

The flag '-5' distribution should be the same for part R variable (RC010T and RC020T) and for the household variables (HC010T, HC020T, HC030T and HC040T) should be the same. The countries like CZ, EL, ES, HR, IE, LU, MK, MT, NO, PT, RO, RS, SK, UK (Annex 2) shows different distribution across variables used.

% of flag -5	Number of countries	Countries
Compulsory child items collected at		
Children's health/Health status (chil	<u> </u>	
RC010T: general health (child)	<u></u>	
0%	0	
0 and .99%	0	
1 and 4.99%	0	
>5 %	33	AT, BE, BG, CH, CY, CZ, DE, DK, EE, EL, ES, FI, FR, HR, HU, IE, IT, LT, LU, LV, ME, MK, MT, NL, NO, PL, PT, RO, RS, SE, SI, SK, UK
RC020T: limitation in activities beca	ause of health problem	ns (child)
0%	6	AT, IT, LT, MT, NO, UK
0 and .99%	0	
1 and 4.99%	1	HU
>5 %	26	BE, BG, CH, CY, CZ, DE, DK, EE, EL, ES, FI, FR, HR, IE, LU, LV, ME, MK, NL, PL, PT, RO, RS, SE, SI, SK
Compulsory child items collected at	household level:	
Children's health/Access to health of	are (children)	
HC010T: unmet need for medical e		nt (children)
0%	0	
0 and .99%	0	
1 and 4.99%	0	
>5 %	33	AT, BE, BG, CH, CY, CZ, DE, DK, EE, EL, ES, FI, FR, HR, HU, IE, IT, LT, LU, LV, ME, MK, MT, NL, NO, PL, PT, RO, RS, SE, SI, SK, UK
HC020T: main reason for unmet ne	ed for medical examir	
0%	14	LU, IE, MK, RS, ES, NO,SK, UK, PT, MT, CZ, HR, EL, RO
0 and .99%	0	
1 and 4.99%	0	
>5 %	19	ME, SE, SI, PL, CY, EE, FI, FR, BE, CH, LV, AT, NL, BG, HU, DK, IT, LT, DE
HC030T: unmet need for dental exa	amination or treatment	t (children)
0%	0	
0 and .99%	0	
1 and 4.99%	0	
>5 %	33	AT, BE, BG, CH, CY, CZ, DE, DK, EE, EL, ES, FI, FR, HR, HU, IE, IT, LT, LU, LV, ME, MK, MT, NL, NO, PL, PT, RO, RS, SE, SI, SK, UK
HC040T: main reason for unmet ne	ed for dental examination	tion or treatment (children)
0%	12	LU, IE, RS, ES, NO, SK, ÚK, PT, MT, CZ, EL, RO
0 and .99%	0	
1 and 4.99%	0	
>5 %	21	AT, BE, BG, CH, CY, DE, DK, EE, FI, FR, HR, HU, IT, LT, LV, ME, MK, NL, PL, SE, SI

Table 21: Share of flag -5 (Not applicable, person is not 0 - 15 years old)



Analysis

Several countries show inconsistency using the flag '-5' for children variables.

The same pattern to the children health status variables. AT, IT, LT, MT, NO, UK have 0% distribution for RC020T flag variable. All countries have distributions of not applicable values (flag '-5') over 5% used in the variables RC010T, HC020T and HC030T. LU, IE, RS, ES, NO, SK, UK, PT, MT, CZ, EL, RO have % of not applicable values over 0% HC040T variable.

7. Conclusion

The countries show the same trend of the value distributions within the same variable groups (ex.HS200, HS210 and HS220).

Countries have applied national characteristics for some of the questions.

The "P" variables are the ones that are collected for all countries but are the ones that have the highest share of missing values, especially PH110 and PH130.

The health variables and specifically the children variables (HC020T and HC040T) show low reliability due low response rate to these questions. These questions register higher frequencies on the modality 'other' but is not easy to define the reason behind.

BMI data have to be further checked and studied. Also, discrepancies in several countries needs to be further studied. Flags '-2' and '-5' were inconsistently used for several countries on children variables.



8. Annexes

ANNEX 1: DISTRIBUTION OF 'FILLED' VALUES FOR EACH VARIABLE

8.1 Distribution of the filled values for each variable and country

HS200	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1.Heavy burden	5.4	15.7	32.0	16.5	39.4	5.5	7.1	3.0	2.4	15.6	7.8	4.8	3.0	12.4	12.1	8.2	28.9
2.Somewhat burden	29.6	24.6	52.7	52.0	50.8	32.1	39.4	10.7	12.9	52.1	29.2	29.3	12.9	30.0	30.5	25.7	68.5
3 Not a burden at all	65.0	59.8	15.4	31.5	9.8	62.3	53.6	86.3	84.8	32.3	63.1	65.9	84.1	57.6	57.5	66.2	2.6
	LT	LU	LV	ME	MK	МТ	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1.Heavy burden	12.3	16.6	27.9	22.5	28.2	14.4	6.6	2.3	23.4	14.8	13.9	14.9	4.0	5.2	13.5	1.9	
2.Somewhat burden	33.3	27.5	48.8	35.9	49.6	56.5	20.4	12.4	47.3	34.1	46.5	21.4	9.9	8.6	47.7	6.5	
3.Not a burden at all	54.4	56.0	23.3	41.5	22.1	29.1	73.1	85.4	29.4	51.1	39.7	63.6	86.1	86.3	38.8	91.6	
		1		1		1	1	1		1	1	1	1	1	1	1	1

HS210	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1.Heavy burden	8.7	12.6	28.4	18.3	46.4	8.7	12.5	5.9	13.7	17.7	33.4	5.1	7.2	8.9	13.9	6.8	38.8
2.Somewhat burden	29.4	21.0	59.3	54.9	44.0	41.3	36.8	15.2	33.9	50.5	40.7	27.1	19.7	27.4	29.4	22.4	59.0
3 Not a burden at all	61.9	66.4	12.3	26.7	9.6	50.0	50.7	79.0	52.4	31.9	25.9	67.8	73.1	63.8	56.7	70.8	2.2
	LT	LU	LV	ME	MK	MT	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1.Heavy burden	28.4	23.0	35.3	20.0	28.3	17.1	4.4	5.7	23.8	19.6	19.0	15.0	8.8	18.2	18.1	4.9	
··· / ··· ··	20.1	20.0	00.0	20.0	20.0		т.т	5.1	20.0	13.0	13.0	10.0	0.0	10.2	10.1	1.0	
2.Somewhat burden	31.9	26.6	42.6	36.0	51.8	55.8	18.5	16.1	50.3	36.5	46.6	31.3	14.4	29.9	49.4	15.3	

HS220	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1.Heavy burden	6.4	13.4	32.6	13.6	33.7	13.0	8.6	2.8	6.0	13.8	8.2	8.4	1.6	14.2	17.0	6.9	19.2
2.Somewhat burden	29.5	22.5	54.8	52.2	55.2	51.7	39.0	13.4	23.6	49.9	48.5	32.2	8.4	41.1	41.1	28.4	70.7
3.Not a burden at all	64.1	64.1	12.6	34.2	11.1	35.3	52.4	83.9	70.4	36.4	43.3	59.4	90.0	44.7	41.9	64.8	10.2
	LT	LU	LV	ME	MK	MT	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1.Heavy burden	24.5	11.5	30.3	26.5	31.0	15.2	6.6	1.8	39.8	18.0	11.4	23.3	5.2	12.2	21.0	2.1	
2.Somewhat burden	38.8	25.6	47.0	35.0	51.5	54.0	21.2	9.4	56.9	36.5	44.3	35.5	16.5	39.4	50.6	8.2	
3.Not a burden at all	36.7	62.8	22.7	38.5	17.5	30.8	72.3	88.8	3.4	45.5	44.2	41.2	78.3	48.4	28.4	89.7	

PH080	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1.None	29.4	29.9	78.5	26.7	37.8	18.4	13.8	39.3	53.8	74.7	53.6	43.3	50.6	56.7	74.4	51.7	29.2
2.1 to 2 times	53.3	58.5	17.3	60.6	45.5	66.5	65.3	56.3	31.8	20.6	36.3	40.8	35.2	28.0	18.4	40.4	46.9
3.3 to 5 times	13.0	8.7	3.7	9.8	12.5	11.9	16.6	4.4	11.3	3.8	7.1	13.3	10.5	11.5	5.3	6.1	17.2
4.6 to 9 times	2.8	1.9	0.3	1.8	2.7	1.8	3.3	0.0	2.2	0.6	1.7	2.0	2.6	2.3	1.1	1.1	4.3
5.10 times or more	1.6	1.1	0.2	1.1	1.6	1.4	1.1	0.0	0.9	0.3	1.3	0.6	1.1	1.5	0.8	0.6	2.5
	LT	LU	LV	ME	MK	MT	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1.None	55.1	19.4	48.9	72.5	73.0	46.2	16.2	25.5	65.9	46.6	81.7	65.8	32.3	40.5	24.6	29.4	
2.1 to 2 times	30.8	65.2	36.1	17.8	18.8	45.4	66.3	64.5	20.7	33.6	14.9	24.0	55.9	36.5	65.1	56.2	
3.3 to 5 times	10.8	11.5	12.3	7.8	7.0	6.8	15.2	8.1	10.3	14.2	2.5	8.5	9.0	17.2	8.6	11.6	
4.6 to 9 times	2.2	2.6	1.9	1.1	0.9	1.1	1.7	1.2	2.1	3.3	0.7	0.9	1.8	3.4	1.1	2.0	
5.10 times or more	1.1	1.2	0.9	0.7	0.4	0.6	0.6	0.7	1.0	2.3	0.3	0.9	1.0	2.4	0.7	0.8	

PH090	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1.None	16.5	12.7	52.4	25.5	32.3	14.2	10.7	14.3	26.8	60.5	20.3	32.4	15.5	32.2	28.9	24.4	29.2
2.1 to 2 times	36.1	35.0	22.0	39.0	42.0	45.2	39.4	17.8	42.4	26.5	44.3	39.2	34.2	30.2	30.4	36.2	46.9
3.3 to 5 times	26.5	31.0	15.6	21.8	16.5	26.7	32.7	21.9	23.1	9.2	22.4	20.7	33.5	19.1	20.7	23.6	17.2
4.6 to 9 times	8.6	9.6	5.5	6.2	6.9	7.4	9.9	20.2	4.5	2.1	6.9	4.4	10.1	7.6	10.0	7.9	4.3
5.10 times or more	12.3	11.7	4.6	7.5	2.2	6.6	7.3	25.8	3.3	1.7	6.1	3.3	6.7	10.9	10.0	8.0	2.5
	LT	LU	LV	ME	МК	MT	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1.None	23.7	11.3	20.1	47.2	58.3	17.1	29.1	21.5	36.4	18.8	42.9	30.3	38.0	24.5	18.1	26.5	
2.1 to 2 times	37.7	45.1	36.0	24.4	17.3	43.9	39.0	41.5	24.8	44.2	33.1	28.4	38.5	35.2	47.2	35.3	
3.3 to 5 times	22.8	30.2	25.6	16.6	13.2	27.3	22.8	22.6	21.8	25.3	13.5	19.0	15.8	26.1	20.7	21.5	
4.6 to 9 times	10.4	7.7	10.9	5.8	4.7	7.4	5.6	6.6	9.1	7.1	6.3	6.8	4.0	6.2	8.2	8.4	
5.10 times or more	5.4	5.8	7.5	6.0	6.5	4.3	3.5	7.9	8.0	4.7	4.2	15.5	3.6	8.0	5.9	8.4	
PH100	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1.None	32.1	46.1	67.9	53.8	36.4	25.9	21.7	59.7	47.0	73.2	48.5	59.4	41.5	59.5	55.9	68.3	39.3
2.1 to 2 times	38.4	30.7	23.1	29.5	37.1	39.4	42.0	26.1	32.0	17.4	33.2	27.3	35.6	24.8	24.9	21.7	48.3
3.3 to 5 times	18.7	13.6	6.9	9.4	15.1	20.3	23.2	9.8	15.6	6.3	12.1	9.3	15.0	9.9	11.5	6.8	9.7
4.6 to 9 times	5.5	4.8	1.2	3.0	6.0	7.3	7.5	3.4	3.4	1.7	3.7	2.2	4.5	2.9	4.1	1.8	2.0
5.10 times or more	5.3	4.8	0.9	4.4	5.5	7.1	5.5	1.1	2.1	1.4	2.6	1.8	3.4	3.0	3.7	1.4	0.8
	LT	LU	LV	ME	MK	MT	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1.None	56.9	28.2	48.7	75.6	81.3	64.2	57.3	61.6	55.9	46.9	87.9	51.7	64.8	47.3	47.6	64.6	
2.1 to 2 times	28.7	40.7	30.2	13.7	13.0	26.5	22.4	27.5	21.8	33.1	9.3	26.2	23.7	32.4	30.7	21.1	
3.3 to 5 times	10.2	18.9	15.0	6.4	4.0	6.6	12.6	7.6	13.9	13.5	1.9	13.4	7.9	12.9	13.5	8.6	
4.6 to 9 times	2.8	6.8	3.4	1.8	1.0	1.8	4.0	1.5	4.7	3.8	0.6	3.9	1.9	3.7	4.8	3.0	
5.10 times or more	1.5	5.4	2.6	2.5	0.7	0.9	3.8	1.8	3.7	2.7	0.4	4.8	1.7	3.7	3.4	2.8	

PH110	AT	BE	BG	СН	CY	CZ	EE	ES	FI	FR	HR	HU	IE	LT
Underweight: BMI (<19)	4.2	4.4	2.1	4.9	3.2	1.3	3.2	3.3	1.6	5.8	1.9	4.1	2.3	3.8
Normal weight: BMI (19 - 24)	46.7	47.8	39.3	52.6	45.1	36.7	41.2	45.7	38.3	49.0	38.0	40.3	41.9	41.1
Pre-obese: BMI (25 - 29)	34.4	33.3	44.7	31.5	37.4	41.7	34.9	37.2	39.8	30.1	42.1	35.8	41.0	38.1
Obese: BMI equal (30>=)	14.7	14.5	13.9	11.1	14.4	20.3	20.8	13.9	20.3	15.0	18.0	19.7	14.8	17.1
	LU	LV	МК	MT	NL	NO	PL	PT	RO	RS	SI	SK	UK	
Underweight: BMI (<19)	5.3	2.9	2.0	2.9	3.5	5.2	3.2	3.4	1.1	2.9	2.9	2.1	3.0	
Normal weight: BMI (19 - 24)	46.0	40.9	43.1	35.4	50.5	45.4	41.5	44.1	37.1	43.1	45.1	39.3	37.4	
Pre-obese: BMI (25 - 29)	32.9	35.0	44.6	36.3	33.7	35.6	38.7	37.1	51.6	39.7	36.0	43.0	37.0	
Obese: BMI equal (30>=)	15.8	21.2	10.3	25.5	12.4	13.9	16.6	15.4	10.2	14.3	16.1	15.7	22.6	

*DE, DK, EL, IT, ME, SE are not included during low reliability

PH120	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1. Mostly sitting	35.9	47.8	33.8	44.0	41.5	43.2	49.6	47.9	44.4	25.5	33.7	42.9	34.3	31.1	35.8	38.1	29.5
2. Mostly standing	12.8	17.6	24.1	14.3	8.6	12.1	11.4	11.3	5.7	9.9	45.9	6.8	12.8	11.1	11.4	19.9	27.0
3. Mostly walking or moderate physical effort	42.3	26.9	35.0	34.2	44.8	37.5	30.3	36.2	42.5	53.4	15.3	42.7	44.3	48.5	42.3	31.6	37.1
4. Mostly heavy physical effort	8.9	7.8	7.2	7.6	5.1	7.3	8.7	4.5	7.4	11.2	5.2	7.5	8.7	9.2	10.5	10.4	6.4
	LT	LU	LV	ME	MK	МТ	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1. Mostly sitting	35.0	45.7	31.8	33.9	24.7	37.3	44.1	43.1	39.8	33.7	27.0	30.3	40.7	32.1	35.8	40.5	
2. Mostly standing	4.7	25.3	8.7	15.5	45.8	26.9	9.7	8.8	8.7	29.6	30.1	10.0	9.9	17.6	18.5	15.7	
3. Mostly walking or moderate physical effort	53.7	23.4	48.1	43.4	23.5	31.9	40.6	40.1	41.7	29.5	33.8	52.7	42.5	45.3	36.4	36.9	
4. Mostly heavy physical effort	6.6	5.7	11.4	7.2	6.1	3.9	5.6	8.1	9.9	7.2	9.2	7.0	7.0	5.0	9.3	6.9	

PH130*	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1.Zero hours	0.0	46.2	42.9	11.4	49.6	39.0	11.7	7.1	4.8	42.9	27.8	13.3	33.5	64.0	49.8	20.1	43.1
2.Less than 1 hour	4.0	1.7	1.9	1.6	0.7	2.1	2.9	2.9	0.7	1.5	5.2	2.7	3.8	3.0	1.6	3.5	1.4
3.From 60 to 179 minutes	34.3	18.6	10.4	23.5	14.5	19.8	31.1	23.2	10.3	19.4	19.5	24.1	23.9	17.4	19.2	15.9	18.0
4.From 180 to 299 minutes	25.4	12.5	8.8	23.3	18.8	13.5	21.6	22.6	12.8	15.4	18.9	23.9	15.7	8.0	11.5	18.2	13.4
5.300 minutes or over	36.6	21.1	36.0	40.2	16.4	25.6	32.7	44.2	71.3	20.8	28.6	36.1	23.1	7.6	17.8	42.4	24.1
	LT	LU	LV	ME	MK	MT	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1.Zero hours	46.0	27.9	46.9	35.7	56.3	47.8	8.9	26.6	28.0	55.2	3.9	66.7	14.2	15.5	0.0	19.0	
2.Less than 1 hour	2.0	72.1	1.7	1.4	1.1	1.8	1.9	2.2	2.9	1.9	25.3	0.0	1.4	2.2	2.0	0.9	
3.From 60 to 179 minutes	15.4	0.0	17.2	10.2	10.7	30.6	23.6	24.0	23.9	17.2	42.5	4.6	19.9	22.8	31.2	18.1	
4.From 180 to 299 minutes	12.7	0.0	12.9	10.4	8.3	13.6	23.8	22.4	16.5	11.6	14.8	6.3	22.9	20.3	23.1	16.4	
5.300 minutes or over	23.9	0.0	21.5	42.3	23.7	6.2	41.8	24.7	28.7	14.1	13.4	22.4	41.6	39.2	43.8	45.5	

*Coded from a scale variable collected as hhmm (hoursminutes)

PH140	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1. Twice or more a day	19.8	23.3	8.9	23.1	30.2	17.6	25.9	15.4	15.0	13.7	37.2	15.8	29.2	9.1	11.6	37.6	39.8
2. Once a day	40.9	40.2	27.8	41.7	38.3	39.1	35.1	39.1	40.6	37.1	40.0	38.0	32.6	36.5	28.0	36.6	44.8
3. 4 to 6 times a week	15.2	11.1	20.1	13.3	15.3	17.8	13.6	14.1	20.6	22.8	10.2	18.0	12.9	24.7	22.7	8.5	9.5
4. 1 to 3 times a week	19.2	16.0	31.1	16.7	11.2	20.7	16.9	19.8	18.7	19.7	9.6	19.8	14.8	25.0	25.5	9.6	4.3
5. Less than once a week	2.9	5.4	11.2	3.1	4.2	4.2	7.1	10.0	2.4	5.7	3.0	7.7	6.9	4.2	10.3	4.7	0.8
6. Never	1.9	4.0	1.0	2.2	0.8	0.7	1.4	1.7	2.7	0.9	0.0	0.7	3.6	0.5	1.9	3.1	0.8
	LT	LU	LV	ME	МК	MT	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1. Twice or more a day	12.0	29.3	6.8	15.9	14.6	30.1	29.1	26.2	16.0	47.8	13.2	11.8	23.4	21.9	17.1	31.4	
2. Once a day	25.3	42.7	28.2	38.2	35.4	40.1	28.4	39.0	41.8	32.8	28.6	37.9	37.0	46.8	36.2	33.5	
3. 4 to 6 times a week	24.2	10.6	24.5	23.4	21.1	10.9	19.2	12.8	18.9	7.7	22.1	22.1	15.0	13.7	18.1	9.4	
4. 1 to 3 times a week	27.7	12.4	29.0	17.0	23.6	12.1	15.9	17.1	17.3	7.8	26.8	20.9	18.2	14.5	21.8	14.7	
5. Less than once a week	10.2	2.9	9.9	4.8	4.8	3.7	5.3	4.2	5.1	2.6	9.0	6.7	5.0	2.4	6.3	7.1	
6. Never	0.7	2.1	1.5	0.7	0.4	3.2	2.0	0.7	1.0	1.3	0.5	0.7	1.4	0.8	0.6	4.0	

PH150	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1. Twice or more a day	15.2	15.3	10.6	18.2	17.8	15.8	18.2	13.2	18.4	11.0	22.7	19.9	33.9	9.6	8.6	35.5	35.9
2. Once a day	41.0	68.3	34.2	53.4	46.0	34.6	36.2	45.9	41.7	48.5	42.0	47.5	36.7	44.9	21.8	48.6	44.5
3. 4 to 6 times a week	24.7	9.5	23.1	17.3	20.1	21.5	22.1	20.0	21.2	17.7	21.5	17.1	14.8	26.4	23.5	7.7	11.3
4. 1 to 3 times a week	17.3	5.4	25.9	10.0	12.1	23.4	19.1	16.3	15.9	18.8	12.8	12.0	11.2	17.8	31.7	5.3	6.8
5. Less than once a week	1.1	1.0	5.9	0.7	3.3	4.2	3.7	3.8	1.1	3.7	1.0	3.0	2.4	1.2	12.9	1.5	1.1
6. Never	0.7	0.6	0.4	0.5	0.7	0.5	0.6	0.7	1.7	0.4	0.0	0.5	1.0	0.2	1.5	1.5	0.5
	LT	LU	LV	ME	MK	MT	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1. Twice or more a day	14.4	22.9	8.8	14.2	13.8	15.9	9.9	13.0	15.5	40.8	12.6	14.8	29.0	15.7	15.5	32.2	
2. Once a day	30.3	51.0	35.6	39.2	40.8	35.3	49.1	56.4	45.2	37.1	28.7	49.0	43.3	54.8	36.2	38.8	
3. 4 to 6 times a week	27.2	12.9	29.1	28.2	27.2	19.8	34.2	16.9	20.6	10.4	28.0	19.3	14.3	16.4	19.9	13.8	
4. 1 to 3 times a week	22.5	10.5	21.6	15.9	16.5	21.5	6.1	12.0	15.5	8.9	24.9	13.3	10.8	10.9	22.6	11.9	
5. Less than once a week	5.3	1.7	4.4	2.4	1.6	4.1	0.5	1.4	2.8	2.1	5.6	3.4	1.9	1.5	5.3	2.1	
6. Never	0.2	1.0	0.6	0.2	0.1	3.4	0.2	0.3	0.5	0.8	0.3	0.2	0.6	0.7	0.4	1.3	

HC010, HC030	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
Medical care	0.0	2.4	2.3	1.6	1.4	2.7	0.2	1.2	1.9	2.4	0.4	3.4	1.5	0.4	0.2	14.7	1.9
Dental care	1.4	8.5	2.3	1.8	3.3	2.5	0.7	1.0	3.5	5.1	5.7	2.9	1.1	0.3	0.2	14.4	3.7
	LT	LU	LV	ME	MK	МТ	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
Medical care	2.3	1.1	2.5	1.6	2.9	0.6	1.9	3.7	2.1	0.9	7.3	1.0	4.4	1.6	0.6	1.9	
Dental care	3.4	0.6	7.2	4.0	14.7	2.8	5.3	0.1	2.4	6.3	5.9	1.5	0.8	2.7	0.8	1.6	

HC020	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1. Too expensive	0.0	92.4	93.8	55.0	100.0	8.2	100.0	0.0	9.6	77.9	53.9	0.7	18.6	0.0	56.8	18.3	85.6
2. Waiting list	100.0	0.0	0.0	0.0	0.0	9.6	0.0	36.4	67.4	5.2	33.8	79.1	17.9	18.6	0.0	56.8	12.1
3. No time	0.0	0.0	0.0	18.1	0.0	24.2	0.0	0.0	0.0	0.9	8.5	0.0	2.8	20.5	0.0	0.0	2.3
4. Too far to travel	0.0	2.4	6.2	0.0	0.0	5.4	0.0	0.0	0.0	7.1	0.0	0.0	1.5	0.0	43.2	14.7	0.0
5. Other ⁷	0.0	5.3	0.0	26.9	0.0	52.7	0.0	63.6	23.0	8.9	3.8	20.2	59.1	60.9	0.0	10.2	0.0
	LT	LU	LV	ME	MK	МТ	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1. Too expensive	1.7	26.6	28.8	73.1	46.6	78.4	0.0	0.0	10.5	81.0	62.6	11.4	0.0	0.0	68.5	0.0	
2. Waiting list	2.5	53.7	51.6	12.7	33.4	21.6	16.9	21.8	72.1	13.9	10.8	22.7	54.6	66.9	31.5	74.7	
3. No time	0.0	0.0	14.2	0.0	3.2	0.0	0.0	0.0	1.9	0.0	4.4	34.2	0.0	14.8	0.0	0.0	
4. Too far to travel	46.3	0.0	0.0	6.4	0.0	0.0	0.0	0.0	4.0	0.0	10.4	11.7	0.0	0.0	0.0	0.0	
5. Other ⁸	49.5	19.7	5.5	7.8	16.9	0.0	83.1	78.2	11.4	5.1	11.7	19.9	45.4	18.3	0.0	25.4	

HC040	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1. Too expensive	7.5	87.3	91.1	91.4	96.1	22.5	0.0	0.0	49.5	95.8	99.3	0.0	49.6	0.0	100.0	61.1	85.2
2. Waiting list	14.4	0.0	0.0	0.0	0.0	22.8	0.0	0.0	23.7	2.9	0.0	96.0	19.3	10.4	0.0	36.1	14.3
3. No time	0.0	1.8	0.0	2.4	0.0	14.9	39.3	7.0	6.0	0.0	0.0	0.0	6.2	44.3	0.0	0.0	0.5
4. Too far to travel	0.0	0.0	7.1	0.0	0.0	3.2	0.0	36.2	2.9	1.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0
5. Other	78.1	11.0	1.9	6.2	3.9	36.6	60.7	56.9	17.9	0.2	0.7	4.0	25.0	45.3	0.0	2.8	0.0
	LT	LU	LV	ME	MK	MT	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1. Too expensive	9.0	100.0	55.7	85.2	22.3	0.0	16.0	0.0	20.4	90.7	66.6	26.3	0.0	0.0	75.2	0.0	
2. Waiting list	83.9	0.0	33.8	0.0	3.1	0.0	10.7	100.0	43.0	0.3	1.4	3.1	13.1	85.2	9.3	22.7	
3. No time	2.0	0.0	6.7	0.0	1.5	45.2	0.0	0.0	16.1	6.0	0.0	23.7	41.1	1.5	5.9	0.0	
4. Too far to travel	0.0	0.0	2.5	2.5	0.0	0.0	0.0	0.0	2.6	0.5	18.9	7.2	0.0	0.0	0.0	0.0	
5. Other	5.2	0.0	1.3	12.3	73.2	54.8	73.3	0.0	18.1	2.5	13.2	39.7	45.9	13.3	9.6	77.3	

⁷The cases are low but the percentage is high. Based on self-defined answer from respondent

RC010T	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1. Very good	80.7	73.2	73.9	71.0	90.3	74.3	65.6	71.4	46.2	94.1	65.8	68.9	75.1	84.1	62.2	79.6	48.7
2. Good	15.7	22.7	24.3	25.6	7.2	21.8	29.0	23.4	45.8	4.0	32.3	28.1	20.0	13.8	32.7	16.9	50.1
3. Fair	2.8	3.0	1.0	2.7	1.7	3.1	4.6	4.1	6.8	1.2	1.5	2.6	4.3	1.2	4.1	2.6	0.8
4. Bad	0.8	1.0	0.7	0.8	0.5	0.6	0.5	0.6	1.2	0.2	0.3	0.4	0.6	0.4	0.7	0.7	0.3
5. Very bad	0.0	0.2	0.1	0.0	0.3	0.2	0.2	0.5	0.1	0.5	0.2	0.0	0.1	0.6	0.3	0.3	0.1
	LT	LU	LV	ME	MK	MT	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1. Very good	40.3	70.3	23.6	88.6	65.4	56.1	50.7	67.2	55.4	46.3	74.2	73.7	68.5	63.5	55.5	70.1	
2. Good	55.1	24.8	67.1	10.1	28.9	41.5	44.6	27.9	38.1	43.8	25.2	23.2	27.7	30.2	40.5	24.6	
3. Fair	3.1	3.5	8.1	0.9	4.5	2.1	4.2	3.7	5.3	8.7	0.2	2.3	3.2	5.4	3.1	4.2	
4. Bad	1.5	1.3	1.2	0.3	0.8	0.4	0.4	1.0	1.0	0.7	0.3	0.5	0.5	0.6	0.6	1.0	
5. Very bad	0.1	0.2	0.0	0.1	0.4	0.0	0.1	0.2	0.2	0.5	0.1	0.3	0.2	0.3	0.3	0.1	

RC020T	AT	BE	BG	СН	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT
1. Severely limited	1.4	1.6	0.6	0.9	0.7	1.1	0.8	1.4	1.0	0.6	0.7	1.6	1.2	0.8	1.0	1.5	0.3
2. Limited but not severely	4.5	3.6	1.8	6.1	0.8	5.4	3.6	7.4	7.5	1.3	2.1	7.7	3.7	2.0	3.6	3.4	0.5
3. Not limited at all	94.1	94.9	97.6	93.0	98.4	93.5	95.6	91.2	91.5	98.2	97.2	90.6	95.1	97.2	95.5	95.1	99.2
	LT	LU	LV	ME	МК	MT	NL	NO	PL	PT	RO	RS	SE	SI	SK	UK	
1. Severely limited	0.9	1.8	1.1	0.2	1.2	0.9	0.8	1.4	1.0	0.6	0.1	0.7	0.9	1.3	1.0	3.2	
2. Limited but not severely	8.2	3.2	10.7	0.2	1.1	1.8	5.4	5.9	2.6	4.7	8.4	1.0	2.6	2.3	1.5	5.2	
3. Not limited at all	91.0	95.1	88.2	99.6	97.7	97.4	93.8	92.7	96.4	94.8	91.5	98.3	96.4	96.5	97.5	91.6	



ANNEX 2: FREQUENCY DISTRIBUTION OF VARIABLE FLAGS

8.2: Frequencies of flags 1, -1, -2, -3 and -5 for each variable by country

Country	HS200	HS210	HS220	PH080	PH090	PH100	PH110	PH120	PH130	PH140	PH150
AT	10.8	18.1	6.6	0.2	0.2	0.2	1.1	0.3	26.1	0.1	0.1
BE	0.0	0.0	0.0	0.7	0.7	0.7	5.5	0.7	1.5	0.7	0.7
BG	0.0	0.0	0.0	0.3	0.3	0.3	0.3	0.3	0.0	0.3	0.3
СН	0.4	0.4	0.4	14.5	14.5	14.4	15.3	14.8	15.6	14.4	14.4
CY	0.0	0.0	0.0	0.1	0.1	0.1	0.5	0.1	0.1	0.1	0.1
CZ	0.0	0.0	0.0	29.3	29.3	29.3	30.8	0.0	0.4	29.3	29.3
DE	0.6	0.9	0.5	0.4	0.3	0.4	1.1	1.5	19.8	0.3	0.3
DK	0.2	0.2	0.2	0.0	0.0	0.0	1.1	0.9	1.6	0.2	0.2
EE	0.0	0.1	0.1	27.1	27.2	27.2	27.5	27.2	27.7	27.2	27.2
EL	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
ES	0.0	0.0	0.0	0.9	0.9	0.9	2.0	0.9	1.3	0.9	0.9
FI	0.2	0.3	0.3	0.5	0.5	0.5	0.0	0.9	1.3	0.5	0.5
FR	0.2	0.3	0.1	2.4	2.5	2.5	7.1	2.5	7.9	2.6	2.5
HR	0.0	0.0	0.0	0.5	0.5	0.5	4.5	0.4	0.3	0.4	0.4
HU	0.7	0.8	0.2	0.2	0.3	0.2	0.8	0.4	1.6	0.2	0.2
IE	1.4	1.5	1.4	0.6	0.7	0.5	25.0	0.1	2.9	0.2	0.2
IT	2.7	2.6	2.7	4.0	4.0	4.1	0.0	0.0	0.0	0.0	0.0
LT	0.0	0.0	0.0	4.9	4.4	5.2	13.3	2.5	25.6	2.5	2.5
LU	0.1	0.1	0.0	0.6	0.5	0.4	3.5	1.2	1.7	0.3	0.2
LV	0.2	0.0	0.0	3.3	3.3	3.3	8.9	3.3	5.4	3.3	3.3
ME	1.0	1.0	1.0	0.0	0.0	0.0	0.0	0.0	0.7	0.0	0.0
MK	0.2	0.3	0.3	0.6	4.3	4.4	0.2	0.4	0.2	0.3	0.3
MT	1.2	1.2	1.2	0.7	0.8	0.7	4.9	0.7	0.8	0.7	0.7
NL	1.6	1.0	0.9	0.8	0.2	0.2	1.8	1.0	2.0	0.1	0.0
NO	5.0	4.3	1.9	1.0	1.1	1.0	0.0	0.1	0.6	0.9	0.9
PL	0.0	0.0	0.0	11.2	11.2	11.2	12.1	13.3	11.2	11.3	11.4
PT	0.0	0.0	0.0	0.3	0.3	0.3	1.9	0.2	0.4	0.3	0.2
RO	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
RS	0.0	0.0	0.0	0.1	0.1	0.1	0.7	0.1	0.1	0.1	0.1
SE	1.0	0.8	1.0	0.4	0.4	0.3	2.0	1.6	1.7	1.0	1.0
SI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
SK	0.0	0.0	0.0	0.2	0.3	0.3	2.7	0.1	41.2	0.2	0.2
UK	41.7	41.7	41.7	44.2	44.2	44.2	47.1	44.2	44.4	44.2	44.2

Flag "-1"

*Unweighted distributions of flag '-1'



Country	RC010T	RC020T	HC010T	HC020T	HC030T	HC040T
AT	0.0	0.0	0.0	0.0	0.0	0.0
BE	0.0	0.0	0.0	0.0	0.0	0.0
BG	0.0	0.0	0.0	0.0	0.0	0.0
СН	0.0	0.0	0.1	0.0	0.1	0.0
CY	0.0	0.0	0.0	0.0	0.0	0.0
CZ	0.0	0.0	0.0	0.0	0.0	0.0
DE	0.2	0.5	0.4	0.0	0.4	0.0
DK	0.4	0.4	0.4	0.1	0.4	0.1
EE	0.2	0.0	0.0	0.0	0.0	0.0
EL	0.0	0.0	0.0	0.0	0.0	0.0
ES	0.0	0.0	0.0	0.0	0.0	0.0
FI	0.1	0.0	0.0	0.0	0.1	0.0
FR	0.0	0.0	0.0	0.0	0.0	0.0
HR	0.0	0.0	0.0	0.0	0.0	0.0
HU	0.1	0.1	0.0	0.0	0.0	7.8
IE	0.0	0.0	2.1	0.0	2.1	0.0
IT	0.3	0.3	0.6	0.0	0.6	0.0
LT	0.0	0.1	0.0	0.0	0.0	0.0
LU	0.0	0.1	0.0	0.0	0.0	0.1
LV	0.0	0.0	0.0	0.0	0.0	0.0
ME	0.0	0.0	0.0	0.0	0.0	0.0
MK	2.7	2.4	1.4	0.0	1.2	0.0
MT	0.0	0.0	0.1	0.0	0.1	0.0
NL	0.0	0.3	0.2	0.0	0.2	0.0
NO	0.2	0.2	0.3	0.0	0.3	0.0
PL	0.0	0.0	0.0	0.0	0.0	0.0
PT	0.0	0.0	0.0	0.0	0.0	0.0
RO	0.0	0.0	0.0	0.0	0.0	0.0
RS	0.0	0.0	0.0	0.0	0.0	0.0
SE	0.1	0.1	0.5	0.0	0.4	0.0
SI	0.0	1.1	0.0	0.0	0.0	0.0
SK	0.0	0.0	0.0	0.0	0.0	0.0
UK	8.8	8.8	11.6	0.0	11.6	0.0

Flag '-1' of children's variables

*Unweighted distributions of flag '-1'



Flag '-2'

Variables	HS200	HS210	HS220	PH120	RC010T	RC020T	HC010T	HC020T	HC030T	HC040T
AT	0.0	0.0	0.0	2.1	0.0	0.0	8.8	21.3	12.9	21.2
BE	10.9	13.7	8.0	26.8	0.0	0.0	8.7	24.2	10.0	23.6
BG	51.7	74.0	23.4	27.0	0.0	0.0	6.7	20.5	12.3	20.5
СН	8.3	8.4	6.2	13.8	0.0	0.0	9.4	22.7	9.9	22.6
CY	3.9	19.1	1.9	2.2	0.0	0.0	2.0	26.0	8.7	25.8
CZ	4.3	13.6	2.6	11.6	0.0	0.0	2.0	99.5	3.7	99.7
DE	13.4	24.0	7.2	23.6	0.0	0.0	4.2	14.7	7.0	14.7
DK	25.5	7.9	18.9	0.0	0.0	0.0	0.0	18.9	0.0	19.1
EE	11.7	40.3	8.8	0.0	0.0	0.0	5.9	25.6	9.2	25.5
EL	11.5	26.9	10.8	9.6	0.0	0.0	11.8	99.7	14.6	99.7
ES	7.8	25.2	3.5	6.3	0.0	0.0	6.3	99.9	11.6	99.3
FI	6.7	14.8	4.7	0.8	0.0	0.0	7.1	24.9	7.9	25.0
FR	9.0	36.7	8.8	11.6	0.0	0.0	2.7	24.9	8.9	25.1
HR	15.7	32.2	16.4	24.9	0.0	0.0	3.8	99.9	5.9	20.4
HU	17.8	57.4	7.0	13.6	0.0	0.0	3.3	19.3	11.5	11.5
IE	18.1	31.1	15.1	40.2	0.0	0.0	23.2	99.4	24.4	99.5
IT	41.2	59.7	21.7	25.7	0.0	0.0	10.5	19.0	10.6	18.9
LT	15.9	30.0	7.9	10.2	0.3	0.3	4.4	17.6	8.5	17.4
LU	3.2	12.8	13.9	4.1	0.0	0.0	4.4	99.8	11.4	99.9
LV	10.9	26.4	7.4	18.2	0.0	0.0	4.9	22.1	6.3	21.5
ME	14.5	39.9	13.5	13.8	0.0	0.0	12.1	29.5	18.0	29.2
MK	13.7	34.6	13.4	17.8	0.0	0.0	10.0	99.5	15.2	27.3
MT	8.2	21.2	11.1	11.7	0.0	0.0	11.3	99.9	11.0	99.8
NL	14.8	13.4	10.7	2.7	0.0	0.0	15.2	20.8	18.5	20.8
NO	0.0	0.0	5.0	17.7	0.0	0.0	12.4	99.6	14.3	100.0
PL	2.0	22.4	1.6	0.3	0.0	0.0	4.4	26.4	11.8	26.5
PT	4.2	30.1	5.4	4.9	0.0	0.0	5.5	99.9	9.6	99.2
RO	35.0	55.5	21.9	23.9	0.0	0.0	1.6	99.4	1.6	99.4
RS	18.8	53.6	18.7	12.3	0.0	0.0	9.1	99.8	12.5	99.7
SE	6.0	8.4	3.9	2.0	0.0	0.0	13.1	27.4	18.3	27.9
SI	12.6	25.6	0.0	1.4	0.0	0.0	4.4	26.7	5.8	26.5
SK	11.7	14.5	7.1	19.2	0.0	0.0	4.1	99.9	9.7	99.8
UK	17.5	8.8	10.6	4.0	0.0	0.0	6.0	99.9	4.4	99.8

*Unweighted distributions of flag '-2'



Flag "-3"

Country	PH080	PH090	PH100	PH110	PH120	PH130	PH140	PH150
AT	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
BE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
BG	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
СН	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CY	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
CZ	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
DE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
DK	45.4	45.4	45.4	45.4	45.4	45.4	45.4	45.4
EE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
EL	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
ES	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
FI	48.8	48.8	48.8	48.8	48.8	48.8	48.8	48.8
FR	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
HR	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
HU	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
IE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
IT	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
LT	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
LU	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
LV	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
ME	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
MK	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
MT	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
NL	45.8	45.8	45.8	45.8	45.8	45.8	45.8	45.8
NO	48.3	48.3	48.3	48.3	48.3	48.3	48.3	48.3
PL	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
PT	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
RO	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
RS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
SE	48.8	48.8	48.8	48.8	48.8	48.8	48.8	48.8
SI	60.7	60.7	60.7	60.7	60.7	60.7	60.7	60.7
SK	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
UK	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

*Unweighted distributions of flag '-3'



Flag "-5"

Country	RC010T	RC020T	HC010T	HC020T	HC030T	HC040T
AT	83.7	0.0	78.7	78.7	78.7	78.7
BE	81.5	12.8	75.4	75.4	75.4	75.4
BG	87.8	2.5	79.3	79.3	79.3	79.3
СН	82.8	82.8	77.2	77.2	77.2	77.2
CY	84.0	6.1	73.7	73.7	73.7	73.7
CZ	85.0	4.4	79.1	0.0	79.1	0.0
DE	88.0	11.4	85.3	85.3	85.3	85.3
DK	85.2	3.3	80.7	80.7	80.7	80.7
EE	82.9	2.9	74.0	74.0	74.0	74.0
EL	86.4	15.7	79.7	0.0	79.7	0.0
ES	83.9	7.6	73.8	0.0	73.8	0.0
FI	80.3	5.9	74.6	74.6	74.6	74.6
FR	80.6	3.4	74.7	74.7	74.7	74.7
HR	86.7	7.4	79.5	0.0	79.5	79.5
HU	85.6	1.7	80.7	80.7	80.7	80.7
IE	77.7	2.2	70.6	0.0	70.6	0.0
IT	86.8	0.0	80.9	80.9	80.9	80.9
LT	88.0	0.0	82.3	82.3	82.3	82.3
LU	81.5	13.2	68.5	0.0	68.5	0.0
LV	84.0	2.2	77.3	77.3	77.3	77.3
ME	82.9	99.5	70.3	70.3	70.3	70.3
MK	82.9	14.3	71.1	0.0	71.1	71.1
MT	86.3	0.0	77.8	0.0	77.8	0.0
NL	83.4	3.8	79.1	79.1	79.1	79.1
NO	81.2	0.0	74.8	0.0	74.5	0.0
PL	84.0	4.9	73.1	73.1	73.1	73.1
PT	86.1	8.4	75.7	0.0	75.7	0.0
RO	91.1	27.1	85.3	0.0	85.3	0.0
RS	85.4	2.8	71.9	0.0	71.9	0.0
SE	79.6	8.1	72.1	72.1	72.1	72.1
SI	85.3	25.2	73.0	73.0	73.0	73.0
SK	86.2	15.0	75.2	0.0	75.2	0.0
UK	80.9	0.0	75.3	0.0	75.3	0.0

*Unweighted distributions of flag '-5'



ANNEX 3: DISTRIBUTION OF DESCRIPTIVE STATISTICS

8.3: Distribution of the descriptive statistics

Simple Statistics										
Variable	N	Mean	Std Dev	Sum	Minimum	Maximum				
HS200	562,659	2.40	0.71	1,348,120	1	3				
HS210	488,842	2.31	0.74	1,128,332	1	3				
HS220	593,410	2.29	0.72	1,361,102	1	3				
HC010T	167,970	1.98	0.14	332,743	1	2				
HC020T	3,194	2.46	1.58	7,864	1	5				
HC030T	135,062	1.97	0.17	266,025	1	2				
HC040T	3,961	2.16	1.58	8,536	1	5				
PH080	488,334	1.63	0.78	796,957	1	5				
PH090	488,009	2.29	1.15	1,117,547	1	5				
PH100	487,920	1.76	0.99	858,114	1	5				
PH110	480,281	25.26	4.56	12,129,550	16	40				
PH120	426,869	2.20	1.00	940,923	1	4				
PH130	469,059	343.85	570.89	161,000,000	0	9,900				
PH140	490,444	2.48	1.24	1,216,919	1	6				
PH150	490,471	2.42	1.09	1,188,546	1	6				
RC010T	100,897	1.39	0.61	140,613	1	5				
RC020T	98,290	2.94	0.27	289,214	1	3				



ANNEX 4: Correlation matrix

8.4: Correlation matrix

	HS200	HS210	HS220	HC010T	HC020T	HC030T	HC040T	PH080	PH090	PH100	PH110	PH120	PH130	PH140	PH150	RC010T	RC020T
HS200	1.00																
HS210	0.55**	1.00															
HS220	0.65**	0.52**	1.00														
HC010T	0.07**	0.05**	0.07**	1.00													
HC020T	0.41**	0.35**	0.28**		1.00												
HC030T	0.10**	0.09**	0.10**	0.25**	0.34**	1.00											
HC040T	0.15**	0.23**	0.13**	0.16**	0.62**		1.00										
PH080	0.06**	-0.08**	0.09**	0.02**	0.17**	0.06**	0.15**	1.00									
PH090	-0.08**	-0.03**	-0.13**	0.00 ⁿ	0.07*	0.00 ⁿ	0.00 ⁿ	0.14**	1.00								
PH100	-0.12**	-0.05**	-0.12**	0.01*	0.10**	0.02**	-0.01 ⁿ	0.17**	0.52**	1.00							
PH110	0.00*	0.01**	-0.03**	0.01 ⁿ	0.01 ⁿ	0.02**	-0.18**	0.00 ⁿ	0.16**	0.10**	1.00						
PH120	-0.04**	-0.04**	-0.04**	-0.01**	-0.08**	-0.03**	-0.10**	-0.06**	-0.06**	-0.07**	0.05**	1.00					
PH130	0.07**	0.04**	0.07**	0.00 ⁿ	0.12**	0.01*	0.04*	0.05**	-0.05**	-0.03**	-0.05**	0.04**	1.00				
PH140	-0.06**	-0.02**	-0.09**	-0.05**	-0.23**	-0.08**	-0.11**	-0.10**	-0.01**	-0.06**	0.04**	0.05**	-0.06**	1.00			
PH150	-0.08**	-0.05**	-0.11**	-0.04**	-0.24**	-0.07**	-0.12**	-0.10**	0.00n	-0.04**	0.05**	0.04**	-0.06**	0.63**	1.00		
RC010T	-0.11**	-0.08**	-0.14	-0.06**	-0.02 ⁿ	-0.07**	-0.06*									1.00	
RC020T	0.05**	0.01**	0.05	0.05**	-0.07*	0.03**	-0.03 ⁿ									-0.42**	1.00

**p<1%

*p<5%

n-non significant