

Limitation in activities because of health problems¹

Name of the variable

Limitation in activities because of health problems (Global Activity Limitation Indicator - GALI)

Scope

All social micro-data collections concerning households/persons (EU-SILC, EU-LFS, HBS, AES, EHIS, HETUS and ICT HH)

Variable definition

Reporting unit Individuals

Filter Specific filters (e.g. aged 15+) may apply depending on the survey target population concerning the variable.

Concept The variable reports on participation restriction through long-standing limitation (6 months or more) in activities that people usually do because of health problems, and its severity.

It measures the respondent's self-assessment of whether he/she is limited (in "activities people usually do") by any on-going physical, mental or emotional health problem, including disease or impairment, and old age. Consequences of injuries/accidents, congenital conditions, etc., are all included. Only the limitations directly caused by or related to one or more **health problems** are considered. Limitations due to financial, cultural or other none health-related causes should not be taken into account.

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 experiences in performing an activity'. People with long-standing limitations due to health problems have passed through a process of adaptation which may have resulted in a reduction of their activities. To be able to identify existing limitations a reference is necessary and therefore the activity limitations are assessed against a generally accepted population standard, relative to cultural and social expectations by referring only to '**activities people usually do**'. Usual activities cover all spectrums of activities: work or school, home and leisure activities.

The purpose of the variable is to measure the presence of **long-standing** limitations, as the consequences of such long-standing limitations (e.g. care, dependency) are more serious. Temporary or short-term limitations are excluded.

The **period of at least the past 6 months** is strictly related to the duration of the activity limitation and not to the duration of the health problem. The limitations must have started at least six months earlier and still exist at the moment of the interview. 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.

¹ Implementing guidelines for GALI variable were extracted from document [Standardised key social variables – Implementing guidelines](#), Eurostat, 2020.

New limitations which have not yet lasted 6 months but are expected to continue for more than 6 months shall not be taken into consideration, even if usual medical knowledge would suggest that the health problem behind a new limitation is very likely to continue for a long time or for the rest of the life of the respondent (such as for diabetes type 1). One reason is that in terms of activity limitation it may be possible to counteract at some point negative consequences for activity limitations by using assisting devices or personal assistance. The activity limitations of the same health problem may also depend on the individual person and circumstances, and only past experience can provide a safe answer.

This variable can be used as a proxy for disability.

Category concept

The response categories include three levels to better differentiate the severity of activity limitations: severely limited (severe limitations), limited but not severely (moderate limitations), not limited at all (no limitations).

‘Severely limited’ means that performing or accomplishing an activity cannot be done or only done with extreme difficulty, and that this situation has been ongoing for at least the past 6 months. Persons in this category usually cannot do the activity alone and would need further help from other people.

‘Limited but not severely’ means that performing or accomplishing a usual activity can be done but only with some difficulties, and that this situation has been ongoing for at least the past 6 months. Persons in this category usually do not need help from other persons. When help is provided it is usually less often than daily.

Persons with recurring or fluctuating health conditions should refer to the most common (most frequent) situation impacting their usual activities. People with conditions where several activity domains are affected but to different extent (less impact in some domains but more impact in some other domains) should make an overall evaluation of their situation and prioritize more common activities.

‘Not limited at all’ means that performing or accomplishing usual activities can be done without any difficulties, or that any possible activity limitation has NOT been going on for at least the past 6 months (i.e. it is not a long-standing limitation).

The category ‘not applicable’ is to be used to count statistical units which are part of the population of the data source but for which it systematically does not report any information on the variable (e.g. persons below a certain age).

Categories for the variable

Limitation in activities because of health problems
Severely limited
Limited but not severely
Not limited at all
Not stated
Not applicable

Implementation guidelines

The questions corresponding to the variable should not be filtered by any preceding question.

This variable is part of the Minimum European Health Module (MEHM), which was designed for a population aged 15 years old and over. The MEHM consists of two more variables on health status: self-perceived general health and long-standing health problem. If the MEHM is implemented, all the questions should be asked in the recommended order (i.e. self-perceived general health, long-standing health problem, and limitation in activities because of health problems) and with no inclusion of any other health status related questions before or between the MEHM questions as it could have impact on results. The MEHM, or a part of it, could be introduced to respondents using a short introduction: "I would now like to talk to you about your health".

The question should clearly show that the reference is to the activities people usually do and not to respondent's 'own activities'. Neither a list with examples of activities (for example work or school, home or leisure activities) nor a reference to the age group of the subject is included in the question. As such it gives no restrictions by culture, age, gender or the subjects own ambition. Specification of health concepts (e.g. physical and mental health) should be avoided.

In an interview mode, all possible answer categories should systematically be read to respondents.

Information on 'limitation in activities because of health problems' is to be collected through two questions (see section 'reference question'). However, the data should always be transmitted to Eurostat as one single variable. The final variable for data transmission is constructed as follows:

- TRANSMITTED_VARIABLE_CATEGORY = 'severely limited' if QUESTION_1 = 'severely limited' and QUESTION_2 = 'Yes'
- TRANSMITTED_VARIABLE_CATEGORY = 'limited but not severely' if QUESTION_1 = 'limited but not severely' and QUESTION_2 = 'Yes'
- TRANSMITTED_VARIABLE_CATEGORY = 'not limited at all' if QUESTION_1 = 'not limited at all' or QUESTION_2 = 'No'
- TRANSMITTED_VARIABLE_CATEGORY = 'not stated' if QUESTION_1 is missing or [(QUESTION_1 = 'severely limited' or 'limited but not severely') and (QUESTION_2 is missing)]

Reference question

The reference question was originally developed as a single-question instrument by the Euro-REVES² project. This single-question version was implemented in EU-SILC and EHIS. However, following concerns about the length and complexity of the single-question version (four concepts in one question) and experience with its implementation, several studies aiming at simplifying and improving GALI were carried out. This led to the development of a routed, two-question version. This routed version aims at making GALI better and easier to understand for respondents, in particular in telephone interviews and self-administered questionnaires. The routed version is to be implemented in all EU social micro-data collections concerned.

The recommended two-question instrument is as follows:

QUESTION_1: "Are you limited because of a health problem in activities people usually do? Would you say you are... severely limited, limited but not severely, or not limited at all?"

If answer to QUESTION_1 is 'severely limited' or 'limited but not severely' ask QUESTION_2:

QUESTION_2: "Have you been limited for at least the past 6 months? Yes, No".

² More information can be found at: http://reves.site.ined.fr/en/home/regional_networks/euro_reves/