Single Integrated Metadata Structure (SIMS v2.0)

(user oriented)

Country: Greece

Compiling agency: ELSTAT

Domain name: HEALTH SURVEY, 2019

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1. Contact	<u>Top</u>		
1.1 Contact organisation	HELLENIC STATISTICAL AUTHORITY		
1.2 Contact organisation unit	POPULATION STATISTICS AND LABOUR MARKET DIVISION		
	1.Ntouros Georgios		
1.3 Contact name	2.Chalkiadaki Maria		
	3.Zouliatis Ioannis		
	1. Unit Head		
1.4 Contact person function	2. In charge of the whole project/survey (survey conduct, design of questionnaires, guidelines and other documents, database management, data dissemination, etc.)		
	3. In charge of the whole project/survey (survey conduct, design of questionnaires, guidelines and other documents, database		

	management, data dissemination, etc.)		
1.5 Contact mail address	Pireos 46 & Eponiton Str., 185 10 Piraeus		
	1. <u>g.ntouros@statistics.gr</u>		
1.6 Contact email address 2. <u>m.chalkiadaki@statistics.gr</u>			
	3. <u>i.zouliatis@statistics.gr</u>		
	• (+30) 213 135 2174		
1.7 Contact phone number	 (+30) 213 135 2896 		
	• (+30) 213 135 2941		
1.8 Contact fax number	(+30) 213 135 2906		

2. Metadata update Top 3.1 Metadata last certified 11/2/2020 3.2 Metadata last posted 11/2/2020 3.3 Metadata last update 11/2/2020

3. Statistical presentation

3.1 Data description

The Health Survey is conducted in accordance with the European Health Interview Survey (EHIS) standards and produces valuable information on population health status and the determinants affecting it –positively or negatively- such as physical exercise, food consumption, smoking, alcohol consumption etc. The survey took place for first time in 2009 and is conducted ever since every 5 years.

3.2 Classification system

NUTS 1, ISCO 08, ISCED 2011, NACE rev.2

3.3 Sector coverage

3.4 Statistical concepts and definitions

1. Dwelling

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Dwelling is a separate and independent structure, which has been built or converted to cover the habitation needs of a family (household). Dwelling is also considered every space neither constructed nor converted for the purpose of habitation, used, however, as a dwelling during the reference period.

The following are also considered as dwellings:

- A detached house, semi-detached house or groups of similar dwellings, apartment or flat in a building
- A room or more rooms, where the household lives
- A storage house, hut, shack, etc. used as main dwelling during the survey conduct.

The following is not considered as dwelling:

The space which although fulfilling the above definition is used for other purposes (i.e. office, warehouse, collective household, laboratory etc.)

2. Household

Household is either one person living alone or a group of persons, not necessarily related, living at the same address with common housekeeping. The household members share household's expenses or benefit from

them due to lack of income.

More specifically:

One – person household

- One person living alone in one dwelling or in one room of the latter and does his own housekeeping
- Two or more persons living at the same address, related or not, without common housekeeping and each one of them has the exclusive use of at least one room.

Multi-person household

- One couple or parents with their children or one parent with children
- One couple with or without children, parents of the couple and the domestic live in servant, if any, under the condition that he/she will stay for more than 12 months
- Two or more persons, not necessarily related, living at the same address with common housekeeping
- One or less than 5 boarders residing within a private household.

3. Household members

The criterion for recording household members is the **usual residence** and the time period of 12 consecutive months.

Individuals **usually residing** in the dwelling, according to the definition below constitute household and are recorded as household members.

An individual is considered to usual reside in a dwelling (household) if he/she uses the dwelling for his/her daily rest/relaxation, independently of temporary absences for recreation, holidays, visits to friends or relatives, work, medical treatment of religious obligations

Or

If the above criteria are not valid the individual is considered to usual reside in his/her legal or registered in authorities dwelling.

Only the following persons are considered as usually residing in the interviewed household:

- (1) Persons having lived in the household for the time period of 12 consecutive months before the survey conduct and
- (2) Persons having moved in the household some time during the last 12 months before the survey conduct, intending to stay for at least a year, continuously.

Hence, soldiers, sailors or persons working far from their dwelling/household for quite a long time or persons hospitalized for health problems the above criteria (1) and (2) for usual residence cannot apply and we consider them to reside in their legal registered in authorities dwelling, that is, the specific dwelling/household. The interview is in these cases done via representative (proxy interviews). For the completeness and accuracy of information collected telephone contact with interviewee is sought for recording or cross checking answers in specific questions.

For students away from home, in another city criteria (1) and (2) will be examined and case by case they may or may not be recorded as household members. If registered, proxy interview will be applied and telephone call for cross checking of answers will follow.

3.5 Statistical unit

Households and Individuals aged 15+ residing in private households.

3.6 Statistical population

The survey covers all private households of the country, irrespective of their size or their socio –economic characteristics. In each household one member aged 15 years old and over is surveyed. The following cases are excluded:

• Collective households, such as hotels, hospitals, elderly homes, camps, reformatories, etc. Collective households will also be considered the dwellings with more than 5 lodgers.

Households with foreign citizens serving in diplomatic missions.

The survey is being conducted in a sample of 11.662 households (sampling fraction 2.78‰).

3.7 Reference area

Country

3.8 Time coverage

The survey was conducted in the last quarter of 2019 (October – December).

The first wave has been conducted in 2009 and the second in 2014. The next wave is scheduled for 2025.

3.9 Base period

4. Unit of measure

Percentage % of individuals

5. Reference period

The reference periods of the survey vary and depend on the question. Reference periods are considered:

- **Day for the survey:** Related questions: Mainstat, Health status questions, Physical and sensory functional limitations/Health Determinants etc.
- The past 12 months (the period ends one day before the survey day): Chronic diseases and conditions, accidents and injuries, absence from work due to health problems, provision of health care services in a hospital as inpatient or day patient, unmet needs, provision of home care services etc.
 - **The past 4 weeks** (the period ends one day before the survey conduct day): questions of pain,, consultations of a general practitioner etc.
 - The past 2 weeks (the period ends one day before the survey conduct day): questions of medicine use / mental health etc.
 - **The past 7 days** (the period ends one day before the survey conduct day): questions of physical activity/exercise etc.

The questionnaires of the Health survey 2019 have be posted in ELSTAT's site: https://www.statistics.gr/en/statistics/-/publication/SHE22/-

6. Institutional mandate

6.1 Legal acts and other agreements

The legal framework concerning the organization and operation of ELSTAT is as follows:

Law 3832/2010 Law 3832/2010 (Government Gazette No 38, Issue A): "Hellenic Statistical System Establishment of the Hellenic Statistical Authority (ELSTAT) as an Independent Authority", as amended by article 90 paragraphs 8 and 9 of the Law 3842/2010 (Government Gazette No 58, Issue A): "Restoration of fiscal justice, confrontation of tax evasion and other provisions", by article 10 of the Law 3899/2010 (Government Gazette No 212, Issue A): "Urgent measures for the implementation of the assistance program of the Greek Economy", by article 45 of the Law 3943/2011 (Government Gazette No 66, Issue A): "Combating tax evasion, staffing of auditing services and other provisions falling within the competence of the Ministry of Finance", by article 22 paragraph 1 of the Law 3965/2011 (Government Gazette No 113, Issue A): "Operations Reform of the Consignment and Loan Fund, Public Debt Management Agency, Public Enterprises and Government bodies, the establishment of the General Secretary of Public Property and other provisions", by article first of the Law 4047/2012 (Government Gazette No 31, Issue A): "Ratification of the Act of Legislative Content "Very urgent measures for the implementation of the Medium-term Fiscal Strategy 2012-2015 and of the State Budget for 2011" and of the Act of Legislative Content "Regulation of very urgent issues for the implementation of law 4024/2011 "Pension provisions,"

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uniform pay scale - grading system, labour reserve and other provisions for the implementation of the Medium-term Fiscal Strategy Framework 2012-1015" and of issues falling within the competence of the Ministries of Administrative Reform and E-Governance, Interior, Finance, Environment, Energy and Climate Change, and of Education, Lifelong Learning and Religious Affairs and related to the implementation of the Medium-term Fiscal Strategy Framework 2012-2015" and other provisions", by article 323 of the Law 4072/2012 (Government Gazette No 86, Issue A): "Improvement of the business environment New corporate form - Trade Marks - Realtors -Regulating maritime, port and fishing matters and other provisions" and by article 7 paragraph 1 of the Act of Legislative Content dated 18/11/2012 (Government Gazette No 228, Issue A): "Financial rules and other provisions", by Article 93 of the Law 4182/2013 (Government Gazette No 185, Issue A): "Code of charitable estate, inheritances in abeyance and other provisions", by Article 6 paragraph 8 of the Law 4244/2014 (Government Gazette 60, Issue A): "Integration in Greek law of the Council Directive 2013/1/EU of 20 December 2012 amending Directive 93/109/EC as regards certain detailed arrangements for the exercise of the right to vote and stand as a candidate in elections to the European Parliament for citizens of the Union residing in a Member State of which they are not nationals and amendment of law 2196/1994 (A' 41) and other provisions", by Article first subparagraph C.3 of the Law 4254/2014 (Government Gazette No 85. Issue A): "Measures for the support and development of the Greek economy, in the context of the implementation of Law 4046/2012, and other provisions of law" and by Article 33, paragraphs 5a and 5b of the Law 4258/2014 (Government Gazette No 94, Issue A): "Demarcation process and arrangements of matters for streams - arrangements of Urban Planning legislation and other provisions".

- Regulation on the Operation and Administration of the Hellenic Statistical Authority (ELSTAT), 2012, (Government Gazette No 2390, Issue B, 28-8-2012) <u>Regulation on the Operation</u> and Administration of ELSTAT
- Regulation (EC) No 223/2009 of the European Parliament and of the Council, on the European statistics (Official Journal of the European Union L 87/164) <u>Regulation No 223/2009</u>
- Article 14 of the Law 3470/2006 (Government Gazette No 132, Issue A): "National Export Council, tax regulations and other provisions".
- Article 3, paragraph 1c, of the Law 3448/2006 (Government Gazette No 57, Issue A): "For the further use of information coming from the public sector and the settlement of matters falling within the responsibility of the Ministry of Interior, Public Administration and Decentralization".
- European Statistics Code of Practice, adopted by the Statistical Programme Committee on 24 February 2005 and promulgated in the Commission Recommendation of 25 May 2005 on the independence, integrity and accountability of the national and Community statistical Authorities, after its revision, which was adopted on 28 September 2011 by the European Statistical System Committee <u>COP</u>.
- Presidential Decree 226/2000 (Government Gazette No 195, Issue A): "Organization of the General Secretariat of the National Statistical Service of Greece".
- Articles 4, 12, 13, 14, 15 and 16 of the Law 2392/1996 (Government Gazette No 60, Issue A): "Access of the General Secretariat of the National Statistical Service of Greece to administrative sources and administrative files, Statistical Confidentiality Committee, settlement of matters concerning the conduct of censuses and statistical works, as well as of matters of the General Secretariat of the National Statistical Service of Greece"

The survey is conducted in accordance with Regulation 1338/2008 of the European Parliament and Council on public health and safety at work. In addition, detailed specification of the data and metadata are provided pursuant to the Implemented Commission Regulation **No 255/2018**.

6.2 Data sharing

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7. Confidentiality

7.1 Confidentiality policy

The issues concerning the observance of statistical confidentiality by the Hellenic Statistical Authority (ELSTAT) are governed by articles 7, 8 and 9 of the Law 3832/2010, as amended by article 90 paragraph 8 of Law 3842/2010 and by article 10 of Law 3899/2010, as well as by article 8 of Law 2392/1996, which was brought back into force, in accordance with article 90 paragraph 8 of Law 3842/2010. http://www.statistics.gr/en/legal-framework

Furthermore, ELSTAT disseminates the statistics in compliance with the statistical principles of the European Statistics Code of Practice and in particular with the principle of statistical confidentiality <u>COP</u>.

7.2 Confidentiality – data treatment

> ELSTAT protects and does not disseminate data it has obtained or it has access to, which enable the direct or indirect identification of the statistical units that have provided them by the disclosure of individual information directly received for statistical purposes or indirectly supplied from administrative or other sources. ELSTAT takes all appropriate preventive measures so as to render impossible the identification of individual statistical units by technical or other means that might reasonably be used by a third party. Statistical data that could potentially enable the identification of the statistical unit are disseminated by ELSTAT if and only if:

a) these data have been treated, as it is specifically set out in the Regulation on Statistical Obligations of the agencies of the Hellenic Statistical System (ELSS), in such a way that their dissemination does not prejudice statistical confidentiality or

b) the statistical unit has given its consent, without any reservations, for the disclosure of data.

> The confidential data that are transmitted by ELSS agencies to ELSTAT are used exclusively for statistical purposes and the only persons who have the right to have access to these data are the personnel engaged in this task and appointed by an act of the President of ELSTAT.

> ELSTAT may grant researchers conducting statistical analyses for scientific purposes access to data that enable the indirect identification of the statistical units concerned. The access is granted provided the following conditions are satisfied:

a) an appropriate request together with a detailed research proposal in conformity with current scientific standards have been submitted;

b) the research proposal indicates in sufficient detail the set of data to be accessed, the methods of analyzing them, and the time needed for the research;

c) a contract specifying the conditions for access, the obligations of the researchers, the measures for respecting the confidentiality of statistical data and the sanctions in case of breach of these obligations has been signed by the individual researcher, by his/her institution, or by the organization commissioning the research, as the case may be, and by ELSTAT.

> Issues referring to the observance of statistical confidentiality are examined by the Statistical Confidentiality Committee (SCC) operating in ELSTAT. The responsibilities of this Committee are to make recommendations to the President of ELSTAT on:

- the level of detail at which statistical data can be disseminated, so as the identification, either directly or indirectly, of the surveyed statistical unit is not possible;
- the anonymization criteria for the microdata provided to users Anonymization criteria;
- the granting to researchers access to confidential data for scientific purposes.

> The staff of ELSTAT, under any employment status, as well as the temporary survey workers who are employed for the collection of statistical data in statistical surveys conducted by ELSTAT, who acquire access by any means to confidential data, are bound by the principle of confidentiality and must use these data exclusively for the statistical purposes of ELSTAT. After the termination of their term of office, they are

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not allowed to use these data for any purpose.

> Violation of data confidentiality and/or statistical confidentiality by any civil servant or employee of ELSTAT constitutes the disciplinary offence of violation of duty and may be punished with the penalty of final dismissal.

ELSTAT, by its decision, may impose a penalty amounting from ten thousand (10,000) up to two hundred thousand (200,000) euros to anyone who violates the confidentiality of data and/or statistical confidentiality. The penalty is always imposed after the hearing of the defence of the person liable for the breach, depending on the gravity and the repercussions of the violation. Any relapse constitutes an aggravating factor for the assessment of the administrative sanction.

8. Release policy

8.1 Release calendar

Press Release date - 18 December 2020

8.2 Release calendar access

https://www.statistics.gr/en/calendar

8.3 User access

Users are informed on data release dates through ELSTAT's website. The equal access of users to data is governed by the European Statistics Code of Practice.

9. Frequency of dissemination

The frequency of the survey conduction was up today every 5 years. The forth wave is scheduled for the year 2025.

10. Accessibility and clarity

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10.1 News release

The Press Release with the survey results has been annownced in 18/12/2020 (<u>https://www.statistics.gr/en/statistics/-/publication/SHE22/2019</u>)

10.2 Publications

Publication "The Living Conditions in Greece" provides, both in greek and english languages, the latest statistics illustrating living conditions in Greece, among which data from the Health Survey.

The publication is updated with the latest data the first Friday of January, March, May, July, September and November.

Relative link: http://www.statistics.gr/en/living-conditions-in-greece

10.3 On-line database

Microdata are available to users upon request using the link: https://www.statistics.gr/en/scientific provision data

10.3.1 Data tables - consultations

Information is not available.

10.4 Micro-data access

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Access is granted to the anonymized Health Survey microdata via ELSTAT's website. Access are available since January 2021.

Users should register via ELSTAT's website in order to be able to use public use files <u>https://www.statistics.gr/en/public-use-files</u>

10.5 Other

http://dlib.statistics.gr/portal/page/portal/ESYE

10.5.1 Metadata – consultations

Information is not available.

10.6 Documentation on methodology

Information on the survey is posted on the website of ELSTAT https://www.statistics.gr/en/statistics/-/publication/SHE22/-

Users in the above link can find the questionnaire of the survey, the surveys' guidelines (only in Greek) and the SIMS metadata manuals in national language and in English.

10.6.1 Metadata completeness - rate

10.7 Quality documentation

Quality assessment is carried out by ELSTAT and Eurostat. The sample size ensures the production of high accuracy results. Consequently, the sample size is representative of the reference population of the survey and all the appropriate measures are taken in order to minimize any errors during the survey conduct. All the above mentioned actions contribute to the total high quality of the statistical product of the survey.

11. Quality management

11.1 Quality assurance

The quality of the survey is ensured by the existence of a methodological handbook issued by Eurostat, as well as by the use of a common questionnaire – template, in order to improve comparability of results in all member states, and in general by the implementation of the European Statistics Code of Practice.

11.2 Quality assessment

Quality assessment is carried out by ELSTAT and Eurostat.

The sample size is such as to ensure high accuracy results, representative for the reference population and all necessary steps are taken so as to make all appropriate checks and minimize measurement errors in data collection. Data are accompanied by quality reports analyzing the accuracy, consistency and comparability of data.

12. Relevance

12.1 User needs

Main users of the survey data is Eurostat, OECD, WHO, Universities (professors, graduate and post graduate students), researchers on the field of health.

12.2 User satisfaction

The Section of Statistical Information and Dissemination of ELSTAT conducts a survey on users' satisfaction http://www.statistics.gr/user-satisfaction-survey

12.3 Completeness

The completeness of data and breakdowns are considered to be very satisfactory according to user needs, while ESTAT's requirements are set out in Commission Regulation **1338/2008** of the European Parliament and Council on Public health and health and safety at work statistics, and in accordance with Implementing

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13. Accuracy and reliability

13.1 Overall accuracy

The concept of accuracy refers to the precision of estimates computed from a sample rather than from the entire population. Accuracy depends on sample size, sampling design effect and structure of the population under study. In addition to that, sampling errors and non sampling errors need to be taken into account.

The sample size has been defined from the Division of Methodology, Quality and Public Relations, according to the provisions set in the surveys' implementing regulation, allowing thus the production of high accuracy estimations for the country and also for the 4 great geographical areas of the country (NUTS1 level).

Sampling errors are being calculated from the competent division after the completion of the survey.

13.2 Sampling error

As a multistage stratified sampling design was applied, the variance estimation procedure pools stratum variance estimates to compute the overall variance estimate. In each stratum, the variance calculates the variability of all estimates coming from each separate primary sampling unit. For a multistage sample design, in which the first-stage sampling fraction is small and the first-stage sample is drawn with replacement and probabilities proportional to their sizes the variance estimation method depends only on the first-stage of the sample design. As a result, the required input for variance estimates includes only the first-stage cluster (PSU) and first-stage stratum identification. The design effect was estimated as the ratio of the variance of the actual sampling design (multistage stratified sampling design) to the variance from a hypothetical SRS without replacement of the same size.

Indicator/ sub-indicator (variable(s) from which the indicator is derived)	Number of respondents - n (unweighted)	Estimated proportion - p (weighted)	Standard error - SE (with respect of sampling plan)	95% confidence interval: lower upper border	Design effect <i>deff</i> (if applicable/ available)
Respondents aged 15+ in good or very good health (HS1)					
All	5,690	79.4%	0.6%	(78.3 – 80.5)	1.477
Women	2,876	77.1%	0.8 %	(75.6 – 78.6)	1.347
Men	2,814	81.9 %	0.7%	(80.4 – 83.3)	1.344
Respondents aged 15+ with longstanding illness or health problem (HS2)					
All	4,040	41.7%	0.7%	(40.3– 43.1)	1.638
Women	2,370	46.7%	1.0%	(44.8 – 48.6)	1.597
Men	1,670	36.3%	1.0%	(34.3 – 38.2)	1.587
Respondents aged 15+ that were severely limited in activities people usually do					

because of health problems for at least past 6 months (HS3)					
All	734	6.8%	0.3%	(6.2 – 7.4)	1.164
Women	432	7.5%	0.4%	(6.6 – 8.4)	1.244
Men	302	6.1%	0.4%	(5.3 – 6.9)	1.093
Respondents aged 15+ having been hospitalized in the past 12 months (HO1)					
All	791	8.4%	0.3%	(7.7 – 9.1)	1.263
Women	401	8.4 %	0.5%	(7.4 – 9.4)	1.452
Men	390	8.4%	0.5%	(7.5 – 9.4)	1.140
Respondents aged 18+ who are obese (BMI > = 30 , where BMI = BM2 in kg / (BM1 in m * BM1 in m)					
All	1,345	16.3%	0.5%	(15.2 – 17.3)	1.584
Women	718	16.1%	0.7%	(14.7 – 17.5)	1.568
Men	627	16.4%	0.7%	(15.0 – 17.9)	1.388
Comments related to the table					

13.3 Non-sampling error

The non-sampling errors are divided into the following categories:

- Coverage error
- Measurement error
- Non-response error
- Processing error

13.3.1 Coverage error

Coverage errors include over-coverage, under-coverage and missclassification

- Over-coverage relates either to to wrongly classified units that are in fact out of scope, or to units that do not exist in practice
- Under-coverage: refers to units not included in the sampling frame
- Misclassification: refers to incorrect classification of units that belong to the target population

Sampling frame and coverage errors

Health survey is based on a multiple-stage stratified sampling of households from a frame of sampling which has been created on the basis of the results of the 2011 population census and covers completely the

reference population.

The frame of PSUs is updated every ten (10) years through the general population census. Concerning the frame of households, within each selected PSU this is updated before the selection of the sampling households used for data collection. So, any coverage problem that may arise is more possible to relate with the frame of PSUs.

Coverage problems encountered were:

- Houses with changed use (used as secondary residence or office), so they were out of scope of the survey
- Houses impossible to be located due to incomplete information regarding their addresses

The above cases were totally 293 and such cases are corrected with the use of the calibration procedure applied.

		Number of dwellings	Number of households	Number of individuals
	Total released sample cases			
1	The number of sampling units initially selected from the sampling frame.		11662	
	$\blacktriangleright [1] = [2] + [3] + [6]$			
	Ineligible sample cases/ out-of-scope units			
2	The unit does not belong to the population of interest for the survey although it is included in the sampling frame.		293	
 	Non-existent units			
2.1	The unit does not exist although it was included in the sampling frame due to errors (house/ building not existing, no one living in the building/ on the address).		194	
1	Changes in status			
2.2	The unit has changed its status and becoming out of scope for the survey (e.g. change of residence for a household, selected individual died between the reference date of the sampling frame and the moment of the interview, etc.).		99	
	Out of target units			
2.3	The unit has never been in-scope although it was included in the frame due to an inclusion error.		0	
2.4	Other ineligibility encountered.		0	
	Eligible sample cases/ in-scope units			
3	The unit belongs to the population of interest for the survey (both non-response and response cases).		10855	
	► [3] = [4] + [5]			

4	Non-response cases/ non-participation	2730	
	Units for which no information could be obtained.		
	Non-contact		
4.1	A unit which has been impossible to contact (e.g. nobody was at home or wrong address).	1295	
	Refusal		
4.2	E.g. the selected household or individual was contacted but refused to take part in the survey.	1292	
	Inability to respond		
4.3	E.g. the selected household or individual was unable to participate due to language barriers or cognitive or physical incapacity to respond (and no proxy interview was conducted).	143	
	Rejected interviews		
4.4	E.g. the selected household or individual did take part but the survey form cannot be used (poor quality - e.g. strong inconsistencies; unacceptable item-response – e.g. individual left most of the questions unanswered; survey form got lost and interview cannot be repeated).	0	
	Other non-response		
4.5	Other types of non-response encountered.	0	
	Response cases/ participation		
5	Units for which the requested information could be obtained.	8125	
	Fully completed interview		
	All relevant questions were answered by the respondent or by a proxy interview.		
5.1	Variables for which derogations were granted and variables that have not been completed in a proxy interview should not be taken into account when evaluating the completeness of the interview.	8125	
	Partly completed interview		
5.2	Not all but at least some relevant technical variables (PID, HHID, PRIMSTRAT, PSU, WGT, PROXY, REFYEAR, REFMONTH, INTMETHOD), sex and age and at least 50% of all other variables to be answered.	0	
	Unknown eligibility		
6	Selected units with unresolved eligibility.	514*	
		 * 508 sampling areas not interviewed due to lack of interviewers and 	
	Comments related to the table	6 sampling areas not interviewed due to floods.	

13.3.1.1 Over-coverage - rate

Not applicable

13.3.1.2 Common units – proportion

Not applicable

13.3.2 Measurement error

They occur at the time of data collection from the questionnaire.

In order to reduce these errors the following actions were done:

- For building up the questionnaire we adopted the questionnaire proposed from Eurostat as the basis. The structure of the questionnaires is similar. The majority of the questions are almost literally copied and translated.
- Detailed guidelines handbook is provided to all interviewers. Also, a second manual on the use of the web application is provided.
- Training to interviewers takes place in Athens and in all regional offices.
- Checks (validation/ logical/ completeness/ flow, etc.) are carried out both by ELSTAT and EUROSTAT (validation programs). Supervisors are in close communication with interviewers for attending work progress or to discuss and solve occurring problems.
- Participation in the survey of skilled and experienced, with other household surveys, personnel and interviewers.

See following Table of measurement errors from proxy interviews, survey questionnaire, interviewer, and guality control during fieldwork.

Proxy interviews					
Note: An interview is considered as a <i>proxy interview</i> even if proxy respondents were allowed to answer only a selected number of questions.					
Use of proxy interviews, and if 'Yes' indication of reason (several		No proxy interviews used			
answers accepted / possible):	Ø	Respondent suffering from long- term cognitive impairment			
	Ø	Suffering from long- term debilitation			
	Ø	Suffering from long-term sensory impairment that prevents interaction between interviewer and interviewee			
	Ø	In hospital, in health or social care facility for entire period of fieldwork			
		Away from own household for educational or work purposes for entire period of fieldwork in the area of residence			
		Other			
Indication of the proxy interview rate, i.e. percentage of proxy interviews of total of interviews (no proxy interviews = 0.0%)		77 proxy interviews have been done 3.4% or total of interviews (8125)			
Survey questionnaire					
Steps made in the design of the questionnaire		nodel questionnaire has been designed			
		face-to-face interview mode. Initially, ranslation of the questions has been			

	done by experienced staff and then every question has been checked, both for clarity and completeness. Afterwards, health experts of a working group established in ELSTAT, in close cooperation with the staff having designed the questionnaire, finalized the questionnaire. During that phase, extra questions were added, in order to cover national needs. In general, with the only exclusion of income questions, the recommended order of modules, sub-modules and questions given by the model questionnaire, have been followed. For the economy of space in the questionnaire, only short explanations on some questions are provided, specifically, the absolutely necessary. Only in the out- patient health care services section a quite extensive preface has been included in order to assure that all cases of out-patient care services will be recorded. Detailed interviewers' guidelines (Annexed) have been prepared and provided to the interviewers.
Indication if the translation protocol proposed by Eurostat	 ✓ Yes □ No The language used is Greek. In some Regional Units as Rodopi and Xanthi the survey was carried out by using translators due to the use of other dialects such as Pomakika or other languages e.g. Turkish.
If there were modifications, description of the changes (splitting into more questions, etc.) and the reason(s) for the modifications	 Existing modifications in comparison with the model questionnaire concern: different wording with no change, though, in the concept / splitting into more questions : PL1, PL1A, PL8_1 /PL8_2, DH3 (DH3_1/DH3_2), DH4 (DH4_1/DH4_2), SK1, SK3, SK5 (SK5_1/SK5_2/SK5_3), IC1. added answer categories : AC2, PC2, HA2, MD1, MD2, UN1_4, UN2_5. totally new questions : CD2A, CD1_11a/CD1_11b, CD1_17, CD1_18, CD1_19, CD1_20, CD1_21, CD1_22, CD1_24, AC3, AW3, PL7A, MH1_9, PA9, DH7, DH8, DH9, SK4, SK4A, SK4B, SK5A, SK5B, SK5C, AL7, IC4, IC5. extended the question to be answered

If there were modifications, description of the reason(s) for the modifications	 persons aged 55 and over (PC and HA questions have been answered by total population The modification of the questions did not affect the requested by Eurostat variables. Before the data collection, a working group consisting of ELSTAT employees and health experts from competent ministries / universities / organisations etc. was established. In the WG's meetings exchange of views / clarifications for questions and the addition of extra questions for national needs were discussed. Hence, all modifications done are the result of the thorough reading of the proposed by ESTAT questionnaire after adapting it to Greek health system and in order to cover national needs.
Provision of modified questions in English (add a separate list if needed)	All modified questions are included in the English version of the questionnaire <u>https://www.statistics.gr/en/statistics/-</u> /publication/SHE22/-
Indication of the content of alcohol of the "national standard" drink (in grams) used in the sub-module on Alcohol consumption (AL)	 The alcohol consumption "in drinks" (questions AL4, AL5, AL6) has been recorded in glasses, in which usually every drink (e.g. glass of beer/wine/whiskey etc) is served. Specifically: 1 glass of beer 250 ml, 1 glass of vine 125 ml, 1 glass of liquer 40-45 ml, 1 glass of whiskey, gin, vodka, brandy, rum, etc. 40-45 ml, 1 glass of raki, tsipouro, ouzo, etc. 40-45 ml. Also, showcards (Annexed) have been used in order to ease the respondents.
	The concept of a "national standard" drink does not exist. To estimate the pure alcohol content of a drink, one must multiply the (standard) size of the container of a specific beverage (e.g., beer: 250 ml) x the proportion of volume of pure alcohol (e.g., 5% = 0.05 ml) and by the conversion factor (0.79, i.e., the density of ethanol, that is 0.79 g/cm3) to obtain grams of pure ethanol.
Modules and/or questions which caused problems during the preparation of the questionnaire and/or later during the interviews (not being detected during tests)	No problematic questions existed. The only difficulty met concerned the construction of smoking (SK) variables, and is attributed to the fact that -for national needs- we split into separate tobacco products (cigarettes / tobacco for pipes/ cigars or cigarillos/ new tobacco products like electronic tobacco heaters-icos/ chewing tobacco or tobacco

	received from the nose or hookah, etc. question SK1, etc.
Description of the corresponding problems and solutions	It was strongly requested by the competent bodies of the Ministry of Health to collect data on the use of separate tobacco products (see annexed questionnaire). This made the construction of SK variables somehow difficult, but not impossible. The same holds for the split in SK5 on exposure to tobacco indoors, to SK5_1 exposure to tobacco at workplace and SK5_2 exposure to tobacco at home and SK5_3 exposure to tobacco in other public places like café/bars/ restaurants/ public services/public places/ car/public transportation means.
Link to the national questionnaire(s; for all languages)	Links <u>https://www.statistics.gr/el/statistics/-</u> /publication/SHE22/2019
Interviewer	
Interviewers	 No interviewer used in survey Staff experienced with other health/social household surveys External collaborators experienced with other health/social household surveys Other
Ratio interviews / interviewers	The number of questionnaires assigned varies from 8 up to 140 questionnaires per interviewer and depends on the available sample in its region / area and on a maximum number of questionnaires set by ELSTAT, each interviewer can undertake, per month.
Description of the interviewer training method and support (e.g. skills testing before starting the fieldwork, duration of training, training materials provided)	The training lasted for 1 day (approximately 8 hours) and was carried out by the surveys' project managers in the Prefecture of Attiki, and the staff in charge of the Health Survey in the Regional Offices. The training focused both on the survey's concepts and techniques for the data collection, as well as on the use of the web application for the data entry of the collected data. Emphasis was given on how to handle non-response (refusals). The interviewers were selected through ELSTAT's register of external collaborators and were experienced with other social household surveys. The external collaborators / interviewers are applied through the surveys.
	selected though transparent, standardized procedures and according to meritocratic criteria.

	☑ Letter
	□ Telephone, incl. mobile
	Personal contact at doorstep during the first contact with the respondents
	□ Internet / email
	□ Other
Use of any incentives. If 'Yes', description	No incentives have been used.
Theoretical minimal number of contacts with a respondent before declaring a non-participation (i.e. the number of attempts that an interviewer is asked to do for interviewing a respondent)	The instruction to the interviewers has been for at least 3 attempts before declaring a non-participation.
Techniques used to control interviewer performance	Interviewers' performance control was done via continuous contacts with the interviewers. This way, we were aware of the progress of the work as well as any problems encountered.
Ratio of interviewers to field supervisors	In the central office (Prefecture of Attiki) the monitoring of interviewers' work was allocated to two supervisors. In Attiki 51 interviewers worked, the ration being, thus, 1:25. In the regional offices one supervisor monitored the work of all interviewers of the region. In the rest 50 regions, totally 160 interviewers worked (approximate ratio 1:4).
Respondents contacted for quality control (only one answer accepted / possible)	☑ Yes □ No
If 'Yes' is marked, description of the method (mode of contact, % of respondents contacted, what was checked)	Several contacts have been made with respondents, by phone, after the fieldwork during the phase of data processing for the provision of clarification, when needed.

13.3.3 Processing error

The PAPI method was used for interviews.

Data entry controls

Several plausibility checks have been made, using the validation rules of ESTAT, as well as using additional checks prepared by ELSTAT.

In general, data entry programs and post-data entry programs checks concern the following:

- Coverage
- Checks on the number of questionnaires expected to be collected
- Monitoring of flows, valid values and out of range values
- Intra-year inconsistencies check
- Intra-questionnaire inconsistencies check

Codification

The codification regarding occupation (ISCO), economic activity of the local unit (NACE), as well as nationality, is undertaken by experienced personnel, following the international classifications (ISCO-08,

NACE rev.2).

13.3.4 Model assumption error

Not applicable

Non response error

The effect of the non-response on the produced statistics is that it increases variability and introduces bias. Bias is introduced by the fact that the non-respondents may have different survey characteristics (and consequently different values) than the respondents. However, the bias has been reduced by applying reweighting to adjust for household non-response

Re-weighting was applied to amend suitably the extrapolation factors, by taking into account the response rates in classes by unifying response households of the same urbanization. In this way there is compensation for non-responses, and reduction of bias in the estimation of the survey characteristics. The aim is to reduce nonresponse bias.

<u>Unit non – response</u>

The response rate is 74,9 % and non-response rate 25,1%

Actions for minimizing units' non-response are:

An advance notification letter sent to all households, one month before the survey conduct, among others, providing information on how the data collected are used. o In cases where the households cannot be accessed, mainly due to temporary absence, a number of attempts for phone calls (at least three) are made, on different days or hours of day.

Methods used for reducing unit non-response: An informative letter is sent, almost one month before the survey conduct, in order to inform the households/individuals that they have been selected for the survey, furthermore asking for their cooperation. In cases where the respondents couldn't be accessed, mainly due to temporary absence, a number of attempts for phone calls (at least three) are made, on different days or hours of day.

Unit non-response	
A) Non-response rate (total and for each mode of data collection; where substitutions are made in cases of unit non-response, non-response rates should be calculated before and after substitutions; including initial selected units and all substitutes for the calculation of 'Non-response rate after substitution').	Non-Response rate: 25.1% Effective cases:8,125 11,662 (initial sample)-293 (ineligible)-514 (unknown eligibility) =10,855
B) Substitutions	□ Yes ⊠ No
Item non-response	Answers
Item non-response rates (average – minimum – maximum) across the health variables.	Item non-response = 0%

14. Timeliness and punctuality

14.1 Timeliness

The time lag between data reference period and data publication is approximately twelve months.

The length of time between the data collection (end date) and the delivery of *first* results (microdata) to Eurostat is 9 months.

14.2 Punctuality

Dates when each of the phases of the projects started/ended

The survey data have been delivered within the predetermined date.Data have been delivered on 28/9/2020 while the deadine was 31/9/2020.

Beginning of year 2019- September 2019
October – December 2019
First delivery of microdata 17/09/2020
Press Release of the survey results (18/12/2020)

15. Coherence and Comparability

15.1 Comparability - geographical

Comparability of data between Member States is assured by keeping the comparability of methods used and of definitions of variables. This target is much aided by the use of EU proposed questionnaire and of the conceptual guidelines and instructions (methodological manual).

15.1.1 Assymetry for mirror flows statistics - coefficient

Not applicable

15.2 Comparability over time

The Health Survey of the year 2019 is being conducted for the third time in the country, after 2009 and 2014. As far as the data of the previous years are concerned they are comparable as common concepts are used, therefore, in general, no problem on comparability over time exists.

15.3 Coherence cross-domain

General health status indicators are compared with the same indicators calculated from the EU-SILC 2019. The results / differences are presented below. Differences between the concepts / definitions used in the two surveys do not exist hence discrepancies may be attributed to the fact that the two surveys serve different purposes; Health Survey targets health whereas EU-SILC targets household income.

GENERAL HEALTH STATUS	HEALTH SURVEY 2019	EU-SILC 2019
Very good	45.5	46.7
Good	33.9	32.7
Fair	15.0	14.1
Bad	4.4	5.0
Very bad	1.2	1.6

CHRONIC HEALTH PROBLEM			
	HEALTH SURVEY 2019	EU-SILC 2019	
With chronic disease	41.7	23.7	

Without chronic disease	58.3	76.3
EXISTENCE OF LIMITATION		
	HEALTH SURVEY 2019	EU-SILC 2019
Severely limited	6.8	9.5
Limited but not severely	6.4	13.6
Not limited at all	86.7	76.9
<u>15.3.1 Coherence – sub</u> - 15.3.2 Coherence – Nati -		
-	ional Acco	

16. Cost and burden

The health survey has been designed to keep respondent burden under control in order to avoid high nonresponse rate and to ensure good quality of the collected information. However the need for data not collected by any other survey in the country do have increase burden. The burden mostly concerns the time required to get the information from the surveyed households/ individuals. Nevertheless, it seems not possible to lighten this burden.

External collaborators

Type of work	Total cost
Sampling frames' updating	28,239.89
Data collection	145,420.62
Interpreters for data collection	344.00
TOTAL	174,004.51
TOTAL STAFF	23,363.25
GENERAL TOTAL	197,367.76

17. Data revision	<u>Top</u>
17.1 Revision policy	

The revision policy may relate to the survey data and the survey itself, i.e. the questionnaire, the sample, etc., and takes into account users' needs for additional statistical information.

http://www.statistics.gr/en/policies

17.2 Revision practice

Data transmitted to Eurostat undergo detailed verifications by implementing automated validation procedures at the level of variables and breakdowns. Besides cross-sectional checks, longitudinal checks are conducted and whenever necessary (if data inconsistencies are found) reporting countries are asked to verify and revise their results.

18. Statistical processing

18.1 Source data

The multi-stage stratified sampling method was adopted for the survey. Primary sampling unit (PSUs) is the

area (one or more unified city blocks), secondary unit is the household and ultimate the individual aged 15+

(target population).

For the selection of the PSUs, in each Region (NUTS 2 level), the sampling units are distributed in 4 strata, accrding to the urbanization degree of Municipal / Local communities they belong to. Individuals of Greater Athens and of former department of Thessaloniki are further divided into 47 and 11, respectively, homogeneous clusters according to socio-economic characteristics. From the stratification of PSUs we have 108 homogeneous strata.

In each homogeneous stratum (ultimate stratum) the sampling areas are selected with probability proportionate to their size (number of households according to Cencus 2011). The total number of sampling areas are1320.

From the sampling areas, a sample of households is selected with equal probabilities from the updated lists, by applying random systematic sampling method. In each household 1 person aged 15 years and over is selected for survey, with equal probabilities.

The survey has been conducted in a sample of 8,125 households and equal in number individuals aged 15+.

More information will be included in the Quality Report of the survey.

18.2 Frequency of data collection

5 years

18.3 Data collection

The Health Survey is a sampling survey and is conducted with face to face interviews by visiting the households. The interviewers are either permanent staff of ELSTAT or external collaborators / interviewers from the Statistical Interviewers' Register of ELSTAT. Whenever the household members were temporarily absent the interviewers left a notification letter with the date of their next visit. The interviewer ought to make at least three visits to that household. After the survey conduct the interviewers had the obligation to check the data for any further errors or omissions and finally to make the data entry in electronic questionnaires using the web application designed by ELSTAT.

18.4 Data validation

Data validation is carried out by qualitative and quantitative tests based on:

- Longitudinal checks on raw data (with data of previous years)
- Comparisons of key variables with variables / data of other statistical sources
- Calculation of sampling errors, also used as a criterion for the final validation of data.

18.5 Data compilation	
Tables will be produced for weighted data. Information on grossing up procedure will be included in the Quality Report.	
18.5.1 Imputation – rate	
18.6 Adjustment	
18.6.1 Seasonal adjustment	
19. Comment	<u>Top</u>
-	