



Eurostat metadata
Reference metadata
1. Contact
2. Statistical presentation
3. Statistical processing
4. Quality management
5. Relevance
6. Accuracy and reliability
7. Timeliness and punctuality
8. Coherence and comparability
9. Accessibility and clarity
10. Cost and Burden (paragraph removed by ESTAT)
11. Confidentiality
12. Comment
Related Metadata
Annexes (including footnotes)

For any question on data and metadata, please contact: [EUROPEAN STATISTICAL DATA SUPPORT](#)

1. Contact		Top
1.1. Contact organisation	Statistics Netherlands	
1.2. Contact organisation unit	Division of Socio-Economic and Spatial Statistics (SER), Department Labour, Income and Quality of Life Statistics (SAL)	
1.5. Contact mail address	PO Box 4481 6401 CZ Heerlen The Netherlands	

2. Statistical presentation		Top
2.1. Data description		
The EHIS Regulation addresses the quality related reference metadata in 2 articles: Article 5: Reference metadata		
1. The quality-related reference metadata shall be provided according to the European Statistical System standard specified by the Commission (Eurostat) and agreed with the Member States.		
2. Member States shall provide these metadata to the Commission (Eurostat) not later than two		

months after transmission of the microdata.

Article 6: Provision of microdata and reference metadata to the Commission (Eurostat)

3. Member States shall provide finalised, validated and weighted microdata and quality-related reference metadata required by this Regulation in accordance with an exchange standard specified by the Commission (Eurostat). Microdata and quality-related reference metadata shall be provided using the Single Entry Point services.

This document aims at defining in more detail the content of those quality-related reference metadata and to present a template and associated process for their delivery.

Standards in the European Statistical System (ESS)

Eurostat developed a quality reporting structure and guidelines to foster harmonised implementation across the ESS.

The ESS Standard for Quality Reports Structure (ESQRS) which is mainly directed towards producer of statistics and as such contains more detailed information about the different aspects of data quality. This standard also includes quantitative quality and performance indicators which have undergone a testing in a variety of domains in Eurostat and by Member States.

In particular, the guidelines for the ESQRS are based on the 2014 ESS Standard and Handbook for Quality Reports and on the recent work by the Expert Group on Quality Indicators. The guidelines for the ESQRS provide guidance on how to compile comprehensive quality reports.

ESQRS is SDMX compliant and allows for vice-versa reusability of information. SDMX (Statistical Data and Metadata eXchange) consists of technical and statistical standards and guidelines, together with an IT service infrastructure and IT tools, for the efficient exchange and sharing of statistical data and metadata)

More information on the quality of European statistics and related legislation, tools and standards on quality reporting can be found at: <http://ec.europa.eu/eurostat/web/quality/quality-reporting>

The quality report is implemented by Eurostat in an IT service ESS Metadata Handler (ESS MH).

ESS MH is a web-based IT application for metadata production and exchange within the ESS.

Structure of the EHIS wave 2 quality report

EHIS wave 2 quality report is a customised ESQRS template and contains 13 parts.

It is to be complemented with the following annexes:

- Annex 1: Questionnaire in national language(s)
- Annex 2: Questionnaire in English
- Annex 3: National adaptations of the model questionnaire
- Annex 4: Interviewer manual/instructions (in English if available)
- Annex 5: National report on methodology / quality (if available)
- Annex 6: National publication or analysis of key results (if available)

Note on annex name format: CC_AnnexX_N.YYY, where CC is country code, X is a number between 1 to 6 indicating the content of the annex (see above), N is a serial number used only in case more documents for one annex are attached and YYY is extension (e.g. DOC, PDF or XLS).

2.2. Classification system

Not available.

New concept added with the migration to SIMS 2.0.

Information (content) will be available after the next collection.

2.3. Coverage - sector

Not available.

New concept added with the migration to SIMS 2.0.

Information (content) will be available after the next collection.

2.4. Statistical concepts and definitions

Not available.

New concept added with the migration to SIMS 2.0.

Information (content) will be available after the next collection.

2.5. Statistical unit
<i>Not available. New concept added with the migration to SIMS 2.0. Information (content) will be available after the next collection.</i>
2.6. Statistical population
<i>Not available. New concept added with the migration to SIMS 2.0. Information (content) will be available after the next collection.</i>
2.7. Reference area
<i>Not available. New concept added with the migration to SIMS 2.0. Information (content) will be available after the next collection.</i>
2.8. Coverage - Time
<i>Not available. New concept added with the migration to SIMS 2.0. Information (content) will be available after the next collection.</i>
2.9. Base period
<i>Not available. New concept added with the migration to SIMS 2.0. Information (content) will be available after the next collection.</i>

3. Statistical processing			Top
3.1. Source data			
	Select from here	Answers	
A) Survey name in the national language		Gezondheidsenquête	
B) Survey name in English		Health Interview Survey	
C) Survey website		www.cbs.nl/nl-NL/menu/themas/gezondheid-welzijn/nieuws/default.htm	
D1) Did the EHIS form part of / was combined with another survey/questionnaire? (This does not include cases when EHIS is implemented as a follow-up of another survey, i.e. when it only uses the respondents but without collecting data of that survey. If EHIS is implemented as a follow-up of another survey it can be reported under other comments.)	YES NO	Yes	
D2) If YES: The type of the survey(s) that hosted the EHIS questionnaire (multiple answers are possible)	-Health Interview Survey	Health Interview Survey	

	-Health Examination Survey -Disability survey -Living conditions survey -Multipurpose survey -Other, please specify:	
E) Other comments (for example a note in case EHIS is not a part of another survey but is a follow-up of another survey)		n/a
Sampling frame	Select from here	Answers
A1) Sampling frame name:		Basic Municipal Registry (in Dutch: Basisregistratie Personen, BRP)
A2) Data source used for building the sampling frame:	-Population register -Household register -Dwelling register -Population census -List of phone numbers -Postcode address file -Another survey sample (if Yes, indicate which one) -Other, please specify	Population register
A3) Short description of the data source used for building the sampling frame and information included in the data source used for sampling		The sampling frame of addresses is constructed from the BRP.
B) Frequency of the update procedures of data source used for building the sampling frame	Continuously / Yearly / Quarterly / Monthly / Every __ years / Irregular / None	Continuously
C) Date(s) (or at least the year) of the data source used for the selection of the sampling units for the survey		Monthly from December 2013 to November 2014, The sample for each t is drawn at t-1,
Survey population	Answers	

<p>A) Territorial coverage (if applicable): Indicate the parts of the country that were not included</p>	<p>99.85% The Carribean Islands (Bonaire, St. Eustatius, and Saba) are excluded in conformance with the Regulation.</p>	
<p>B) Give an estimate (in %) of the resulting percentage of under-coverage (a proportion of units not accessible via the sampling frame that belong to the target population) (The numerator includes units not accessible via the sampling frame that belong to the target population and the denominator all target population.)</p>	<p>0.21% Based on an estimation the number of homeless people in 2013 (18 years or older) and illegal immigrants in 2011 (all ages)</p>	
<p>C) Give an estimate (in %) of the resulting percentage of over-coverage (a proportion of units accessible via the sampling frame that do not belong to the target population) (The numerator includes out-of-scope units and units of unknown eligibility in the frame population and the denominator all frame population. Duplicates are included in over-coverage. Design-weighted over-coverage rate is preferred to un-weighted rate (the Member State should indicate which indicator was calculated).</p>	<p>max 0.3%</p>	
<p>D) Population groups that may be excluded even though they belong to sampling frame (e.g. people with hearing problems in case of CATI)</p>	<p>People who do not sufficiently understand the language, people in institutions, homeless people.</p>	
<p>E) Non-target population Give the approximate number of individuals outside the scope of the survey, i.e. the difference between the total country population and the target population, out of which:</p>	<p>People in institutions: 249.942.</p>	
<p>(E1) population (number of individuals) younger than 15 years (and of whom living in institutions; please define "institutions")</p>	<p>2.850.074 (7.287) Household consisting of two or more people living in one accommodation whose housing and daily needs are provided professionally.</p>	
<p>(E2) population (number of individuals) living in institutions (please define "institutions").</p>	<p>249.942</p>	
<p>E3) If those numbers are not directly available, please provide an estimate. If no estimate is available, please indicate why.</p>	<p>n/a</p>	
<p>Sampling design</p>	<p>Select from here</p>	<p>Answers</p>
<p>A) Sampling unit(s) (list more options if applicable)</p>	<p>-Dwellings -Households -Individuals</p>	<p>Individuals</p>

B) For dwelling samples Number of households belonging to a selected dwelling interviewed	1 If more than one, how many: All	n/a
C) For household samples Number of individuals belonging to a selected household interviewed	1 If more than one, how many: All	n/a
D) Sampling design	Combination of designs (if so please list the designs used) Simple Random Sampling (SRS) Systematic Sampling Stratified Sampling (if so, please indicate stratification variables, the categories of those variables and the final number of strata). Cluster Sampling Multiple Stage Sampling (if so, please specify the different stages)	Multiple Stage Sampling: Stage 1: Stratified Sampling Stage 2: Simple Random Sampling. The stratification variable of stage one was COROP-area. One area contains multiple neighbouring municipalities. The variable has 40 categories: 1 'Oost-Groningen' 2 'Delfzijl en omgeving' 3 'Overig Groningen' 4 'Noord-Friesland' 5 'Zuidwest-Friesland' 6 'Zuidoost-Friesland' 7 'Noord-Drenthe' 8 'Zuidoost-Drenthe' 9 'Zuidwest-Drenthe' 10 'Noord-Overijssel' 11 'Zuidwest-Overijssel' 12 'Twente' 13 'Veluwe' 14 'Achterhoek' 15 'Arnhem/Nijmegen' 16 'Zuidwest-Gelderland' 17 'Utrecht' 18 'Kop van Noord-Holland' 19 'Alkmaar en omgeving' 20 'IJmond' 21 'Agglomeratie Haarlem' 22 'Zaanstreek' 23 'Groot-Amsterdam' 24 'Het Gooi en Vechtstreek' 25 'Agglomeratie Leiden en Bollenstreek' 26 'Agglomeratie s-Gravenhage' 27 'Delft en Westland' 28 'Oost-Zuid-Holland' 29 'Groot-Rijnmond' 30 'Zuidoost-Zuid-Holland'

		31 'Zeeuwsch-Vlaanderen' 32 'Overig Zeeland' 33 'West-Noord-Brabant' 34 'Midden-Noord-Brabant' 35 'Noordoost-Noord-Brabant' 36 'Zuidoost-Noord-Brabant' 37 'Noord-Limburg' 38 'Midden-Limburg' 39 'Zuid-Limburg' 40 'Flevoland'
E) Probability used to draw the sample	General comments	The sample design results in equal probabilities to be included in the sample for each element in the population frame.
E1) Stage 1: (PSU were ...)	equal probability unequal probabilities probabilities proportional to size	Probabilities proportional to size
E2) Stage 2: (SSU were ...)	equal probability unequal probabilities probabilities proportional to size	Equal probabilities
E3) Stage 3: (TSU were ...)	equal probability unequal probabilities probabilities proportional to size	n/a
E4) Other stages...	(In case of more complicated sample design, describe it verbally)	n/a
F) Specific populations oversampled	No Yes, please specify which ones:	No
G) Were stratified oversampling methods used?	No Yes, please specify the reason, what population groups, the method used:	No
H) Short description of the methods used for drawing up the sample		The survey uses a stratified two-stage sampling design, with municipalities as primary sampling units and individuals as secondary sampling units. The sampling of first stage elements is with probability proportional to size (number of residents per municipality). The required number of individuals to

		<p>be drawn was equal for each element.</p> <p>The second stage elements are selected with simple random sampling.</p> <p>This approach results in a self-weighting sample in that each person in the sampling frame had equal probability to be sampled.</p>
I) The method used for determining the sample size (what was taken into account and from where: assumptions on non-response and design effect)		The sample size is calculated such that the lower boundary of the confidence interval amounts to 7515 respondents of 15 years or older, using an expected response probability of 62,3%
J) Additional measures taken at the time of drawing the sample to improve representativeness (e.g. choosing the right stratification variables - those that are highly correlated with the variable of interest, etc.)		No additional measures were taken.

	Summary table on participation and non-participation	Number of households	Number of individuals
1	<p>Total released sample cases</p> <p>The number of sampling units initially selected from the sampling frame.</p> <p>► [1] = [2] + [3] + [6]</p>		14326
2	<p>Ineligible sample cases / out-of-scope units</p> <p>The unit does not belong to the population of interest for the survey although it is included in the sampling frame.</p>		1599
2.1	<p>Non-existent units</p> <p>The unit does not exist although it was included in the frame due to errors (house/building not existing, no one living in the building/on the address).</p>		75
2.2	<p>Changes in status</p> <p>The unit has changed its status becoming out of scope for the survey (e.g. change of residence for a household, selected individual died between the reference data of the sampling frame and the moment of the interview, etc.).</p>		153

2.3	Out of target units The unit has never been in-scope although it was included in the frame due to an inclusion error.		Does not occur
2.4	Other ineligible Other types of ineligibility encountered. It should be specified what are the reasons for this kind of ineligibility:		1102 (drawn a second time for a survey in 2014, indicated that their information may not be shared with third parties, excess sample to be removed to reach intended sample size)
3	Eligible sample cases / in-scope units The unit belongs to the population of interest for the survey (both non-response and response cases). ▶ [3] = [4] + [5]		12727
4	Non-response cases / Non-participation Units for which it has not been able to obtain information.		5074
4.1	Non-contact A unit which has not been possible to contact (e.g. no one was at home or wrong address).		518
4.2	Refusal e.g. selected household or individual was contacted but refused to take part in the survey.		2604
4.3	Inability to respond e.g. 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).		1097
4.4	Rejected interviews e.g. the selected household/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; etc.).		53
4.5	Other non-response Other types of non-response encountered. It should be specified what are the reasons for this kind of non-response:		802 Sampling frame errors Non-response categorised as 'other'.
5	Response cases / Participation Units for which it has been possible to obtain information.		7653

5.1	A fully completed interview All relevant questions answered by the respondent or by a proxy interview. (a) Variables not recommended to be completed by proxy respondents if the interview was conducted with a proxy respondent and (b) variables for which derogations were granted, are not taken into account when evaluating completeness.		7653
5.2	A partly completed interview Not all relevant but at least some 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 and answered by the respondent or by a proxy interview.		0
6	Unknown eligibility Selected units with unresolved eligibility.		0
	Comments related to the table		None

Structure of target, sample, response and non-response population	Target population ¹		Sample ²		Response		Non-response	
	Number	%	Number	%	Number	%	Number	%
All	13979215	100	14326	100	7653	100	5074	100
Women	7103485	50.8	7252	49.1	3938	51.5	2509	49.4
Men	6875730	49.2	7028	50.7	3715	48.5	2565	50.6
Age (women)								
15-24	1011127	14.2	1080	14.9	541	13.7	372	14.5
25-34	1016345	14.3	1030	14.2	517	13.1	450	17.5
35-44	1123118	15.8	1098	15.1	582	14.8	461	18
45-54	1261482	17.8	1257	17.3	695	17.6	517	20.2
55-64	1087269	15.3	1131	15.6	675	17.1	370	14.4
65-74	854195	12	933	12.9	554	14.1	227	8.8
75-84	518205	7.3	534	7.4	289	7.3	137	5.3
85+	231744	3.3	194	2.7	85	2.2	31	1.2
Age (men)								
15-24	1047148	15.2	1060	15.1	537	14.5	374	15.9

25-34	1027310	14.9	1027	14.6	463	12.5	382	16.9
35-44	1120885	16.3	1164	16.6	569	15.3	385	18.8
45-54	1277263	18.6	1314	18.7	652	17.6	406	20
55-64	1088244	15.8	1109	15.8	636	17.1	340	14.3
65-74	820512	11.9	857	12.2	564	15.2	315	8.4
75-84	392070	5.7	404	5.7	236	6.4	208	4.8
85+	102298	1.5	93	1.3	58	1.6	99	0.9
Educational attainment level (ISCED 2011)								
ISCED 0-2	4425987	32.3	4699	32.8	2522	33	1662	31.8
ISCED 3-4	5398995	39.3	5745	40.1	2982	39	2133	40.8
ISCED 5-8	3652802	26.6	3882	27.1	2023	26.4	1434	27.4
Labour status								
Employed	7063242	51.5	7378	51.5	3809	49.8	2760	54.1
Unemployed	403031	2.9	415	2.9	194	2.5	176	3.4
Retired	2039347	14.9	2135	14.9	1311	17.1	589	11.5
Students	1951514	14.2	2034	14.2	1063	13.9	748	14.6
Other inactive	2259979	16.5	2364	16.5	1272	16.6	833	16.3
Degree of urbanisation ³								
Densely-populated area	6173679	45	6516	45.5	3165	41.4	2610	51.2
Intermediate-populated area	5520048	40.2	5766	40.2	3279	42.8	1870	36.7
Thinly-populated area	2029909	14.8	2044	14.3	1209	15.8	622	12.2
Household size (number of persons living in household)								
1	2816238	20.5	2758	19.3	1394	18.2	1157	23.2
2	4849874	35.3	4979	34.8	2935	38.4	1620	32.4
3	2221669	16.2	2321	16.2	1228	16	828	16.6
4	2544459	18.5	2745	19.2	1409	18.4	919	18.4
5+	1291396	9.4	1394	9.7	687	9	473	9.5
Comments related to the	Data for the Dutch Health Interview Survey (GE) are collected continuously, Because of the throughput time of the data collection, some							

table

respondents of GE2014 were originally sampled for GE2013 and some individuals who were originally sampled for GE2014 filled in the GE2015 questionnaire (the former are considered 2014-response, the latter are not). In this table, the 2014 sample consists of persons who were originally sampled in 2014 for GE2014, and respondents are all persons who responded to the GE2014 questionnaire (even when they were sampled in 2013). Calculations are made for ages 15+.

Notes per column

Target population:

- Sex and Sex x Age are reported for 1-Jan-2014.
- Educational attainment, labour status, degree of urbanisation, and household size were estimated using by weighting the response using the population weight,
- Educational attainment: 245852 are missing (1.8%)
- Labour status: 6524 are missing (0.05%)

Sample:

- General: the sample that was drawn for the Dutch HIS included persons aged 0 years or older. The age of 348 persons (2.0%) in the sample was missing. The numbers presented in the table are for persons aged 15 years and older, and thus does not include persons whose age was not known.
- Sex: 41 are missing (0.3%),
- Household size: 129 are missing (0.9%),
- Educational attainment and Labour status are estimated on the basis of the distribution of these variables among respondents and corrected for selective non-response using the applied weighting model (i.e., correction weights were used).

Response:

- General: calculated on the basis of the sample size and the magnitude of the response for each particular group,
- Labour status: 4 missing (0.1%)
- Educational attainment: 126 missing (1.6%)

Non-response:

- General: Calculated not on the basis of the Total released (original) sample, but on individuals that were actually approached during field work. Non-response cases, if present, were not included in the calculation.
- Educational attainment and Labour status are estimated on the basis of the distribution of these variables among respondents and corrected for selective non-response using the applied weighting model (i.e., correction weights were used).

General notes:

- To be completed for columns for which data is available.
- The percentage values in the table refer to column percentages within the respective total (e.g. the number of sampled men aged 15-24 as the percentage of the total number of sampled men).

¹Data on target population should refer to latest available data, preferably from one reference year. They can come from census, sample survey or administrative sources. The respective data source should be stated or a reference provided.

²Total released (original) sample cases.

³DEGURBA classification for year 2012 is to be used. A complete documentation, including correspondence tables can be found on:

http://ec.europa.eu/eurostat/ramon/miscellaneous/index.cfm?TargetUrl=DSP_DEGURBA.

Representativeness of results (National criteria/practices for publication are to be used)	Select from here	Answers
A) For which age groups, resp. combination of sex and age groups, the sample design allows publication of data? (for basic indicators based on HS1, HS2 and HS3 variables) (list all respective options from the list)	<ul style="list-style-type: none"> - 5-year age groups (Please specify the last age group for which it is possible:) - 10-year age groups (Please specify the last age group for which it is possible:) - sex and 5-year age groups (Please specify the last age group for which it is possible:) - sex and 10-year age groups (Please specify the last age group for which it is possible:) 	<ul style="list-style-type: none"> - 5-year age groups (75-80) - 10-year age groups (80-90 yr) - sex and 5-year age groups (70-75) - sex and 10-year age groups (70-80 yr)
B) For which regional breakdown, resp. combination of sex and region, the sample design allows publication of data? (list all respective options from the list)	<ul style="list-style-type: none"> - NUTS 1 - sex and NUTS 1 - NUTS 2 - sex and NUTS 2 - NUTS 3 - sex and NUTS 3 	NUTS1, sex and NUTS1, NUTS2, sex and NUTS2
C) Does the sample design allow publication of data for your country according to other breakdowns? If Yes, please specify for which breakdowns:		Yes, for all breakdowns for which $n \geq 100$ observations per cell

3.2. Frequency of data collection

The Dutch Health Interview Survey is carried out each year. Data are collected continuously on a daily basis, except on Sundays for CAPI data collection,

3.3. Data collection

Data collection method	Select from here	Answers
A) Data collection method	<ul style="list-style-type: none"> Unimode Mixed mode 	Mixed mode

<p>B) Data collection mode(s) (in case of mixedmode list all the modes used)</p>	<ul style="list-style-type: none"> - Postal, nonelectronic version - Postal, electronic version (email) - Face-to-face, nonelectronic version - Face-to-face, electronic version - Telephone, nonelectronic version - Telephone, electronic version - Use of internet - Other (Please specify: ...) 	<ul style="list-style-type: none"> - CAWI - CAPI
<p>C) Which of the following topics (submodules/variables) were administered via a self-completion questionnaire?</p>	<p>Smoking (SK) Alcohol consumption (AL) other, please list (use EHIS submodule codes that is HS, CD, etc.):</p>	<p>AL</p>
<p>D1) Were any variables (including technical and core social variables) completed from a different source (e.g. administrative register)?</p>	<p>No Yes</p>	<p>Yes</p>
<p>D2) If Yes, please specify which variables and from which sources</p>		<p>Variables: BIRTHPLACE, CITIZEN, REGION, DEG_URB, MARSTALEGAL, MARSTADEFACTO, and HHINCOME - Source: Basic Municipal Registry, in Dutch Basis Registratie Personen (BRP)</p>
<p>D3) If Yes, why were different sources of data used? (Please describe here possible impact of the use of these other sources on quality)</p>		<p>Reasons for using alternative sources were reduction of response burden for respondents, completeness of data, and cost effectiveness. The use of the BRP is expected to have a positive impact on the data quality.</p>

Interviewers		
A) Interviewers qualifications	<p>internal staff with experience in health/social surveys</p> <p>external staff with experience in health/social surveys</p> <p>other, please describe: ...</p>	<p>internal staff with experience in health/social surveys</p>
B) Ratio interviews / interviewers		4580/171
C) Describe the interviewer training method and support (e.g. skills testing before starting the fieldwork, duration of training, training materials provided)		<p>Interviewers receive (A) general training, followed for (B) survey-specific training for HIS.</p> <p>A. General training consists of the following:</p> <ol style="list-style-type: none"> 1. First an e-learning course which comprises the following: <ol style="list-style-type: none"> a. The backgrounds of Statistics Netherlands. b. Theory concerning getting cooperation and interview techniques. c. Practical skill on using their laptop and the required software. 2. A first training day which focuses on: <ol style="list-style-type: none"> a. Getting cooperation. b. Interview training. 3. A test during which trainees visit 20 addresses and try to do as many interviews they can. For each day worked an online field work report is made, on which they receive feedback. During daily period they are accompanied by a coach who also gives them feedback. 4. Preparation for a second training day: <ol style="list-style-type: none"> a. Further theory on getting cooperation and interview techniques. b. Online e-learning course in preparation of the first actual survey trainees will work on. 5. A second training day: <ol style="list-style-type: none"> a. Exchange of experiences of the test interviews.

		<p>b. Trainees receive feedback on their field work.</p> <p>c. Instruction and training on the first actual survey.</p> <p>6. During the field work for this first survey trainees write field work reports on which they receive feedback. They also get guidance from a coach.</p> <p>B. The specific training for HIS entails an online e-learning course about the backgrounds and importance of the survey. The contents of the questionnaire and possible problems with questions are also part of this training. After finishing the course, trainees receive a test for which they must get an 80% score in order to be deployed for the HIS.</p>
Quality control during the fieldwork		
A) Method used for the prenotification or first contact of respondents (multiple answers are possible)	<p>letter</p> <p>telephone, incl. mobile</p> <p>personal contact at doorstep</p> <p>internet/email</p> <p>other, please specify</p>	<p>An advance letter is sent in which sampled individuals are asked to complete the CAWI questionnaire. If after 2 reminders no response is obtained, individuals are re-approached by a CAPI interviewer by means of personal contact at the doorstep.</p>
B) Use of incentives	<p>No</p> <p>Yes, please specify</p>	No
C) Theoretical minimal number of contacts with a respondent before declaring a nonparticipation (i.e. the number of attempts that an interviewer is asked to do for interviewing a respondent)		<p>6 for CAPI, 9 including the advance letter and 2 reminder letters for CAWI</p>
D) Effective (mean) number of contacts really performed before declaring a total nonparticipation (if available)		Not available
E) Average, minimum and maximum interview duration for the EHIS questions (in case is not directly possible)	<p>Average: ... minutes</p> <p>Minimum: ... minutes</p>	<p>CAWI:</p> <p>Av. 31.4 minutes</p> <p>Min 8.2 minutes</p> <p>Max 116.2 minutes</p>

to indicate, please give an estimate; in case different data collection methods were used, please indicate separately for each of them)	Maximum: ... minutes	CAPI: Av 31.3 minutes Min 7.5 minutes Max 70 minutes Outliers >120 minutes were removed from these analyses.
F) Please describe the techniques used to control interviewer performance		- Interviewers can ask questions online to trainers. - Each month there is a meeting during which the surveys that are in the field are discussed. - Interviewers can ask questions to their trainers by personal e-mail.
G) Ratio interviewers / field supervisors		171 interviewers / 13 supervisors
H1) Were (some of) the respondents contacted for quality control?	No Yes	Yes
H2) If Yes, please describe the method (mode of contact, % of respondents contacted, what was checked)		CATI 7.4% Not that this investigation was not specifically carried out for EHIS, but for the total Dutch HIS which incorporates respondents aged 0 years or older, In total 701 interviews were carried out,
I) Were additional studies performed in relation to the nonparticipation?	No Yes	No

Questionnaire	Select from here	Answers
Development of the questionnaire		
A) Language(s) in which the survey was carried out		Dutch
B1) Was the translation protocol proposed by Eurostat used for all national languages? (as described in the EHIS Manual, Translation protocol)	Yes No	The EHIS wave 1 questions have been translated according to protocol together with Flemish Belgium, Thus, insofar questions were unchanged the protocol was followed.
B2) If no, please provide a brief description of protocol used (for each language) in the translation process of the EHIS modules		For EHIS wave 2 that were added or changes since EHIS wave 1, we based our questions on the questions used in Flemish, These formulations were adapted for the

		use of the Dutch language in the Netherlands.
C1) Were the modules pre-tested?	No (for none of the languages) Yes but not for each language Yes (for all languages)	Yes
C2) If Yes, please indicate the type of pre-test (multiple answers are possible) (Note: If 'Yes but not for each language' or if 'Yes' (for all languages) but differently for any language, please describe the situation for each language separately under the item 'other, please specify'.)	simple testing cognitive testing behaviour coding special probing expert panel other, please specify:	Cognitive testing
C3) If 'Yes (for all languages)' or 'Yes but not for each language', did the pre-test concern all EHIS modules/sub-modules or just some of them? (Note: If the situation was different for different languages, please describe it separately)	All of them Not all (please name – using the abbreviations of -modules and sub-modules that were pre-tested):	The test concerned a selection of variables.
D1) Was a pilot field test carried out?	Yes No	No
D2) If Yes, please describe the methodology and organisation of the field test (refer to the objectives of the testing, geographical area covered, age range, sample size, respondents selecting procedure, overrepresented population groups, data collection procedure)		n/a
D3) If Yes, please describe the main lessons learned from the field test		n/a
Design of the questionnaire		
A1) Was the recommended order of modules and sub-modules followed?	Yes No	No
A2) If No, please describe the		See Appendix 2

deviations from the recommended order.		
B1) Please indicate for which EHIS variables the questions were modified in comparison with the model questionnaire and conceptual guidelines.		see Annex 3
B2) If there were such modifications introduced, please provide here a general description of the changes (splitting into more questions, etc.) and the reason(s) for modifications. If applicable list in Annex 3 detailed description of the modifications and the wording of the modified questions in English		see Annex 3
C) Please specify the content of alcohol of the “national standard” drink (in grams) used in AL sub-module if different from the guidelines.		Alcohol consumption is defined in terms of glasses of alcoholic beverages, The Dutch Trimbos institute, which investigates alcohol and drug use in the Dutch population, defines a standard glass as containing 12 ml of pure ethanol, This amounts to 9.48 grams of pure ethanol after the conversion factor of 0.79 is applied.
D) Problematic questions Please indicate what were the modules and/or questions which caused problems during preparation of the questionnaire and/or later during the interviews and which were not detected during the tests. Please describe the problems and ways you managed with them.		There were no problematic questions during preparation of the questionnaire or during the interviews, However, derogations were granted for several questions.
E) Core social variables Please comment on implementing the core social variables: possible problems and measures taken to overcome them.		No problems were encountered.
3.4. Data validation		
Several checks are built in the compilation process to ensure that the data conform to the predefined data model, In addition, prior to publication the plausibility of the Dutch data is examined by comparing the outcomes with those of the previous year.		
3.5. Data compilation		

Describe the data compilation process (e.g. data editing, imputation, weighting, adjustment for non-response, calibration, modelling etc.).

The process by which the data file that is used for publication is made on the basis of the raw data is as follows:

1. The raw data from CAWI and CAPI is retrieved from the data collection systems for further processing.
2. The data files from CAWI and CAPI are merged in accordance with a predefined data model.
3. The data are enriched with register information from various sources.
4. Information from standard coding lists of profession, business, education, and sports are added to the data file.
5. The variables used for publication on the Dutch HIS are constructed.
6. The data is weighted and weighting factors are added to the file.
7. The EHIS variables are compiled and saved in a separate file.

Item imputation	Select from here	Answers
A1) Did you apply any method to correct for item non-response?	NO YES	No
A2) If Yes, which method:	- Simple imputation (deterministic) method - Simple imputation (stochastic) method - Multiple imputation approach - Other	n/a
A3) If Yes, please give a short description of the method used (mentioning which auxiliary information or stratification was used):		n/a
A4) If Yes, please provide the values of imputation rate (un-weighted) for all variables for which imputation was carried out: Imputation rate = [number of units for which variable is imputed] / [number of units for which variable is imputed + number of units for which the non-missing value of variable is kept]		n/a

Calculation of weighting factors	Select from here	Answers
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A) Please describe the calculation method in general and underneath in specific		End weights were calculated as the product of starting weights (N/n) and the correction weight to correct the difference between the sample and the population with respect to the weighting variables
A1) Steps: unit's probability of selection, correct non-response, over-sampling/under-sampling of certain population groups, adjust/calibrate the sample to external data relating to distribution of persons in the target population;		see previous
A2) Levels: individual, household, dwelling		Individual
B) Non-response adjustments (Please describe the method and factors used)	Method: Factors used:	Correction weights were calculated to adjust for non-responsresponse, using the method of linear weighting, The following weighting model was used for this correction: Gender2 x Age16 + MaritalStatus4 + DegreeOfURbanisation5 + ProvincePlus16 + HouseholdSize5 + Gender2 x Age3 x MaritalStatus2 + Region4 x Age3 + CountryOfOriginGeneration4 + Season4 + Income5 + Wealth5.
C) Adjustments to external data (including correction for under-sampling/oversampling) (Please describe the method and factors used)	Method: Factors used: - Gender - Age groups; specify which: - NUTS; specify what level/which groups: - Educational attainment level; specify which: - Household size; specify which groups: - Other; please specify: ...	Categories of the variables used in the model used to calculate correction weights: Gender2 - Men - Women Age3 - 0-34 years - 35-64 years - 65 years and older Age16 - 0-3 years - 4-11 years - 12-15 years - 16-19 years - 20-24 years - 25-29 years - 30-34 years - 35-39 years

		<ul style="list-style-type: none"> - 40-44 years - 45-49 years - 50-54 years - 55-59 years - 60-64 years - 65-69 years - 70-74 years - 75 years and older <p>MaritalStatus2</p> <ul style="list-style-type: none"> - Married - Not-married <p>MaritalStatus4</p> <ul style="list-style-type: none"> - Married - Divorced - Widowed - Never married <p>Region4</p> <ul style="list-style-type: none"> - North - South - East - West <p>ProvincePlus16</p> <ul style="list-style-type: none"> - Groningen - Friesland - Drenthe - Overijssel - Gelderland - Utrecht (excluding the city of Utrecht) - Noord-Holland (excluding the city of Amsterdam) - Zuid-Holland (excluding the cities of Den Haag and Rotterdam) - Zeeland - Noord-Brabant - Limburg - Flevoland - City of Utrecht - City of Amsterdam - City of Den Haag - City of Rotterdam <p>DegreeOfUrbanisation5</p> <ul style="list-style-type: none"> - Thinly populated - Reasonably thinly populated - Intermediatele populated - Reasonably densely populated - Densely populated <p>Huishoudgrootte5</p> <ul style="list-style-type: none"> - 1 person
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		<ul style="list-style-type: none"> - 2 persons - 3 persons - 4 persons - 5 or more persons <p>Season4</p> <ul style="list-style-type: none"> - Winter (December, January, February) - Spring (March, April, May) - Summer (June, July, August) - Autumn (September, October, November) <p>HerkomstGeneratie4</p> <ul style="list-style-type: none"> - Native - Western immigrant - Non-Western immigrant, first generation - Non-Western immigrant, second generation <p>Income5</p> <ul style="list-style-type: none"> - Population quintile1 - Population quintile2 - Population quintile3 - Population quintile4 - Population quintile5 <p>Wealth5</p> <ul style="list-style-type: none"> - Population quintile1 - Population quintile2 - Population quintile3 - Population quintile4 - Population quintile5
D) Please describe a method used to adjust for extreme weights (trimming)		No extreme weights resulted from the weighting process
E1) Information on the variability of final weights	<ul style="list-style-type: none"> - average divided by minimum, - maximum divided by average, - coefficient of variation 	<p>2.4</p> <p>2.1</p> <p>0.23</p> <p>percentage smaller than 1: 0</p> <p>square root of design effect: 1.03</p>
E2) In case a method to adjust for extreme weights was applied, also information on the variability of the weights before trimming	<ul style="list-style-type: none"> - average divided by minimum, - maximum divided by average, - coefficient of variation 	n/a

3.6. Adjustment

The weighting model took seasonal fluctuations into account, and no additional measures were taken.

4. Quality management

4.1. Quality assurance

Not available.

New concept added with the migration to SIMS 2.0.

Information (content) will be available after the next collection.

4.2. Quality management - assessment

Quality assurance	Quality assessment
We refer to the Quality Declaration of Statistics Netherlands (http://www.cbs.nl/en-GB/menu/organisatie/kwaliteitsverklaring/default.htm?Languageswitch=on), which also endorses the ESS Code of Practice.	We refer to the Quality Declaration of Statistics Netherlands (http://www.cbs.nl/en-GB/menu/organisatie/kwaliteitsverklaring/default.htm?Languageswitch=on), which also endorses the ESS Code of Practice.

5. Relevance

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5.1. Relevance - User Needs

[not requested]

5.2. Relevance - User Satisfaction

[not requested]

5.3. Completeness

[not requested]

5.3.1. Data completeness - rate

[not requested]

6. Accuracy and reliability

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6.1. Accuracy - overall

Not available

6.2. Sampling error

Please describe the calculation of the design effect and standard error. If outliers received special treatment in estimation (e.g. if they were excluded from estimation), it should be clearly described.

Standard error: s / \sqrt{n}
 Design effect = $1 + (\text{var}(w)) / (\bar{w}^2)$,
 where w is the end weight.

Indicator / sub-	Number of	Estimated	Standard	95%	Design effect deff

indicator (variable(s) from which the indicator is derived)	respondents - n (unweighted)	proportion - p (weighted)	error - SE (with respect of sampling plan)	confidence interval lower; upper	(if applicable/available)
Respondents aged 15 years or over in good or very good health (HS1)					
All	5903	77.3	0.48	78.2; 76.4	1.05
Women	2943	74.4	0.69	75.8; 73	1.05
Men	2960	80.2	0.66	81.5; 78.9	1.05
Respondents aged 15 years or over with a longstanding illness or health problem (HS2)					
All	2641	33.9	0.54	35; 32.8	1.06
Women	1453	36.9	0.77	38.4; 35.4	1.06
Men	1188	30.9	0.77	32.4; 29.4	1.06
Respondents aged 15 years or over that were severely limited in activities people usually do because of health problems for at least the past 6 months (HS3)					
All	488	6.4	0.28	6.9; 5.9	1.05
Women	271	7.0	0.4	7.8; 6.2	1.05
Men	217	5.7	0.38	6.4; 5	1.06
Respondents aged 15 years or over declaring having been hospitalized in the past 12 months (HO1)	656	8.3	0.32	8.9; 7.7	1.05

(men and women)					
Respondents aged 18 years or over who are obese (BMI \geq 30, where BMI = BM2 in kg / (BM1 in m) ² (men and women)	1059	14.3	0.41	15.1; 13.5	1.06
Comments related to the table	Standard errors are calculated using unweighed estimates of the indicators. The 95% CI is calculated on the basis of the estimated proportion and the SE as reported in the two previous columns.				

6.2.1. Sampling error - indicators

[not requested]

6.3. Non-sampling error

[not requested]

6.3.1. Coverage error

A) Overall quality of the sampling frame. Shortcomings in terms of timeliness (e.g. time lag between last update of the sampling frame and the moment of the actual sampling), geographical coverage, coverage of different subpopulations (institutionalised persons), multiple listings, etc.

For constructing the sampling frame, Statistics Netherlands uses the Basic Municipal Registry (in Dutch Basisregistratie Personen, BRP). This register contains all persons who are registered at a municipality in the Netherlands, excluding the Caribbean Islands. Persons belonging to institutional households are excluded from the sampling frame (and from the population). The sampling frame is update once a month. Immigrants and newborns are added to the frame, emigrants and deceased persons are deleted, and if a person has moved to a different address his/her data is updated.

From this frame, samples are drawn in two stages. In the first stage a municipality is selected with probability proportional to the size of the municipality. In the second stage, a number of persons is selected from the municipalities that are selected in the first stage. The number of persons selected in each municipality is such that the sample is self-weighting: all persons have the same probability of being selected. When a sample is selected, the names and addresses of the intended respondents are not known. This has to be retrieved from the BRP. This is done at most six weeks before the start of the fieldwork (average = 4 weeks). From this frame, samples are drawn in two stages. In the first stage a municipality is selected with probability proportional to the size of the municipality. In the second stage, a number of

	persons is selected from the municipalities that are selected in the first stage. The number of persons selected in each municipality is such that the sample is self-weighting: all persons have the same probability of being selected. When a sample is selected, the names and addresses of the intended respondents are not known. This has to be retrieved from the BRP. This is done at most six weeks before the start of the fieldwork (average = 4 weeks).
B) Actions taken for reduction of the shortcomings of the sampling frame (e.g. corrections for sampling frame under-coverage, dealing with overcoverage and multiple listings, etc.).	Persons who are registered at known addresses of institutions, are removed from the sampling frame before sampling takes place.

6.3.1.1. Over-coverage - rate

[not requested]

6.3.1.2. Common units - proportion

[not requested]

6.3.2. Measurement error

Proxy interviews	Select from here	Answers
A1) Please indicate whether the proxy interviews were used	NO YES	No
A2) If Yes, for what reasons the proxy interviews were allowed?	Respondents: 1. Suffering from long-term cognitive impairment; 2. Suffering from long-term severe debilitation; 3. Suffering from a long-term sensory impairment that prevents the interaction between interviewer and interviewee; 4. In hospital/health or social care facility for the entire period of the fieldwork; 5. Away from the household for educational or work purposes for the entire period of the fieldwork in their area of residence. 6. Other (please specify):	n/a
A3) If Yes, for which part of the questionnaire the proxy interview was allowed?	1. Whole questionnaire 2. Limited to the questions specified in Eurostat guidelines 3. Limited to other questions (Specify which EHIS ones: ...) 4. Other, <i>please specify</i> :	n/a

A4) If Yes, please provide the percentage of proxy interviews (in total and for each reason for proxy): (Note: An interview is considered as a proxy interview even if proxy respondents were allowed to answer only a selected number of questions.) (in %)	n/a
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6.3.3. Non response error

Unit non-response	Select from here	Answers
<p>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 will be calculated before and after substitutions.) (For the calculation of ‘Non-response rate after substitution’: Do not forget to include initial selected units and all substitutes.)</p>		<p>Total non-response: 40,0%. A 2-stage mixed-mode strategy was employed: 1. All respondents are approached for CAWI. 2. CAWI non-respondents are approached by CAPI CAWI non-response = (sample – CAWI response) / sample = (12755 – 4020)/12755 = 71,5%. CAPI non-response = ((sample – CAWI response) – CAPI response) / (sample – CAWI response) = ((12755 – 4020) – 3633) / (12755 – 4020) = 5102 / 8735 = 58,4%.</p>
<p>B) Methods used for reducing unit non-response Where applicable, give a description of measures taken during the fieldwork to reduce the non-response</p>	<p>Examples: advance notification in the form of a letter or phone call, system of reminders, number of visits, number of attempts for phone calls, etc.</p>	<p>Data collection strategy: All sampled individuals are first approached to complete the questionnaire in CAWI: 1. Advance letter: short description of the purpose and relevance of the survey, internet address for access, username, and password. 2. Reminder letter 1, 1 week after (1). 3. Reminder letter 2, 1 week after (2). If there is no response 1 week after the 2nd reminder. CAWI non-respondents are approached by CAPI: Interviewers make 6 attempts to visit these persons at home (only if the interviewer made an appointment at visit 6, s/he will visit the address a 7th time). 1. At attempt 1-3, a card is left explaining the purpose of the visit. The interviewer’s phone number is on the card. 2. At attempt 4-6, no card is left, and the interviewer may now also try to reach the person by phone.</p>

		3. After 6 fruitless visit attempts, the person is considered a non-contact, and thus a non-respondent.
C) What information on non-response cases is available?	Examples: demographic and geographic information, health information, etc.	The following variables are available for sampled individuals: Sex, Date of birth, Ethnicity, Country of origin, Nationality, Area code, Marital status, Country of birth, Country of birth of mother, Country of birth of father, Household size, Household type, Place in household, Number of children in household, Age of youngest child, Age of oldest child.
D) Bias risks associated with non-response		Non-response may lead to selective response and thus non-representative results. Weighting was applied to compensate selective non-response.
E1) Please indicate whether substitution was used	NO YES	No
E2) If Yes, which method was used?	- Stratified oversampling - Other	n/a
E3) If Yes, please describe the method used including the criteria for substitution: - which non-responding units are substituted (e.g. non-contacts, refusals, other non-respondents, ineligible units, etc.); - at what stage they are substituted; - the criteria for the selection of substitute units (characteristics of respondents taken into account).		n/a
E4) Substitution rate (Ratio of substituted units to total sample)		n/a

Item non-response	Select from here	Answers
A) Item non-response rate across the health variables (un-weighted and before imputation)	Average: Min.:	Mean = 0.54% (SD =

Items for which a proxy gave an answer but is not recommended according to the EHIS manual should be excluded from calculation of item non-response (i.e. from the numerator and denominator). Note: If proxy interviews were allowed beyond the recommendations as stated in EHIS manual, item non-response could be calculated, in addition to the calculation method recommended above, also including proxy interviews.	Max.:	1.74) Min = 0.00% Max = 10,49%
B) Total item non-response (un-weighted) (number of completed values / expected values over all variables of all respondents taking into account filtering and derogations granted) (link to data completeness rate / substitution rate)		0.70%
C) For which variables the item response (i.e. before imputation) was below 90 % ? (Codes of variables, including core social variables)		PA4
D) References to methodological notes and results of non-response analysis or other methods to assess the effects of non-response.		Not available

6.3.3.1. Unit non-response - rate

[not requested]

6.3.3.2. Item non-response - rate

[not requested]

6.3.4. Processing error

Data processing	Select from here	Answers
A) Please describe the data entry and coding control process and tools used (all measures to improve the process, e.g. performing double data entry are to be mentioned). (If applicable, describe for different modes of data collection)		The answers were entered directly on the computer by interviewers (CAPI) or respondents (CAWI).
B) What were the main errors (coding errors, data entry errors) detected during the data processing?		None
C) Please describe the data cleaning and editing activities (including application of validation rules, treatment of extreme values/anomalies/errors).		Because of the restrictions that were set in the questionnaire on the answers that were entered by respondents and

		interviewers, extreme values, anomalies and errors could not occur. Thus, no additional data cleaning activities were required. The data were processed in an automated production process.
D1) Were there questions asked as open and post coded afterwards? (Concerning for example ISCED, NACE, ISCO)	No Yes	No
D2) If Yes, please list codes of the respective EHIS variables:		n/a
D3) If Yes, describe the process of post-coding (was it done by the interviewer, in the regional, central office, what were the methods used, etc.).		n/a

6.3.4.1. Imputation - rate

[not requested]

6.3.5. Model assumption error

[not requested]

6.4. Seasonal adjustment

[not requested]

6.5. Data revision - policy

[not requested]

[not requested]

6.6. Data revision - practice

[not requested]

6.6.1. Data revision - average size

[not requested]

7. Timeliness and punctuality

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Dates when each of the phases of the projects started/ended	Start date (month/year)	End date (month/year)
A) Preparation of survey (from designing the questionnaire to fieldwork)	JAN-2013	DEC-2013
B) Data collection (fieldwork)	01-JAN-2014	31-DEC-2014
C) Data processing (data entry, validating, editing, imputing, etc.)	JAN-2015	JUN-2015

D) Data delivery to Eurostat (dates of first and final data delivery approved by Eurostat)	08-SEP-2015	Final data not yet delivered
E) Dissemination of national results	APR-2015	APR-2015

7.1. Timeliness

Data collection for EHIS started in January 2014 and national results were published in April 2015. The period between the end of data collection and publication of the results thus is rather short. However, some variables ask information from the past, for instance whether someone had a disease or a condition during the past 12 months (CD1). Thus, in theory, when the disease occurred 11 months ago, the time lag between the phenomenon (i.e, the disease) and publication is 28 months, even though production time is short.

7.1.1. Time lag - first result

[not requested]

7.1.2. Time lag - final result

[not requested]

7.2. Punctuality

The Commission implementing Regulation on EHIS, article 6, par, 2, states that in cases where national data collection ends before January 2015, the EHIS data file should be made available to Eurostat no later than nine months after the end of data collection. Since the Dutch data collection for EHIS ended on 31 December 2014, the deadline for data delivery to was set on 30 September 2015. The Dutch data were delivered before the deadline, on 08 September 2015.

7.2.1. Punctuality - delivery and publication

[not requested]

8. Coherence and comparability

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8.1. Comparability - geographical

With the number of observations per geographical area as starting point, statistics are comparable on the level of provinces (NUTS2). The weighting model also included a regional variable consisting of provinces and the 4 largest agglomerates.

As mentioned in the Committee Regulation, the Caribbean islands and the West Frisian islands with the exception from Texel were excluded from the survey. Nevertheless, CAWI was implemented on all Frisian islands.

8.1.1. Asymmetry for mirror flow statistics - coefficient

[not requested]

8.2. Comparability - over time

[not requested]

8.2.1. Length of comparable time series

[not requested]

8.3. Coherence - cross domain

Data of HIS can be combined with all other available data sources for which sufficient identifying information is available.

[not requested]

8.4. Coherence - sub annual and annual statistics

[not requested]
8.5. Coherence - National Accounts
[not requested]
8.6. Coherence - internal
[not requested]

9. Accessibility and clarity [Top](#)

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9.1. Dissemination format - News release

- The Netherlands does not eat sufficient vegetables, fruit, and fish: <http://www.cbs.nl/nl-nl/menu/themas/dossiers/allochtonen/publicaties/artikelen/archief/2015/nederland-eet-onvoldoende-groente-fruit-en-vis.htm>
- More than half of the Dutch people practice sport weekly (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/vrije-tijd-cultuur/publicaties/artikelen/archief/2015/ruim-helpt-nederlanders-sport-wekelijks.htm>
- Walking the stairs and domestic work most problematic for people of age (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/gezondheid-welzijn/publicaties/artikelen/archief/2015/vooral-traplopen-en-huishoudelijk-werk-problematisch-voor-ouderen.htm>
- Limitations in everyday activities of older people (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/gezondheid-welzijn/publicaties/artikelen/archief/2015/beperkingen-in-dagelijkse-handelingen-bij-ouderen.htm>
- More than half of the women take a cervical smear (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/gezondheid-welzijn/publicaties/artikelen/archief/2015/ruim-de-helpt-van-de-vrouwen-laat-uitstrijkje-maken.htm>
- A quarter of a million use ecstasy (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/gezondheid-welzijn/publicaties/artikelen/archief/2015/kwart-miljoen-nederlanders-gebruikt-ecstasy.htm>
- Psychological complaints in girls and older women (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/gezondheid-welzijn/publicaties/artikelen/archief/2015/vaker-psychische-klachten-bij-meisjes-en-oudere-vrouwen.htm>
- One in three smokers tried to stop (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/gezondheid-welzijn/publicaties/artikelen/archief/2015/een-op-drie-rokers-deed-mislukte-stopoging.htm>
- Men experience positive emotions more often than women (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/dossiers/vrouwen-en-mannen/publicaties/artikelen/archief/2015/mannen-ervaren-vaker-positieve-emoties-dan-vrouwen.htm>
- More than 1,2 million Dutch people have eczema or psoriasis (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/gezondheid-welzijn/publicaties/artikelen/archief/2015/ruim-1-2-miljoen-nederlanders-hebben-eczeem-of-psoriasis-2014.htm>
- Higher educated live longer in good health (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/gezondheid-welzijn/publicaties/artikelen/archief/2015/hogeropgeleiden-leven-langer-in-goede-gezondheid-2014.htm>

9.2. Dissemination format - Publications

- Well-being in the Netherlands (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/gezondheid-welzijn/publicaties/publicaties/archief/2015/welzijn-in-nederland-2014.htm>.
- Statistical year book 2015 (in Dutch): <http://www.cbs.nl/nl-nl/menu/publicaties/boeken/statistisch-jaarboek/archief/2014/2014-statistisch-jaarboek-pub.htm>.
- Youth monitor year report 2015 (in Dutch): <http://www.cbs.nl/nl-nl/menu/themas/gezondheid-welzijn/publicaties/publicaties/archief/2015/jaarrapport-2015-landelijke-jeugdmonitor.htm>. Also see <http://jeugdmonitor.cbs.nl>.

9.3. Dissemination format - online database

The Dutch HIS data are used for the following tables in Statistics Netherlands' online database StatLine:

Main tables:

- Health and use of care; characteristics (in Dutch):

<http://statline.cbs.nl/Statweb/selection/?DM=SLNL&PA=83005NED&VW=T>

- Lifestyle and preventive medicine; characteristics (in Dutch):

<http://statline.cbs.nl/Statweb/selection/?DM=SLNL&PA=83021NED&VW=T>

Tables using data of HIS:

- Health expectancy; since 1981:

<http://statline.cbs.nl/Statweb/selection/?DM=SLEN&PA=71950ENG&LA=EN&VW=T>

- Health expectancy; income (in Dutch):

<http://statline.cbs.nl/Statweb/selection/?DM=SLNL&PA=80298NED&VW=T>

- Health expectancy; education (in Dutch):

<http://statline.cbs.nl/Statweb/selection/?DM=SLNL&PA=71885NED&VW=T>

- Health. lifestyle. health care use and supply. causes of death; key figures:

<http://statline.cbs.nl/Statweb/selection/?DM=SLEN&PA=81628ENG&LA=EN&VW=T>

- Health. lifestyle. health care use and supply. causes of death; from 1900:

<http://statline.cbs.nl/Statweb/selection/?DM=SLEN&PA=37852ENG&LA=EN&VW=T>

- Length. under- and overweight from 1981 (in Dutch):

<http://statline.cbs.nl/Statweb/selection/?DM=SLNL&PA=81565NED&VW=T>

9.3.1. Data tables - consultations

Not available yet

9.4. Dissemination format - microdata access

Under strict conditions, certain types of institutions may be granted access to microdata for research purposes only. To ensure that individual cases cannot be identified, individual identifying information is strategically removed from the microdata set. The microdata is made available through remote access, and is established via a secure connection. Institutions have to pay for access. Detailed information can be found following the link <http://www.cbs.nl/en-GB/menu/informatie/beleid/zelf-onderzoeken/default.htm>.

9.5. Dissemination format - other

No other formats are available

9.6. Documentation on methodology

<http://www.cbs.nl/nl-NL/menu/themas/gezondheid-welzijn/methoden/dataverzameling/korte-onderzoeksbeschrijvingen/gezondheidsenquête-vanaf-2014.htm>.

9.7. Quality management - documentation

Not available

9.7.1. Metadata completeness - rate

Not available

9.7.2. Metadata - consultations

Not available

11. Confidentiality

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Statistics Netherlands is fully independent in terms of its statistical operations with respect to methodology and publications. Independence was granted by the Royal Act of 1899 and reconfirmed by law in 1996 and 2003. Data provision was made compulsory by law in 1936. Confidentiality is guaranteed. Individual data are never published without consent.

The Royal Act of 1899 and the Law of 1996 have been repealed by the Law of 20 November 2003. This Law on the Central Bureau of Statistics describes the independence of the director-general of

Statistics Netherlands: “The director general shall determine the methods by which the studies included in the work programme and the multi-annual programme will be carried out and the manner in which the results of those studies will be published”.

The Law of 2003 established the Central Bureau of Statistics and the Central Commission for Statistics. Section 3 states: “The task of the CBS is to carry out statistical research for the government for practice, policy and research purposes and to publish the statistics compiled on the basis of such research”.

Sections 33 through 36 describe the collection of information, sections 37 and 38 describe the use of information gathering and sections 39 through 42 the dissemination of results. The most relevant clauses are the following. Section 33: “The director general is authorised to use, for statistical purposes, data from registers (..) the director general is authorised to request, for statistical purposes, data (..) from the categories of companies, independent professionals, institutions and legal persons (..).”

Section 37: “The data (..) shall be used solely for statistical purposes. The data (..) shall only be published in such a way that no recognisable data can be derived from them about an individual person, household, company or institution, unless, (..) there are good reasons to assume that the company or institution concerned will not have any objections to the publication.”

The CBS Law of 2003 is available in English and Dutch. The public can find it at the CBS website (<http://www.cbs.nl/en-gb/menu/organisatie/statistics-netherlands-act-november-2003.htm>).

11.1. Confidentiality - policy

Statistics Netherlands is fully independent in terms of its statistical operations with respect to methodology and publications. Independence was granted by the Royal Act of 1899 and reconfirmed by law in 1996 and 2003. Data provision was made compulsory by law in 1936. Confidentiality is guaranteed. Individual data are never published without consent.

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11.2. Confidentiality - data treatment

Several measures are taken to guarantee the confidentiality of personal data:

1. Identifying personal data is separated from the questionnaire data before the data are processed and then discarded.
2. Only aggregated data are published (individual observation units are not recognizable either directly or indirectly). Cells with less than 50 observations are not published.
3. Data are handled by staff trained to respect the principles of confidentiality.

12. Comment

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Restricted from publication

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Annexes

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[Annex 1 - NL - Dutch HIS: Health questions](#)

[Annex 2 - NL - Back translation \(informal\) into English of the Dutch HIS](#)

[Annex 3 - NL - National adaptations of the model questionnaire](#)

[Annex 5 - NL - Cognitvie test of the Dutch Health Questionnaire 2014 \(in Dutch\)](#)