MODULE 2025

6 YEAR MODULE ENERGY AND ENVIRONMENT: COMMISSION IMPLEMENTING REGULATION (EU) 2023/2527 OF 17 NOVEMBER 2023 AND 3 YEAR MODULE HEALTH: COMMISSION IMPLEMENTING REGULATION (EU) 2020/1721 OF 17 NOVEMBER 2020

Ad hoc module – Energy and the environment

The method for collecting information on the variables from the module is as follows: Interview with a person answering the household questions

HC003A: Energy efficiency Renovation (thermal insulation, windows or heating system)

HEE07: Obstacles in improving energy efficiency

HEE09: Separating plastic bottles at home

HEE11: Number of private, leased or company cars in the household

HEE12: Type of (newest) car

HEE13: Year of first registration of (newest) car

HEE14: Year of first registration of the (oldest) car

HC006: Year of construction of the main dwelling

HEE01: Walking distance to the nearest public green space

Personal interview with a person aged 16 and over (proxy interview is allowed only in cases where the person is temporarily absent or incapacitated)

PEE03: Ability to access within 1 hour work/school/university by public transport, bicycle or walking

PEE04: Primary transport used

PEE05: Secondary transport used

PEE08: Damage to main house/apartment due to environmental/weather causes

PEE10: Frequency of eating meat, poultry or fish

PEE15: Number of private or business flights within Europe

PEE16: Number of private or business flights outside of Europe

PEE17: Number of hours spent in a non-electric car as a driver during the usual 7 days

PEE20: Trying to have mobile phone repaired when it is broken

PEE21: Action taken with unusable mobile phone

PW201: Satisfaction with public green spaces in the local area

• HC003A: Energy efficiency Renovation (thermal insulation, windows or heating system)

This variable identifies whether the dwelling was renovated in the last 5 years to improve its energy efficiency (e.g. installing thermal insulation or replacing windows or the heating system). The information should be collected from all households regardless of the tenancy status (owners and tenants).

Energy efficiency renovation in dwellings refers to measures taken to improve the quality of dwellings so they use less energy to heat, cool and run appliances and electronics.

All energy efficiency renovations should be considered and counted. For instance, even if only one window in the dwelling was replaced in the last 5 years (and not all the windows), the information should still be recorded for this variable.

The following renovation measures are included:

- improving the thermal insulation of external walls, the roof or floor;
- replacing single glazed windows with double or triple glazed windows;
- replacing the heating system with a renewable energy system (e.g. heat pump, solar-thermal, biomass pellets, biofuels) or a more efficient system.

Energy efficiency renovations should be taken into account regardless of who was responsible for carrying out the renovation (e.g. renovations carried out by a previous owner-occupier or the owner of a rented dwelling).

Minor renovation work that did not improve the dwelling's energy efficiency should not be taken into account.

The number of measures refers to the number of different types of renovation work carried out in the dwelling. For instance, insulating the roof and installing new windows should be counted as two measures, and insulating the walls and roof should be counted as two measures.

• HEE07: Obstacles in improving energy efficiency

This variable identifies the perceived obstacles to improving the energy efficiency of the respondent's main residence.

The question on this variable only needs to be asked to households that own their main residence (HH021 = 1, 2) and that require energy efficiency improvements, yet have not carried out renovations in the last 5 years (HC003A = 4). The variable should record the main reason why the dwelling has not undergone any energy renovation despite the need. Possible reasons include a lack of interest, the high cost of such renovations, the difficult in finding professionals to do the work and administrative obstacles.

Energy efficiency in dwellings refers to improving the quality of dwellings to use less energy for heating, cooling and running appliances and electronics.

Renovations to improve energy efficiency should include any action that impacts energy savings, such as replacing windows, heating systems, doors or the roof and installing insulation.

Only renovations that affect the dwelling's thermal conditions should be considered, excluding other types of renovations.

Administrative obstacles (answer 4) include legislative restrictions, challenges in obtaining permits, lengthy and costly processes, waiting times and complex application procedures.

• HEE09: Separating plastic bottles at home

This variable collects information on whether household members separate plastic bottles from the general waste in order to recycle them.

Plastic bottles are bottles made of high or low-density plastic, such as polyethylene terephthalate (PET), polyethylene (PE), polypropylene (PP), polycarbonate (PC) or polyvinyl chloride (PVC). They are marked with a triangle symbol, indicating the type of plastic.

Plastic bottles are typically used to store liquids, such as water, soft drinks, motor oil, cooking oil, medicine, shampoo, milk and ink. Sizes range from very small bottles to large carboys.

If the household completely avoids using plastic bottles, then answer 1 should be chosen.

- this variable does not include cans (made of metal) used for cola or other beverages,
- plastic for covering products,
- plastic packaging,
- plastic bags, etc
- HEE11: Number of private, leased or company cars in the household

This variable records the number of cars for private use, including leased or company cars, in the household.

The household is considered to possess a car/van if at least one member possesses one. Possessing the car does not necessarily imply ownership. For example, a household possesses a car if it: leases a car (long-term rented, provided on loan or shared) and has unlimited access to it when needed for private use; or shares a car with other households and has easy access to it whenever needed and on a regular basis.

A company car or van that is available for private use by the household counts as possession. Commuting to and from work using a company car is considered private use.

A household is not considered to possess a car or van if it is only for professional purposes.

If a household only has access to a company car or van on weekdays and not weekends, this should be considered as having limited access and should NOT be recorded.

Motorcycles are excluded from this variable. A taxi or a car from a ride-sharing service (like Uber) should not be reported, even if they are used regularly. Cars used from carsharing services should not be considered.

The variable measures accessibility and not affordability, which is measured by variable HS110.

• HEE12: Type of (newest) car

This variable identifies the fuel/power unit of the newest car used by the household.

If the household has more than one car driven regularly for private use, only the newest car should be considered. If the household has only one car, then that car should be considered to be the newest one.

The type of fuel used in a car engine can affect a car's performance and its engine's wear and tear. Certain fuels are better for power, and others are favoured for speed or fuel efficiency. The type of fuel used affects the environment and air pollution.

- Diesel cars are equipped with engines that use diesel fuel.
- A petrol car has an engine that runs on petrol (gasoline).
- Hybrid cars combine two different energy sources: electricity and a standard fuel type (petrol/diesel and LPG/CNG). There are three major types of hybrid vehicles: mild hybrids, full hybrids and plug-in hybrids.
- Battery electric vehicles use an electric motor to turn the wheels, producing zero tailpipe emissions.
- Other cars include bi-fuel cars, hydrogen powerd, gas powered cars, etc. Bi-fuel cars (known as dual-fuel cars) have multifuel engines capable of running on two fuels (usually gasoline and alternated with natural gas (CNG), LPG or hydrogen).

• HEE13: Year of first registration of (newest) car

This variable records the year when the newest car used by the household was first registered.

A car's date of first registration is the first time the vehicle was registered as new in a motor vehicle register, regardless of the country of registration. It is irrelevant if the car was owned by the household at that time or was registered by a previous owner. The first registration date is different from the manufacturing date. There can be a gap of a few months or even years between the two. This is often the case when a vehicle is manufactured in another country and shipped: it can take some time for the car dealer or buyer to register it.

If the household has more than one car, the newest car should be considered. If the household only has one car, that car is considered to be the newest one; therefore, missing value, and flag -2 should be provided for HEE14.

Cars shared between households that can be accessed easily whenever needed and on a regular basis are included. Motorcycles, taxis, cars from ride-sharing services (like Uber) are excluded.

Cars only used for professional purposes are also excluded.

Vintage cars first registered before 1940 should be recorded as 1940.

• HEE14: Year of first registration of (oldest) car

This variable records the year when the oldest car used by the household was first registered. The year reported for this variable should not be more recent than the year reported in HEE13. If the household owns two cars with the same year of registration, one of the cars should be reported in variable HEE13 and the other one in this variable.

A car's date of first registration is the first time the vehicle was registered as new in a motor vehicle register, regardless of the country of registration. It is irrelevant if the car was owned by the household at that time or was registered by a previous owner. The date of first registration is different from the manufacturing date. There can be a gap of a few months or even years between the two. This is often the case when a vehicle is manufactured in another country and shipped: it can take some time for the car dealer or buyer to register it.

If the household has more than one car, the oldest car should be considered. If the household has only one car, then this car should be reported in variable HEE13 and not in this variable. Flag -2 should then be recorded in this variable.

Cars shared between households that can be accessed easily whenever needed and on a regular basis are included. Motorcycles, taxis and cars from ride-sharing services (like Uber) are excluded.

Cars only used for professional purposes are also excluded.

Vintage cars first registered before 1940 should be recorded as 1940.

• HC006 Year of construction of the main dwelling

This variable indicates the year when the household's dwelling was completed (meaning deemed suitable for use).

If the dwelling underwent a major renovation, the year that the renovation was finished should be the one recorded. Major renovation refers to an extensive modernisation of the building, including installing insulation and replacing the roof, electrical system and heating system. However, if only minor renovations or repairs were carried out, the year of construction should be recorded.

• HEE01 Walking distance to the nearest public green space

The variable measures how easily household members can reach the nearest green space, which is an essential part of maintaining a healthy lifestyle and providing opportunities for relaxation.

A public space is defined as all places that are publicly owned or designated for public use. They are accessible and to be enjoyed by everyone at no cost and not operated for profit. They are typically categorised into streets, open spaces and public facilities.

More generally, a public space is a communal place outside the home and workplace that are generally open to the public. They encourage social interaction and provide opportunities for people to meet and connect.

A public green space is an outdoor area that is open and accessible to everyone free of charge. Everyone should have equal access to it (for example, children, people with disabilities, women and older people).

A public green space is defined subjectively by the respondent.

It could include parks, playgrounds, city squares, water features, forests and spaces near lakes, rivers or the sea (known as 'blue spaces').

However, it should not include private gardens, neighbour gardens, school playgrounds, etc., even if household members can use or access them easily. These spaces do not belong to the general public and may not be easily accessible when needed.

The variable does not aim to measure whether the household members actually use these public green spaces.

Variable HEE01 concerns the nearest public green space, and variable PW201 concerns all public green spaces in the local area.

• PEE03 Ability to access within 1 hour work/school/university by public transport, bicycle or walking

This variable determines whether a person's main residence is within 1 hour from their workplace, school or university by public transport, bicycle or foot. It only concerns people aged 16 to 65 who are employed or students/pupils according to PL032.

Public transport includes several modes of transport, such as buses, trams, trains, underground/metro and public water transport (ferries, boats, ships, etc.). These modes transport are available to the general public, may require a fare and run at scheduled times.

The mode of transport the person usually uses should be considered. Taxis and cars from ride-sharing services (like Uber), which the person can pay for privately at their own convenience, should not be considered. Private or company cars should not be counted for this variable.

The time should be measured from the person's home to their main activity (such as work, school or university). For example, going from home to work but not going from work to the gym.

Delays due to rush hour, traffic jams or other circumstances should be considered when estimating the travel time. The total travel time from home to the main activity should include waiting times (for public transport) and the time spent getting from home to the bus/train station (whether it is by foot, bike, etc.).

Holidays, days off and working from home on specific days of the week should not be considered. Temporary disruptions (such as roadworks) should not be taken into account.

If the respondent is home-schooling or always works from home, answer 3 should be recorded.

• PEE04 Primary transport used

This variable identifies the primary mode of transport the respondent used for commuting (to work, school, etc.) most months in the last 12 months.

All forms of commuting, including walking, as set out in the answers should be considered.

Travel and modes of transport used for work or study purposes (e.g. taxi driving, food delivery) or leisure activities (e.g. running, walking for well-being) should not be considered.

Where a combination of different modes of transport is used, the mode used for the longest distance should be considered. For example, if a person walks to the bus stop, takes the bus and then walks to the office (school, shop, etc.), then the primary mode of transport is the bus.

If different transport modes are used for different activities, the transport mode used most frequently should be reported (e.g. going to work by car but going shopping by bus). For example, the respondent uses the bus to go to work once a week (100 km) but uses the car every day for small distances (e.g. 5 km): the primary transport mode is the car.

If the person uses the bus to go to work but during the summer they stay at home, then the transport used most months should be considered the primary transport mode (in this case, the bus).

Walking includes walking with mobility aids (e.g. wheelchair, crutches). However, if the person uses a motorised device due to activity limitations, record answer 4.

For some specific professions (e.g. taxi driving), only time spent travelling outside working hours should be considered.

• PEE05 Secondary transport used

This variable identifies the second mode of transport the respondent used the most for commuting (to work, school, etc.) most months in the last 12 months.

All forms of commuting, including walking, as set out in the answers should be considered.

Travel and modes of transport used for work or study purposes (e.g. taxi driving, food delivery) or leisure activities (e.g. running, walking for well-being) should not be considered.

If more than one mode of transport is used (e.g. going to work by car but going shopping by bus), the most frequently used transport mode is the car, and the second most frequently used transport mode is the bus.

For example, the respondent uses the bus to go to work once a week (100 km) but uses the car every day for small distances (e.g. 5 km): the primary transport mode is the car and the second transport mode is the bus.

Walking includes walking with mobility aids (e.g. wheelchair, crutches).

However, if the person uses a motorised device due to activity limitations, record answer 4.

For some specific professions (e.g. taxi driving), only time spent travelling outside working hours should be considered.

• PEE08 Damage to main house/apartment due to environmental/weather causes

The variable determines whether the respondent's main dwelling (house, apartment, flag or studio) was damaged as the result of environmental or extreme weather events/conditions in the last 5 years.

Any damage to the structure of the house/apartment that requires replacement or renovation should be considered. The whole house can have been damaged or only part of it, e.g. a room. For example, the damage can be due to a storm (the windows were destroyed) or snow (damage to the roof), or it can be a complete loss of a dwelling, e.g. due to flooding or wildfire.

Damage to garages (in a separate building), gardens, driveways or the street in front of the house should not be considered.

Only damage that occurred in the following spaces of the housing unit should be considered: rooms, bathroom, toilet, corridor, utility room, hall and veranda.

If the dwelling is shared by more than one household, only the affected space of the household responding to the question should be counted.

The question concerns the main dwelling (house/apartment). The main dwelling is the dwelling in which the respondent is currently living or the other dwelling the respondent was using as their main residence in the last 5 years. If the household moved in the last 5 years, they should report on damage to both the previous and current dwellings. For this reason, the question is asked at the individual level.

In most cases, the impact will be the same for all household members.

If the main dwelling was damaged by more than one extreme weather event, the answer should be 'Yes'. The variable does not measure the scale of damage or how frequently there has been damage.

If the damage happened more than 5 years ago, the answer should be 'No'.

• PEE10 Frequency of eating meat, poultry or fish

The variable measures how often the respondent eats meat, poultry or fish.

The meat can be in pieces, conserves or puree; both fresh and frozen meat should be considered. It includes meat that is on the carcass of an animal and offal (internal organs and entrails). The amount of meat consumed is not important. The variable does not measure affordability (HS050).

The term **meat** usually refers to the red meat from livestock. Meat includes beef, lamb, goat, pork, veal, horse, venison and mutton.

Poultry, known as white meat, comes from domestic fowl (such as chickens, turkeys, ducks, geese or rabbits) and some domestic birds (such as pheasants, squabs, guinea fowl, ostriches and pigeons). Eggs are not included, even though they come from poultry.

Fish and seafood includes fish with fins, gills, a backbone, and a skull, as well as shellfish, such as molluscs, crustaceans and echinoderms.

Meat products and fishery products should also be considered. Processed meat products can use red meat or poultry and include canned meat, foie gras, pâté, ham, bacon, pastrami, salami, sausages, bratwursts, frankfurters, hot dogs and spam.

Fishery products such as: fish, crustaceans and molluscs fresh, chilled, frozen, salted, smoked, and dried; preserves and conserves, should be considered.

Answer 4 'Not at all, I am vegetarian or vegan' includes people who do not eat meat or fish, and sometimes other animal products, for moral, religious or health reasons.

The reference period is the last 12 months. It refers to eating habits on weekdays and at weekends. If the respondent has adopted new dietary habits in the last 12 months, then the dietary habit for most months in the last 12 months should be considered. If the respondent only consumes meat during specific seasons of the year, answer 3 'Less often than every week' should be recorded distinguishing it from answer 4.

• PEE15 Number of private or business flights within Europe

This variable measures the number of flights the respondent took in the last 12 months within Europe. It considers travel for private purposes (such as going on holidays or visiting family or friends) and business purposes (such as going to conferences or meetings). All flights are to be counted: international flights (to another country in Europe) or domestic flights (within a country).

A flight means a one-way trip from place A to place B and a roundtrip if the person travels back from place B to place A.

One-way flights and roundtrips should be counted as one trip. A direct flight or transit flight should be counted as one trip.

Neither the length of the trip nor flight class (first, business or economy) is relevant.

Travel by helicopter, plane and private jet should be included. Airships and hot air balloons are excluded.

Europe means the continent of Europe.

• PEE16 Number of private or business flights outside Europe

This variable measures the number of flights the respondent took in the last 12 months outside Europe. It considers travel for private purposes (such as going on holidays or visiting family or friends) and business purposes (such as going to conferences or meetings).

A flight means a one-way trip from place A to place B and a roundtrip if the person travels back from place B to place A. Roundtrips should be counted as one trip as should direct flights or transit flights.

Neither the length of the trip nor the flight class (first, business or economy) is relevant.

Travel by helicopter, plane and private jet should be included. Airships and hot air balloons are excluded.

This variable only concerns travel to destinations outside the continent of Europe.

• PEE17 Number of hours spent in a non-electric car as a driver during the usual 7 days

This variable collects information on the number of hours the respondent spends driving a non-electric car. The car can be a private car, a company car, a friend's car, a car from a carsharing service or any other type

of car that the respondent drives in a typical 7-day period. The reason for driving can be for any typical activity, like going to work, school, sports activities or university, shopping or visiting someone.

Time spent driving when working (e.g. taxi driving, food delivery) should not be included.

The variable should consider a typical 7 days and not exceptional cases when the respondent went on holidays and chose to drive.

Hybrid cars and all other cars that are not fully electric should be included.

If the person does not drive, the answer should be 0 regardless of their age.

• PEE20 Trying to have mobile phone repaired when it is broken

This variable investigates how the respondent deals with broken mobile phones (including smartphones) and whether they get them repaired.

Any type of mobile phone should be considered. Other devices used for communication, like landline phones and smartwatches, should not be included.

A mobile phone is usually owned by one person, but it can also be shared between household members.

If the respondent has more than one mobile phone, the answer should reflect their typical behaviour. Nevertheless, respondents are asked to think about the device for which they feel responsible, and which was most recently broken.

The focus of this variable is not on the type of damage, type of mobile phone, its cost or other factors related to the affordability or accessibility of repair services.

• PEE21 Action taken with unusable mobile phone

This variable investigates how the respondent deals with mobile phones (including smartphones) that no longer work properly. Collecting information on individuals or households' recycling habits on mobile phones that are not used anymore is necessary for policies related to the European Green Deal.

A mobile phone is usually used by one person. If a mobile phone is shared by household members, all members concerned should answer this question.

If the respondent has more than one unusable mobile phone, the most common action taken should be recorded. Therefore, respondents are asked to think about the device for which they feel responsible, and which was most recently broken. Only one option should be recorded.

Under answer 2 'It was sold or given away', respondents should include sales to individuals, sales through a website or app (e.g. Facebook Marketplace, eBay, OLX) and to businesses. Answer 3 should be selected for take-back schemes offered by the manufacturer or seller where the buyer obtains a discount when purchasing a new device.

• PW201 Satisfaction with public green spaces in the local area

This variable measures the respondent's level of satisfaction with the public green spaces in their local area. The assessment is based on the respondent's own perception and opinion.

Local area can be defined either administratively or subjectively. It can refer to the geographical area (neighbourhood, small town, district, municipality, etc.) where the person usually lives and that is used to provide statistics, information, voting, etc. at local level.

If the respondent has several public green spaces in their local area, they should refer to all of them in general or the one that they visit the most often.

Variable HEE01 relates to the nearest public green space, and variable PW201 relates to all public green spaces in the local area.

3-YEAR ROLLING MODULE - HEALTH

The questions in the health module aim to collect additional information on the financial burden related to medical and dental expenses, frequency of visits and consultations with a general practitioner and specialist, physical activity during and outside work, and calculation of body mass index. The questions are answered by each person aged 16 and over who is a member of the household. For variables applicable at the individual level, the data collection method is a personal interview with all current household members aged 16 and over or, where applicable, with each selected respondent. The body mass index (BMI) variable can be calculated from height and weight collected during the interview or directly collected from the interviewee using a demonstration card.

• HS200: Financial burden of medical care

The objective is to collect the opinion of the respondent on whether medical care costs are a financial burden on the household. The variable provides subjective information about the affordability of out-of-pocket medical care expenditures.**Included:**

- health care provided for different purposes (curative, rehabilitative, long-term health care) and by different modes of provision (inpatient, outpatient, day, and home care)
- medical mental health care
- preventive medical services.

Excluded:

- taking prescribed or non-prescribed drugs
- dental care.

The variable concerns only financial burden of out-of-pocket expenditure at the point of use or of payment for medical care. Costs of compulsory or voluntary health insurance contributions should be in general excluded. A burden caused by costs when a household pays the costs upfront and then has them reimbursed by health insurance later on can be included.

• HS210: Financial burden of dental care

The objective is to collect the opinion of the respondent on whether dental care costs are a financial burden on the household. The variable provides subjective information about the affordability of out-of-pocket expenditures on dental care services. **Included:**

- health care provided by orthodontists.
- preventive dental services

Excluded:

- self-medication (taking prescribed or non-prescribed drugs)
- medical care.

The variable concerns only financial burden of out-of-pocket expenditure at the point of use or of payment for dental care. Costs of compulsory or voluntary health insurance contributions should be in general excluded. A burden caused by costs when a household pays the costs upfront and then has them reimbursed by health insurance later on can be included.

• HS220: Financial burden of medicines

The objective is to collect the opinion of the respondent on whether the cost of medicines (prescribed and non-prescribed) are a financial burden on the household. The variable provides subjective information about the affordability of out-of-pocket expenditures on medicines.

Medicines are understood in this case as products used to alleviate symptoms, prevent illness, or improve poor health, ordinarily purchased from a pharmacy (including a hospital pharmacy).

Included:

- prescribed medicines, i.e. medicines which were written on a prescription by a doctor or dentist (irrespective whether they are reimbursed by health insurance or not).
- non-prescribed medicines (also called over-the-counter medicines), i.e. medicines which are used at the respondent's own initiative or consulted with a doctor but were not written on a prescription.
- herbal medicines, homeopathic medicines, dietary supplements (such as vitamins, minerals or tonics), contraceptive pills used for different purposes than contraception, hormones (other than for contraception).
- different dosage forms of medicines, such as pills, drops, syrups, ointments, gels, inhalers, injections.

Excluded:

- contraceptive pills or hormones (both used for contraception)
- herbal teas (if they are not considered as medicines).

The variable concerns only financial burden of out-of-pocket expenditure at the point of use or of payment for medicines. Costs of compulsory or voluntary health insurance contributions should be in general excluded. A burden caused by costs when a household pays the costs upfront and then has them reimbursed by health insurance later on can be included.

• PH080: Number of visits to a dentist or orthodontist

The variable provides a measure of the number of visits to a dentist/stomatologist or orthodontist on respondent's own behalf during the 12 months prior to the interview.

Dentist/stomatologist: a professional who provides comprehensive care regarding teeth and oral cavity, including prevention, diagnosis and treatment of aberrations and diseases. Dentist's tasks include: making diagnosis, advising on and giving necessary dental treatment, giving surgical, medical and other forms of treatment for particular types of dental and oral diseases and disorders.

Orthodontist: a dental specialist who diagnoses, prevents and corrects irregularities of the teeth and jaw problems (for example, correcting misaligned teeth through the use of braces).

Dental hygienist/dental hygiene specialist: a dental professional who mainly focuses on nonsurgical periodontal therapy, the maintenance of dental health and the prevention of oral disease.

Visit: consultation in a dentist's/stomatologist's or orthodontist's office.

Included:

- Visits to a dentist or orthodontist in foreign countries, e.g. during vacations abroad.

Excluded:

- Home visits and consultations by telephone.
- Visits for the oral health of other people, such as children or elderly relatives.
- PH090: Number of consultations with of a general practitioner or family doctor in the past 12 months

The variable provides a measure of the number of consultations of a general practitioner or family doctor on the respondent's own behalf during the 12 months prior to the interview.

General practitioner (GP) or family doctor: a physician (medical doctor) who does not limit his/her practice to certain disease categories but assumes responsibility for the provision of continuing and comprehensive medical care or referring patients to another healthcare professional. In some countries, being a GP is considered a specialisation. This definition needs to be localised. Some examples of GPs given in ISCO-08 and SHA 2011: district medical doctor – therapist, family medical practitioner, general practitioner; medical doctor (general); medical officer (general); resident medical officer specialising in general practice; paediatricians providing general medicine in private offices (general practitioner for children and adolescents); physicians in walk-in offices/centres.

Consultation: a visit to a doctor's office or a home visit (a consultation at the respondent's home), or a consultation by telephone, videoconference (Skype, Teams etc.) or e-mail. Only consultations on the respondent's own behalf are taken into account, meaning contacts centred on the respondent's own health.

Included:

- Medical appointments with a GP or family medicine specialists in the country concerned
- Hospital out-patient visits if not for a specialty other than family medicine
- Visits to a GP or specialist in family medicine in foreign countries, e.g. during vacations abroad

Excluded:

- Contacts with a nurse on behalf of a GP, for instance to receive a receipt; visits for prescribed laboratory tests or visits for prescribed and scheduled treatment procedures (e.g. injections)
- Telephone contacts (even with a doctor) without a consultation (for example just to arrange an appointment with a doctor)
- Visits for treatment of the illness or health of other people, such as children or elderly relatives
- PH100: Number of consultations of a medical or surgical specialist (excluding dentists, orthodontists or other dental care specialists) in the past 12 months

The variable provides a measure of the number of consultations of a medical or surgical specialist on the respondent's own behalf during the 12 months prior to the interview.

Medical or surgical specialists: physicians that are medical specialists, including dental and other surgeons, but not general dentists or other dental care specialists included in PH080. Their tasks include: conducting medical examinations and making diagnoses, prescribing medication and treating diagnosed illnesses, disorders or injuries; giving specialised medical or surgical treatment for particular types of illnesses, disorders or injuries; giving advice on and applying preventive medicine methods and treatments. Also included: general gynaecologists or other specialists who may in some countries be called 'general' but who fit the above definition.

Consultation: a visit to a doctor's office or hospital emergency department, or a consultation by telephone, videoconference (Skype, Teams etc.) or e-mail. Only consultations on the respondent's own behalf are taken into account, meaning contacts centred on the respondent's own health.

Included:

- Consultations of paediatricians, obstetricians and gynaecologists, ophthalmologists or psychiatrists
- Visits to emergency departments (meaning hospital wards for emergency care)
- Hospital out-patient visits/visits to out-patient specialised departments
- Visits to a medical or surgical specialist (except a family medicine specialist) in foreign countries, e.g. during vacations abroad

Excluded:

- Contacts with a nurse on behalf of a medical or surgical specialist, for instance to receive a receipt; visits for prescribed laboratory tests or prescribed and scheduled treatment procedures (e.g. injections)
- Visits to general practitioners or dentists/stomatologists/dental hygienists/orthodontists
- Contacts with doctors during hospitalisation as an in-patient or out-patient
- Telephone contacts (even with a doctor) without a consultation (for example just to arrange an appointment with a doctor or renew a prescription for treatment of a chronic illness)
- Visits for treatment of the illness or health of other people, such as children or elderly relatives
- Medical contacts with a family medicine specialist

• PH110A: Body mass index (BMI) 1 WEIGHT

This variable is important for calculating body mass index (BMI). This is a measure of a person's weight relative to their height that correlates closely with body fat, used as a measure of obesity. It is calculated as a person's weight in kilograms divided by the square of their height (in metres):

BMI = weight (kg)/[height * height] (m²)

Weight refers to weight without clothes or shoes. For pregnant women, this means their weight before pregnancy.

BMI is arrived at using two questions about a respondent's height and weight.

This is a standard way in surveys of measuring BMI dimensions together with the height variable.

• PH110B: Body mass index (BMI) 2 HEIGHT

This variable is important for calculating body mass index (BMI). This is a measure of a person's weight relative to their height that correlates closely with body fat, used as a measure of obesity. It is calculated as a person's weight in kilograms divided by the square of their height (in metres):

BMI = weight (kg)/[height * height] (m²)

Height refers to body length measured without wearing shoes.

BMI is arrived at using two questions about a respondent's height and weight.

This is a standard way in surveys of measuring BMI dimensions together with the weight variable.

• PH122: Type of physical activity when working

The variable concerns the level of work-related physical activity – working tasks according to different levels of physical effort describing what people do when they are working (PL032=1). The questions are asked even if the respondent does not define himself as active (unemployed, retired, housewife and other inactive individuals). Only in cases where the respondent indicated that he could not perform any work tasks, for example due to disability, illness, etc., does the interviewer mark answer 5 "Does not perform any work-related activities".

Working: refers to tasks performed as a part of an economic activity (PL032=1).

Mostly sitting or mostly standing: refers to working tasks involving light physical effort, mostly sitting or standing. Only standing activities that do not involve extra physical effort should be included.

Examples:

Sitting at work: light office work, deskwork, reading, writing, drawing, using a computer, talking or talking on the phone, studying, driving a car or truck, etc.

Standing at work not involving extra physical effort: teaching, selling bakery products, hair styling, directing traffic etc.

Mostly walking or tasks requiring moderate physical effort: refers to working tasks involving mostly walking or moderate physical effort.

Examples:

- Walking at work: delivering letters, carrying light loads, watering the lawn or garden, etc.
- **Tasks requiring moderate physical effort:** electrical work, plumbing, automobile repairs, machine tooling, tapping, drilling, house painting, etc.

Mostly heavy labour or physically demanding work: refers to working tasks requiring heavy physical effort.

Examples:

 using heavy power tools, heavy construction work, mining, carrying heavy loads, loading, stacking or chopping wood, clearing land, shovelling or digging, working with a spade, filling gardens, etc.

• PH132: Frequency of physical activities (excluding working)

The variable concerns the total days in a typical week spent on sports, fitness or recreational (leisure) physical activity. Only activities that cause at least a small increase in breathing or heart rate (i.e. at least moderately demanding physical activities) and are performed for at least 10 minutes continuously (i.e. without interruption) are included. Work-related activities (PL032=1) are excluded and should be recorded in PH122. Physically active transportation/commuting activities are not the primary focus of the variable but are in general included. This is because it could be difficult for respondents to separate commuting from sports activities in the absence of specific questions on commuting activities as suggested in the module on measuring physical activities in the European Health Interview Survey. As such the variable provides broad coverage of all non-work-related physical activities. **Sports:** refers to structured and repetitive physical activity that usually requires some skills. Sports are often physical activities, competitive or in the form of a game.

Examples: ball games, athletics, competitive bicycling, running, swimming, etc.

Fitness: refers to the act or process of retaining or improving physical fitness. Fitness often relates to physical exercise.

Examples: endurance training, strength exercise, flexibility training, etc.

Recreational (leisure) physical activity: refers to the act or process of regenerating oneself by performing physical activities that cause at least a small increase in breathing or heart rate. 'Recreational activities' are physical activities performed in leisure time.

At least 10 minutes continuously: refers to an activity (brisk walking, ball games or jogging) performed for at least 10 minutes at a time without interruption.

Examples: nordic walking, brisk walking, ball games, jogging, bicycling, swimming, aerobics, rowing, badminton, etc.

Transport physical activity (commuting activity): refers to activities of getting to and from places. Travelling for long journeys (irregular travelling) are not to be included here.

Examples: walking or cycling from home to work/school and back home, from work to a market, from a market to home.

• PH142: Frequency of eating fruit (excluding any juice)

The variable concerns the frequency of eating fruits (juice excluded).

The fruits can be fresh or frozen, cut into small pieces or mashed (puréed). Canned or dried fruits are included.

All fruit juices are excluded and should not be considered fruit.

The reference period is a typical week in a given season. It refers to a 'typical' 7-day week, including weekdays and weekends in a given season (the season of the interview).

The variable has been adapted from the European Health Interview Survey.

• PH152: Frequency of eating vegetables or salad (excluding any juice)

The variable concerns the frequency of eating vegetables or salad (potatoes, soups and juice excluded).

Fresh or frozen vegetables are included. They may be cut into small pieces or mashed (puréed). Canned vegetables should be included. Legumes (beans, lentils) and vegetable dishes (cooked as well as cold) should be included. Excluded are any food products including ingredients other than vegetables like vegetable pies, soups (cold or warm) or any other cooked meal with ingredients other than vegetables.

All vegetable juices are excluded and should not be considered vegetables.

Potatoes and similar starchy foods, such as yam, plantain and cassava, which are carbohydrates and are included in the bread and cereals food group, are excluded. These foods cannot be counted as a daily portion of vegetables.

The reference period is a typical week in a given season. It refers to a 'typical' 7-day week, including weekdays and weekends in a given season (the season of the interview).

The variable has been adapted from the European Health Interview Survey.

• PH171 Frequency of tobacco use (including electronic cigarettes or similar electronic devices)

The variable concerns the occurrence of current use of tobacco and related products. Related products usually contain nicotine, which is the main active substance of tobacco (highly addictive).

Included:

- Smoking of manufactured cigarettes (but also hand-rolled cigarettes, cigars, pipes, etc.) is historically the most common form of tobacco use. Similarly, the tobacco products, which are chewed or sniffed, should be included. Recently, a number of new products types emerged on the market, such as e-cigarettes, nicotine pouches or heated tobacco products.
- Electronic cigarettes, e-cigarettes or electronic devices (e-shisha, e-pipe or e-hookah) are handheld electronic devices that allow for the consumption of nicotine recreationally, in the absence of tobacco, by the production of a vapour/aerosol. E-liquids are mainly composed of nicotine, propylene glycol, glycerine and flavourings. However, not all e-liquids contain nicotine. Nicotine pouches are normally presented in sachets which contain nicotine, but no tobacco, and flavourings.
- Heated tobacco products contain tobacco that is heated without reaching ignition to produce a smoke/vapour containing nicotine and other chemicals, which is then inhaled by users, e.g. tobacco sticks or capsules heated by devices.

Excluded:

- Nicotine products which are considered medicines (e.g. nicotine gum or nicotine patch), should not be considered.

• PH180: Frequency of consumption of an alcoholic drink of any kind

The variable concerns the overall frequency of alcohol intake during the last 12 months. It makes it possible to ascertain a person's current drinking status and the frequency of their drinking.

The term **'alcoholic drink'** refers to all drinks that contain 'alcohol' (or more specifically 'ethanol'), regardless of the kind of drink (strong or light beer, wine, spirits, etc.), or the quantity consumed.

• PH101: Difficulty in seeing, even when wearing glasses or contact lenses

The variable assesses functional vision limitations of any kind even when wearing glasses (if the respondent wears glasses), i.e., to assess the respondent's functioning visual capacity, whatever the reasons for the limitations (born with them, disease, accident, ageing, etc.).

Seeing: refers to an individual's using their eyes and visual capacity in order to perceive or observe what is happening around them.

Visual difficulties: a spectrum of problems seeing including dimensions of near and far vision, night blindness and monocular vision. The difficulty can concern seeing out of one eye or a person's ability to see only directly in front of him/her, but not to the side.

The **use of technical devices/visual aids** (glasses and contact lenses) must be taken into account when assessing one's own capacity, i.e. visual capacity should be assessed with the assistance of any device. 'Even if wearing glasses' refers to the respondent's difficulty seeing with their own glasses if they have and use them. It does NOT refer to what their visual capacity would be if other or better glasses were provided or available.

• PH111: Difficulty in hearing, even when using a hearing aid

The variable assesses functional hearing limitations of any kind even if using a hearing aid (if they wear a hearing aid), i.e. to assess a person's functioning hearing capacity whatever the reasons for the limitations (born with them, disease, accident, ageing, etc.).

Hearing: refers to an individual's using their ears and auditory (or hearing) capacity in order to know what is being said to them or the sounds of activities, including dangerous ones, taking place around them.

Hearing difficulties: a range of problems that affect some specific aspects of hearing function: the perception of loudness and pitch, the discrimination of speech versus background noise, and the localisation of sounds (distinguishing sounds from different sources). Background noise is a detractor for hearing and it becomes worse with increasing levels of hearing loss. The difficulty can be with hearing in one ear or both.

The **use of technical devices/aids:** to be taken into account when assessing one's own hearing capacity, i.e. hearing capacity should be assessed with the assistance of any device. In this case, hearing aids (including implants) are essentially considered 'within-the-skin' aids, meaning they are independent of external factors such as the physical or social environment. People who always use hearing aids to enhance their hearing or correct problems would have difficulty responding about their hearing function without these aids. Moreover, given the omnipresence and effectiveness of such aids, it stands to reason to not consider people whose hearing has been corrected by the aids as having a functional limitation.

• PH121: Difficulty in walking or climbing steps

The variable assesses functional limitations in getting around on foot, i.e. to assess the respondent's functioning mobility whatever the reasons for the limitations. There may be a variety of reasons: health conditions or impairments (spinal cord injuries, chronic diseases such as rheumatoid arthritis, as well as amputations or malformations), balance problems or vertigo. The variable refers to the degree of difficulty the respondent has walking or climbing steps.

Walking: refers to a person's using their legs to propel themselves over the ground in order to get from one point to another. The capacity to walk should be understood to mean the capacity to walk without the assistance of any device (wheelchair, crutches, walker etc.) or other person/people. If such assistance is needed, this means that the respondent has difficulty walking.

Climbing steps: refers to walking up or down stairs.

Walking or climbing steps difficulties cover a variety of problems with mobility including:

- problems walking short (100 metres) or long distances (500 metres),
- problems walking up or down steps,
- not being able to walk any distance without stopping to rest,
- not being able to walk without the help of some type of device,
- not being able to stand even for a short period of time.

Difficulties resulting from impairments in balance, endurance or other non-musculoskeletal systems are included. Any difficulty walking (whether on flat land or up or down steps) is to be included.

The capacity to walk should be assessed without the assistance of any device or person/people. If such assistance is needed, the respondent has difficulty walking. Holding someone's arm is regarded as receiving assistance. Technical devices/ walking aids are, for example, canes or walking sticks, walkers or Zimmer frames, crutches or wheelchairs. As aid should be also considered all shoes which were recommended by a medical specialist in order to facilitate the mobility of the person. Some aids, such as a prosthesis or artificial leg, depending on how they are used and whether or not they can be considered an integral part of body, can be considered within-the-skin, and therefore not walking, aids. In general, handrails and bannisters are not considered walking or climbing aids either.

The variable assesses limitations in the physical act of walking, not limitations in walking due to other functioning problems. For example, if the reason for a blind person's using a guide dog, stick or other walking aid or assistance is limited to seeing, the guide dog, stick or other aid or assistance should not be seen as an aid. So even when using a walking stick or relying on a guide dog, this person should not be seen as having walking difficulties.

• PH131: Difficulty in remembering or concentrating

The variable assesses functional memory and concentration limitations, i.e. the respondent's functioning cognitive capacity whatever the reasons for the limitations (born with them, disease, accident, ageing, etc.). The concept of the variable refers to their degree of difficulty remembering or concentrating.

Remembering: refers to a person's using their memory capacity in order to recall what has happened around them. This means bringing to mind or thinking again about something that has taken place in the recent or distant past. In the case of young people, remembering is often associated with storing facts learned at school and being able to recall them when needed.

Concentrating: refers to a person's using their mental ability to accomplish a task such as reading, calculating numbers or learning something. It involves focusing on the task at hand in order to complete it. It is the act of giving one's full attention to one subject or focusing without distraction on one thing.

Difficulties remembering or concentrating: covers a variety of problems with cognitive functions including a person's having difficulty finding their way around or not being able to concentrate on what they're doing, or forgetting where they are or what month it is. A person who has cognitive difficulties may not remember what someone has just said to them or seem confused about or frightened by many things. Any difficulty should be taken into account that a person has remembering, concentrating or understanding what is going on around them and that the person considers problematic. However, not to be taken into account are difficulties remembering or concentrating because of common everyday situations such as a high workload or stress, or as a result of substance abuse.

• PH141: Difficulty (with self-care such as) washing all over or dressing

The variable assesses the respondent's functional self-care limitations, i.e. their capacity to take care of themselves whatever the reasons for the limitations (born with them, disease, accident, ageing, etc.). The concept of the variable refers to their degree of difficulty in taking care of themselves independently in doing the list of essential daily self-care activities.

Self-care includes performing independently and without help basic daily activities.

Washing and dressing are daily occurrences that are considered basic, universal activities.

Without help means taking care of oneself without any help from another person/other people, the use of technical aids or housing adaptations.

Dressing and undressing: refer to all aspects of getting clothes from closets, storage areas or drawers, putting clothing or garments on the upper and lower body, including the feet if culturally appropriate, closing buttons, tying knots, zipping, removing and fastening all clothing and tying shoe laces, etc. If the respondent has a different degree of difficulty in performing dressing and undressing activities, the interviewer should record the answer for the activity that is most difficult for the respondent.

Washing all over: refers to bathing or showering, the process of cleaning one's entire body (usually with soap and water) in the usual culture-specific manner; getting in and out of the shower or bathtub; cleaning hair and feet; drying off; gathering items for bathing such as soap or shampoo, a wash cloth, or water etc. If the respondent has a different degree of difficulty in performing specific activities, the interviewer should record the answer for the activity that is most difficult for the respondent. Temporary difficulties should not be taken into account.

• PH151: Difficulty in communicating (using usual language, for example understanding or being understood by others)

The variable assesses functional limitations in understanding or being understood by others, i.e. the respondent's functioning capacity for communication whatever the reasons for the limitations (born with them, disease, accident, ageing, etc.). The concept of the variable refers to the respondent's degree of difficulty making themselves understood, or problems they have understanding other people when they speak or try to communicate in other ways. Difficulty understanding or being understood due to non-native or unfamiliar language is NOT included.

The purpose is to identify people who have difficulty talking, listening to or understanding speech using a language they have in common with their interlocutors (including sign language, voice exchange or writing) to the extent that it hinders them in making themselves understood by others or understanding others.

Communicating: refers to a person's exchanging information or ideas with other people through the use of language.

Communication difficulties: these may involve mechanical problems such as a hearing or speech impediment, or be related to the ability of the mind to interpret sounds or recognise words, or to reproduce what it knows using words or other ways of communicating.

Temporary difficulties should not be considered.