

<i>ECHIM Indicator name</i>	C) Determinants of health 49. Consumption of fruits
<i>Definition</i>	Proportion of people reporting to eat fruits (excluding juice) at least once a day.
<i>Calculation</i>	Percentage of people reporting to eat fruits (excluding juice) at least once a day, derived from EHIS question FV.1. How often do you eat fruits (excluding juice)? 1. Twice or more a day / 2. Once a day / 3. Less than once a day but at least 4 times a week / 4. Less than 4 times a week, but at least once a week / 5. Less than once a week / 6. Never (answering categories 1 and 2 should be added for the calculation of this indicator). EHIS data will not be age standardized.
<i>Relevant dimensions and subgroups</i>	- Calendar year - Country - Sex - Age group (15-24; 25-64; 65+) - Socio-economic status (educational level. ISCED 3 aggregated groups: 0-2; 3+4; 5+6)
<i>Preferred data type and data source</i>	Preferred data type: HIS Preferred source: Eurostat (EHIS)
<i>Data availability</i>	BE, BG, CZ, DE, EE, EL, ES, FR, IT, CY, LV, HU, MT, AT, PL, RO, SI, SK, CH, NO and TR conducted a first wave of EHIS between 2006 and 2010. It is noted that not in all of these countries a full scale survey was carried out; in some only specific modules were applied, in others the full questionnaire was applied in a small pilot sample. It is expected that all EU Member States will conduct EHIS in the second wave, which is planned for 2014. The results of the first wave are expected to be published in two stages, 11 countries in October 2010, the remaining countries in April 2011. EHIS data are available by sex, 8 age groups (15-24/25-34/35-44/45-54/55-64/65-74/75-84/85+) and ISCED groups.
<i>Data periodicity</i>	EHIS will be conducted once every 5 years. The first wave took place in 2007/2010 (with some derogations in 2006) and the second wave is planned for 2014.
<i>Rationale</i>	Important health promoting food item. The consumption of fruits and vegetables is a good proxy for a healthy diet. Fruits and vegetables are a dietary protective factor for tobacco related and several other cancers as well as for cardiovascular disease. Use declining in many countries. Amenable to interventions.
<i>Remarks</i>	- According to current plans, Eurostat will probably not age-standardize EHIS data. For comparability reasons ECHIM would however prefer age-standardized data. - The above definition and calculation are based on the first version of the EHIS questionnaire, as used in the first EHIS wave (2007/2010). The EHIS questionnaire will be revised, hence adaptations to the EHIS question underlying this indicator may occur in the second wave (planned for 2014). - The legal basis for EHIS is regulation (EC) No 1338/2008 of the European Parliament and of the Council of 16 December 2008 on Community statistics on public health and health and safety at work. This is an umbrella regulation. Specific implementing acts will define the details of the statistics Member States have to deliver to Eurostat. An implementing act on EHIS is expected to come into force in 2014.
<i>References</i>	- EHIS standard questionnaire (version of 11/2006, used in first wave): http://ec.europa.eu/health/ph_information/implement/wp/systems/docs/ev_20070315_ehis_en.pdf - EHIS 2007-2008 Methodology: Information from CIRCA : http://circa.europa.eu/Public/irc/dsis/health/library?l=/methodologiessandsdatasc/healthsinteryiewssurvey/2007-2008_methodology&vm=detailed&sb=Title - Regulation (EC) No 1338/2008 of the European Parliament and of the Council of 16 December 2008 on Community statistics on public health and health and safety at work: http://epp.eurostat.ec.europa.eu/portal/page/portal/health/documents/Regulation%20no%201338-2008%2016Dec2008%20OJL354%20p.70.pdf
<i>Work to do</i>	- Monitor EHIS/Eurostat developments

