

HEALTHY IRELAND

# Outcomes Framework



The national framework for action to improve the health and wellbeing of the people in Ireland.



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## Introduction – Healthy Ireland

**Healthy Ireland, A Framework for Improved Health and Wellbeing 2013–2025, is the national framework for action to improve the health and wellbeing of the people in Ireland.**

Healthy Ireland was developed in response to a number of significant public health challenges, including significant projected increases in levels of preventable chronic disease and growing health inequalities.

Healthy Ireland asserts that population health and wellbeing is critical for our social, economic and cultural progress, and our overall quality of life. It recognises the requirement for a ‘whole of Government’ approach to addressing the social determinants and predictors of health and wellbeing, many of which fall outside the health sector, e.g. housing, transportation, education, workplaces and environment along with an individual’s socio-economic status.

Healthy Ireland also provides for an inclusive, intersectoral approach to improve population health and wellbeing by shifting our emphasis to prevention, and to empowering individuals and communities to take more responsibility for their health and wellbeing.

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## Outcomes Framework – Overview

**The development of an Outcomes Framework to monitor and drive the achievement of Healthy Ireland’s targets and performance indicators is a key action identified in the Healthy Ireland Framework.**

The Outcomes Framework aims to provide a structured approach to collect and report relevant and appropriate data which can be used to build awareness of these social determinants of health, to support assessment of the impact of policies on the agreed outcomes, and to monitor progress on the whole-of-government response needed to improve health and wellbeing.

The Healthy Ireland Outcomes Framework is based on a conceptual model for health and wellbeing which incorporates health status, health outcomes and determinants of health and wellbeing across the life course.

It acknowledges the interconnectedness and interdependencies between what we are trying to achieve in health and other policy areas such as education, employment, transport, environment, planning and social protection, where there are significant shared agendas. The range of indicators selected to support measurement of these outcomes work together to create an overall picture of health and wellbeing in Ireland.

## Development of the Outcomes Framework

**The Outcomes Framework was developed through an iterative and consultative process involving a range of Government Departments and key stakeholder organisations.**

The methodology used to develop the indicator set involved a number of phases, including an initial phase to develop a model for wider stakeholder consultation, a literature review and collation of relevant data and datasets, and consultation with stakeholders, including cross-sectoral workshops in 2015 and 2016. The process also involved particular engagement and input into the contemporaneous development of indicator sets under both the national policy framework for children and young people, Better Outcomes, Brighter Futures, and the Healthy and Positive Ageing Initiative under the National Positive Ageing Strategy, to ensure that a life course approach was reflected.

The indicator selection process was informed by the concurrent development of a number of key strategies and action plans under the Healthy Ireland umbrella, and in other Government departments. The process was also informed by international agencies such as the EU Commission, the World Health Organization and the Organisation for Economic and Co-operation and Development, as well as taking into account existing national and international indicator sets such as the European Core Health Indicators. The indicators also reflect the United Nations’ Sustainable Development Goals and are aligned with the World Health Organization’s Global Monitoring Framework for the Prevention and Control of Non-communicable Diseases.

The indicators were evaluated for inclusion on the basis of a range of criteria which included:

- Their use in the whole-of-government implementation of Healthy Ireland
- Their use in policy development or implementation
- Their person centricity and applicability across the life course
- Their relevance to a wide audience about the determinants such as education, lifestyle behaviours, economic opportunities
- Their alignment with the European Core Health Indicators, the World Health Organization’s Global Monitoring Framework for the Prevention and Control of Noncommunicable Diseases and the WHO Health 2020 indicators

## High Level Outcomes

The Healthy Ireland Outcomes Framework expresses four high-level outcomes which reflect the broad determinants of health and wellbeing across the life course.

They also reflect and reinforce the Healthy Ireland vision and goals.

- Responsibility is shared in addressing the social determinants of health and wellbeing
- People of all ages and abilities participate in education, work and leisure activities to their full potential
- Children are active and healthy, with positive physical and mental wellbeing
- We live longer healthier lives in safe, healthy environments in resilient communities

The outcomes based approach focuses on actual results or progress achieved, rather than inputs and outputs. The outcomes are supported by indicators which work together to create an overall picture of health and wellbeing and to provide a holistic view of the impact of current policies.

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## Indicator Set

The indicators are grouped into three broad areas, Health Status, Health Outcomes and Social Determinants.

For each indicator an appropriate measure is selected to allow progress to be tracked and to provide this holistic view of the impact of current policies. The indicators will be disaggregated where possible in terms of age, gender, socio-economic status and geography and will be subject to comparison with national and international data. In keeping with a life-course approach, a small, select number of indicators have been drawn from the indicator sets developed to monitor progress on both the Better Outcomes, Brighter Futures policy framework, and the Healthy and Positive Ageing Initiative.

## Reporting on Healthy Ireland Outcomes

Following the publication of this Outcomes Framework, a process with appropriate cross-sectoral governance will be constituted to oversee its ongoing development and use.

This work will include exploring how best to use the Outcomes Framework to underpin Health and Wellbeing Impact Assessments of relevant intersectoral policy areas, and to support evaluation and monitoring of impacts of Government policies and programmes on the Healthy Ireland outcomes. These policy areas will be identified and selected with reference to the wider social policy agenda and Project Ireland 2040, targeting areas of policy with the greatest impact on quality of life and which seek to address health inequalities.

An annual report on the Healthy Ireland Outcomes Framework will be prepared and presented to Government.

# Healthy Ireland Outcomes Framework

## Indicator Set 2018

### Health Status

#### Preventative Measures

- Breast Cancer Screening Rate
- Cervical Cancer Screening Rate
- Measles Mumps and Rubella (MMR) Immunisation Rate
- Meningitis C Immunisation Rate

#### Lifestyle and Behaviour Risks

- Overweight and Obesity
- Physical Activity Levels
- Current Smoking Rate
- Harmful Use of Alcohol
- Breastfeeding Rates
- Condom use (young people)
- Screen time (young people)

### Health Outcomes

#### Mortality and Morbidity

- Healthy Life Years
- Premature Non-Communicable Disease Mortality
- Cancer Incidence

#### Wellbeing Factors

- Self-Perceived Health
- Positive Mental Health
- Probable Mental Health Problem
- Moderate and Severe Depression (age 50+)
- Social and Cultural Participation (age 50+)
- Safety and Security (age 50+)
- Feeling Safe (young people)

### Social Determinants

#### Environmental Factors

- Air Quality Index
- Water Quality
- Radon

#### Socio-Economic Factors

- Long-term unemployment
- Jobless Households
- Education: Retention
- Education: Attainment
- Literacy and Numeracy
- Consistent Poverty Rate
- Inequality of Income

# Health Status Indicators

Definitions, descriptions and data sources



## Preventative Measures

### Breast Cancer Screening Rate

This indicator measures the percentage uptake of breast screening by eligible women in the population.

Screening for cancer helps prevent significant illness and death by detecting cancer at an earlier and therefore more treatable stage. "BreastCheck" invites women between the ages of 50 and 66 years for a mammogram every two years.

Sources: National Screening Service; OECD Health Statistics

### Cervical Cancer Screening Rate

This indicator measures the cancer screening rates for cervical cancer, i.e. the proportion of the eligible population in Ireland who had a satisfactory smear test within a five year time period.

Cervical cells change slowly and take many years to develop into cancer cells, making cervical cancer a preventable disease and having regular smear tests to pick up any early cell changes (precancerous growths) can significantly reduce the risk of cervical cancer.

Source: National Screening Service

### Measles Mumps and Rubella (MMR) Immunisation Rate

This indicator measures the percentage of children 24 months of age who have received the first dose of the MMR (measles, mumps and rubella) vaccine.

Immunisation is one of the most powerful and cost-effective forms of primary prevention. Two doses of MMR vaccine are given, the first dose at 12 months and the second dose at 4–5 years of age.

Source: Health Protection Surveillance Centre

### Meningitis C Immunisation Rate

This indicator measures the percentage of children 24 months of age who have received the second dose of the Men C (Meningitis C) vaccine.

Men C is an infectious bacteria that can cause meningitis or septicaemia (blood infection), or both. The current vaccine schedule in Ireland is three doses of Men C vaccine at 6 months, 13 months of age and in the first year of secondary school.<sup>1</sup>

Source: Health Protection Surveillance Centre

<sup>1</sup>Prior to 2017 the dosing schedule was three doses of Men C vaccine at 4 months, 6 months and 13 months of age.

# Lifestyle and Behaviour Risks

## Overweight and Obesity

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This indicator measures the proportion of adults who are overweight (BMI  $\geq 25$  kg/m<sup>2</sup>) or obese (BMI  $\geq 30$  kg/m<sup>2</sup>).

Excessive body weight predisposes individuals to various diseases, particularly cardiovascular diseases, diabetes mellitus type 2, sleep apnoea and osteoarthritis. Many of the risks diminish with weight loss.

Source: Healthy Ireland Survey

## Physical Activity Levels

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This indicator measures the percentages of adults and children meeting physical activity guidelines.

Relative physical inactivity, usually together with unhealthy food habits, is associated with the development of many of the major non-communicable diseases in society, such as cardiovascular disease, some cancers, obesity, diabetes and osteoporosis.

Sources: Healthy Ireland Survey; The Children's Sport Participation and Physical Activity Study (CSPPA)

## Current Smoking Rate

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This indicator measures the proportion of people who smoke daily or occasionally.

Tobacco use is one of the leading preventable causes of death and disease in society. It is a major risk factor for diseases of the heart and blood vessels, chronic bronchitis and emphysema, cancers and other diseases. Smoking is a modifiable lifestyle risk factor; effective tobacco control measures can reduce the occurrence of smoking in the population.

Source: Healthy Ireland Survey

## Harmful Use of Alcohol

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This indicator measures age-standardised prevalence of heavy episodic drinking, defined as drinking 6 or more standard drinks in a single drinking occasion.

Alcohol consumption is an important determinant of health and wellbeing. Overall, there are causal relationships between alcohol consumption and over 60 types of disease and injury.

Source: Healthy Ireland Survey

## Breastfeeding Rates

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This indicator measures breastfeeding percentage rates (exclusively and non-exclusively) at first Public Health Nurse visit and at the Public Health Nurse follow-up visit at three months.

Breastfeeding is an important determinant of the health of both mother and child e.g. in terms of nutrition and infections (child), and weight gain and risk for breast cancer (mother).

Source: Health Service Executive

## Condom use (young people)

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This indicator measures the percentage of young people (age 15–17 and age 17–24) who report ever having sex and using a condom on last occasion of sex.

Condom use prevents Sexually Transmitted Infections and crisis pregnancy. The practice of safe sex by young people indicates the impact of education programmes and the accessibility of contraception.

Sources: Healthy Ireland Survey (17–24); Health Behaviour in School Aged Children (15–17). Indicator taken from: Department of Children and Youth Affairs (2017) An Indicator Set for Better Outcomes Brighter Futures, The National Policy Framework for Children and Young People 2014–2020.

## Screen time (young people)

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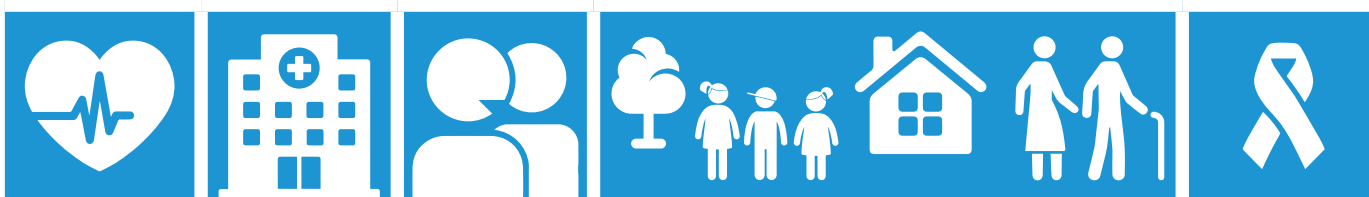
This indicator measures the percentage of students (age 15) using the internet for more than six hours per day outside of school, during school days.

Problematic screen time of more than six hours a day outside of school increases sedentary behaviour which can cause overweight and obesity, sleep problems, musculoskeletal pain and depression.

Sources: Programme for International Student Assessment. Indicator taken from: Department of Children and Youth Affairs (2017) An Indicator Set for Better Outcomes Brighter Futures, The National Policy Framework for Children and Young People 2014–2020.

# Health Outcomes Indicators

Definitions, descriptions and data sources



## Mortality and Morbidity

### Healthy Life Years

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The Healthy Life Years indicator (also called disability-free life expectancy) measures the average number of remaining years that a person of a certain age can expect to live without disability. It is calculated by Eurostat from national mortality statistics and EU-SILC (Survey on Income and Living Conditions) data on activity limitations.

It is used to distinguish between years of life free of any activity limitation and years experienced with at least one activity limitation and focuses on the quality of life spent in a healthy state rather than the “quantity” of life measured by life expectancy.

Source: Eurostat

### Premature Non-Communicable Disease Mortality

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This indicator measures the unconditional probability of dying between the ages of 30 and 70 from four major non-communicable diseases: cardiovascular diseases, cancer, diabetes or chronic respiratory diseases, in terms of potential years of life lost (PYLL).

NCDs are the leading cause of death in the world. Premature deaths from NCDs can be prevented by changed policies and active engagement not only in health but also in other sectors.

Source: Department of Health Public Health Information System (PHIS)

### Cancer Incidence

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This indicator measures total cancer incidence and incidence of the most important cancers, per 100,000 of population, in a given year. Note: This indicator only measures incidence and not mortality.

Cancer is related to a high disease burden in Europe and there are (often) prevention possibilities. Cancer monitoring is therefore an important public health issue.

Source: National Cancer Registry Ireland



# Wellbeing Factors

## Self-Perceived Health

This indicator measures the proportion of persons who assess their health to be very good or good, based on EU-SILC questions on self-perceived health – the same question used in the Healthy Ireland Survey and European Health Interview Survey.

Self-perceived health status is not a substitute for more objective indicators but rather complements these measures. Studies have shown perceived health to be a good predictor of subsequent mortality.

Source: Healthy Ireland Survey and Central Statistics Office - Census 2016

## Positive Mental Health

This indicator measures an individual's level of positive mental health based on Energy and Vitality Index (EVI) scores (from the RAND SF-36 questionnaire).

Positive mental health is an important part of our overall wellbeing, this is described as feeling full of life, calm, peaceful, having lots of energy and being generally happy.

Source: Healthy Ireland Survey

## Probable Mental Health Problem

This indicator measures negative mental health using the five item Mental Health Index-5 (MHI-5) (also called 'non-specific psychological distress') from the RAND SF-36 questionnaire, which measures the occurrence and extent of psychological distress (usually of anxiety and depression related distress states) during the past four weeks.

The probable presence of a mental health problem is a strong indicator of a poor degree of overall wellbeing.

Source: Healthy Ireland Survey

## Moderate and Severe Depression (age 50+)

This indicator measures the percentage of people aged 50+ with moderate and severe levels of depression. Categories are based on the following cut-offs for the Centre for Epidemiological Studies-Depression (CES-D) scale: Moderate = 8-15 symptoms; Severe = 16 or more symptoms.

Depression is common in later life, particularly in people with poor physical health. In the acute hospital setting this is associated with poor outcomes, increased length of stay and compromised care.

Sources: The Irish Longitudinal Study on Ageing; The Healthy and Positive Ageing Initiative National Indicator Set (2016)

## Social and Cultural Participation (Age 50+)

This indicator measures the percentage of people aged 50+ who engage in one or more social leisure activity at least once a week. Includes participation in any of the following social leisure activities: goes out to films, plays or concerts; attend classes and lectures; playing cards, bingo or games in general; and/or eats out of the house.

Engagement in the arts, culture and sports at any age is good for both mental wellbeing and physical health.

Sources: The Irish Longitudinal Study on Ageing; The Healthy and Positive Ageing Initiative National Indicator Set (2016)

## Safety and Security (Age 50+)

This indicator measures the percentage of people aged 50+ who feel that it is safe to walk alone after dark in their local area. It is defined as a score of 5 or higher on a 7-point Likert scale capturing agreement with "People would be afraid to walk alone in this area after dark," in relation to the area within 20 minutes' walk.

A feeling of safety when out and about or at home is an important factor in sustaining independence and engagement, promoting more physical activity and social interaction within the local area.

Sources: The Irish Longitudinal Study on Ageing; The Healthy and Positive Ageing Initiative National Indicator Set (2016)

## Feeling safe (young people)

This indicator measures percentage of 11–17 year olds who report that they feel safe (always or most of the time) in the area where they live.

Feeling safe relates to the perception of young people of antisocial behaviour and crime in the area that they live in. Not feeling safe can have emotional and physical consequences and limits the ability of the person to enjoy a high quality of life. Children and young people should feel safe within their community and be protected and diverted from being drawn into antisocial and criminal activity.

Sources: Health Behaviour in School Aged Children. Indicator taken from: Department of Children and Youth Affairs (2017) An Indicator Set for Better Outcomes Brighter Futures, The National Policy Framework for Children and Young People 2014–2020.

# Social Determinants Indicators

Definitions, descriptions and data sources



## Environmental Factors

### Air Quality Index

Air quality is measured using the Environmental Protection Agency (EPA) Air Quality Index for Health. Data in the indicator relate to the target and limit values as set in EC legislation.

Urban air pollution is responsible for a substantial burden of disease and death. Very young children, probably including unborn babies, are particularly sensitive to air pollutants. Fine particulates (PM10) can be carried deep into the lungs where they can cause inflammation and a worsening of the condition of people with heart and lung diseases.

Source: Environmental Protection Agency

### Water Quality

Drinking water quality is measured by taking samples and testing the drinking water within an area for various parameters outlined in the European Union Drinking Water Regulations 2014. The legislation specifies the standards (known as parametric values) that must be met to ensure drinking water quality is of an acceptable standard. Irish Water has published drinking water quality results from January 2014 onwards; prior to that the EPA published results.

A safe water supply, hygienic sanitation and good water management are fundamental to health. Water quality is a key measure of protecting the public from threats to health and wellbeing.

Source: Irish Water

### Radon

This indicator addresses exposure to radon. Certain areas of the country, known as High Radon Areas, are more likely to have a high number of homes with excessive levels of radon. The EPA radon map of Ireland shows High Radon Areas. In addition to the map, statistics for the number of homes above the national Reference Level are available for each county in Ireland.

In Ireland, up to 250 cases of lung cancer each year are linked to exposure to radon.

Source: Environmental Protection Agency

# Socio-Economic Factors

## Long-term Unemployment

**This indicator measures the mid-year number of long-term unemployed people (persons who have been unemployed for one year or more) aged 15–74 years as a proportion of the labour force (unemployed and employed persons 15 to 74 years of age).**

This is an important indicator from the view of socio-economic differences in health. Besides other special risks, unemployment is tied with poverty. In particular, long-term unemployment itself has detrimental health effects.

Source: Central Statistics Office – Labour Force Survey

## Jobless Households

**This indicator measures the proportion of total persons aged 18–59 years living in a household where no member of the household is working. (Students aged 18–24 years living in households composed solely of students are excluded.) Household joblessness is distinct from individual unemployment in two ways: it includes other reasons (as well as unemployment) for non-employment such as caring responsibilities, illness or disability and it takes account of whether there are other adults in the household in employment.**

Living in a jobless household tends to be associated with poverty and deprivation, particularly for children. A central tenet of wellbeing is to engage in meaningful activity. In modern society, such engagement or participation can take a number of forms: paid work, unpaid work, education and training, and leisure; all of which are important for individual and societal wellbeing.

Source: Central Statistics Office – Labour Force Survey

## Education: Retention

**This indicator is used to identify schools and school clusters/communities with concentrated levels of educational disadvantage.**

Education is one of the strongest predictors of health: the more schooling people have, the better their health is likely to be. Higher levels of educational attainment are consistently associated with lower death rates. The less schooling people have, the higher their levels of risky health behaviours such as smoking, being overweight, or having a low level of physical activity. Reduced life expectancy and Healthy Life Years is associated with lower levels of education.

Source: Department of Education and Skills

## Education: Attainment

**This indicator measures the percentage of those who have attained each of the different levels of education using the National Framework of Qualifications.**

Higher levels of educational attainment are generally linked to better occupational prospects and higher income for individuals, hence having a positive effect on their quality of life.

Source: Central Statistics Office – Labour Force Survey

## Literacy and Numeracy

**This indicator measures literacy (adjusted) mean scores for adults and numeracy (adjusted) mean scores for adults and is defined as the mean scores of children aged 15 based on the OECD-PISA Scientific Literacy Scale.**

Developing good literacy and numeracy skills, including digital literacy skills, among all children and young people is fundamental to the life chances of each individual and essential to the quality and equity of society.

Source: OECD's Survey of Adult Skills – Programme for the International Assessment of Adult Competencies (carried out by CSO in 2011–2012 on behalf of the Department of Education and Skills)

## Consistent Poverty Rate

**This indicator is comprised of two component indicators: at-risk-of-poverty, which measures individuals whose household income is below 60% of the median, and basic deprivation, which captures individuals lacking 2 or more of 11 basic necessities. A person is in consistent poverty if they are both income poor and deprived.**

Research in Ireland has found that during recessionary times, the consistent poverty indicator is particularly effective in capturing perceived economic stress and risk factors associated with poverty.

Source: Central Statistics Office - Survey on Income and Living Conditions

## Inequality of Income Distribution (S80:S20 Quintile Share Ratio)

**This indicator measures income inequality: the ratio of total income received by 20% of the country's population with the highest income (top quintile) to that received by 20% of the country's population with the lowest income (lowest quintile). This indicator complements the at-risk-of-poverty indicator by providing a measure of the income of the poorest households relative to the richest.**

This is important for tracking social inclusion. Economic deprivation can have a negative effect on health and wellbeing. Children are especially vulnerable.

Source: Central Statistics Office - Survey on Income and Living Conditions

