

# SIMPLE Modules

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## What is already known on this topic

### Problem

- To evaluate effectiveness of policy action, it is essential to increase comparability of data across surveys, age groups, and countries.
- Use of different survey instruments creates a challenge for comparing dietary and physical activity (PA) behaviours and their determinants in pan-European surveillance and monitoring systems<sup>1-3</sup>.

### Solution

- Short and unified questionnaire modules measuring key health indicators.
- To improve and sustain comparability of data across EU surveillance systems, countries and age groups.
- To facilitate evaluation of temporal and regional changes in health behaviours, and their determinants at the population level.



Figure 1. Overview of all SIMPLE modules<sup>4</sup>

## What this study adds

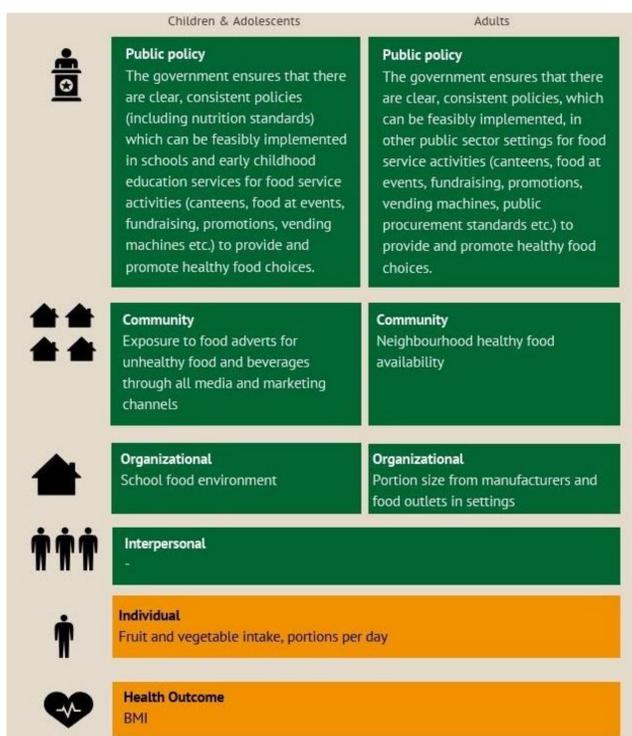


Figure 2. The Food Provision module<sup>4</sup>

### Provision of SIMPLE (Selected Instruments for Multilevel PoLicy and impact Evaluation) Modules (Fig. 1) allowing

- The measurement of indicators of individual PA and dietary behaviour.
- The alignment to determinants of these behaviours from a policy, community and organizational level (Fig. 2).

### Multilevel modules (Fig. 2; green)

- Different variables measuring determinants of behaviour are currently used in EU surveillance systems.
- To evaluate outcomes related to policy actions influencing individual and population behaviour.

### Individual level modules (Fig. 2; orange)

- Starting point for harmonization.
- To be integrated into current survey instruments used by surveillance systems.

Example: Survey question from WHO STEPS for 'Fruit intake':

In a typical week, on how many days do you eat fruit? [days per week]

How many servings of fruit do you eat on one of those days? [servings/ days]

## Recommendations for further steps

- SIMPLE Modules provide first steps towards a harmonised European surveillance and should be implemented in ongoing surveillance systems during a consultative process.
- The modules support a consolidated approach to provide comparable health indicators and the evaluation of population's adherence to health recommendations and the impact of health policies.
- Piloting and stepwise scaling-up of SIMPLE Modules should start in surveillance systems that expressed interest in implementing one or more modules.
- Surveillance systems can introduce the individual level questionnaire items in voluntary modules or in sub-samples, or pilot the instruments in national surveys without discarding existing instruments.
- A methodological competence platform to guide the process and methodological advancement of SIMPLE Modules will be established.
- Further studies investigating validity and reliability of questionnaire items in different age-groups and evaluating their suitability to monitor WHO recommendations are needed.

Scan for further information



### Literature references

<sup>1</sup> Hebestreit, A. et al. (2019). <https://pubmed.ncbi.nlm.nih.gov/30888434/>; <sup>2</sup> Garnica Rosas, L., et al. (2021). <https://pubmed.ncbi.nlm.nih.gov/33794923/>;

<sup>3</sup> Stanley, I. et al. on behalf of the PEN Consortium (2021). European Journal of Public Health. (in press);

<sup>4</sup> Messing S. et al. on behalf of the PEN Consortium (2021). <https://www.jpi-pen.eu/physical-activity-and-diet-simple-modules-overview.html>.