









- I -Explain the need to use "indicators" to measure "health" status
- 2. State the characteristics of health indicators
- 3. List the uses of health indicators
- 4. State with examples the types of health indicators

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Slides.

Doctor's notes.

[Colors index : Important | Golden notes | Note | Slides | Extra] [Editing file | Share note]

"Health Indicators"

What is an indicator?

 \star An indicator acts like a red flag that draws your attention to something that is going on and makes you ask questions such as:

- What does this number mean?
- Why did we get this result?
- Are we getting better or worse over time?
- Are we providing the right care?
- How are we doing in comparison to other countries, institutions, groups, etc?

Definitions:

- * Variables that measure indirectly a health status which can not be measured directly
- \star They are an indication of a given situation;
- \star They are used to compare between areas or population group at a certain time .
- \star They are used to measure changes over a period of time.

HEALTH INDICATORS <u>QUANTIFY</u> THE HEALTH OF THE POPULATION

- Health status is measured indirectly as it is multidimensional and dynamic - Indicators without time are
- pointless. They are used to quantify population

Characteristics of an ideal indicator :

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Doloioblo





	Valid	Relaiable	Sensitive	Specific
	Measures what it is supposed to measure.	Provides same information under different observations & conditions.	Sensitive to changes in the situation.	Reflects changes only in that situation.
An example in our community we are more concerned with road traffic injuries than bacon poisoning .		Relevant	Feasible	
		Relevant to the community needs & problems.	The ability to obtain data when needed	Feasible data is the data easily obtained from surveillance devices .

Ideal indicators are <u>RARE</u> cause health is <u>Multidimensional</u>

Uses: (why we need indicators?)

- ★ health status in a community.Measure
- **★** Compare health status between countries or over time.
- **★** Assessment of health care needs.
- \bigstar Allocation of resources according to needs. ★ Monitoring and evaluation of health services.

Indicators help in deciding how distribute health budget between different cities .

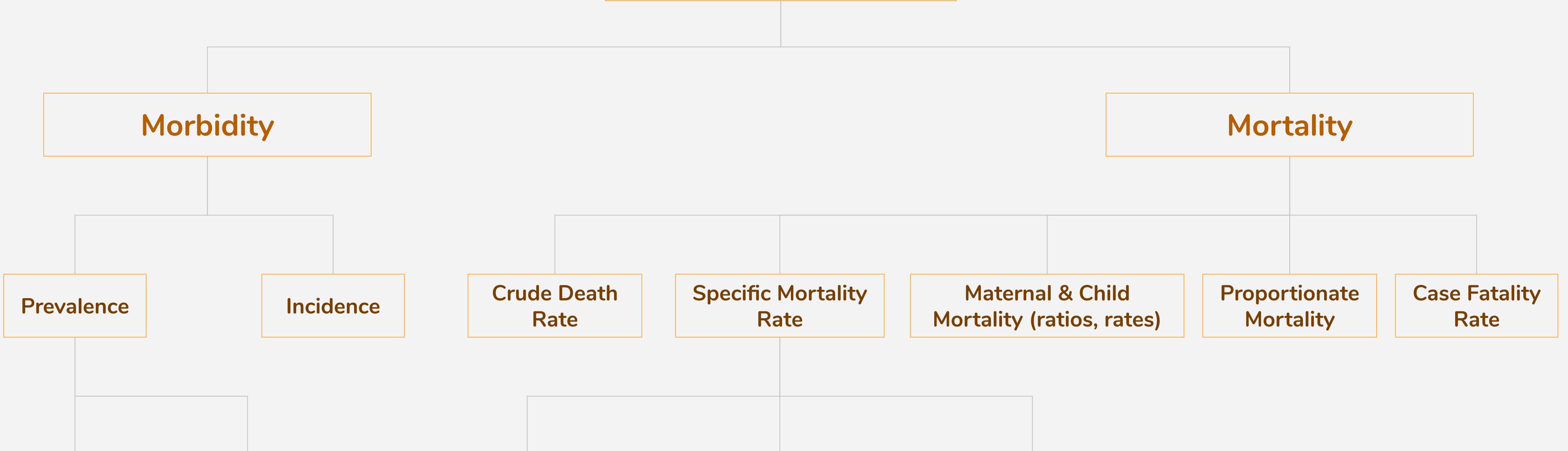


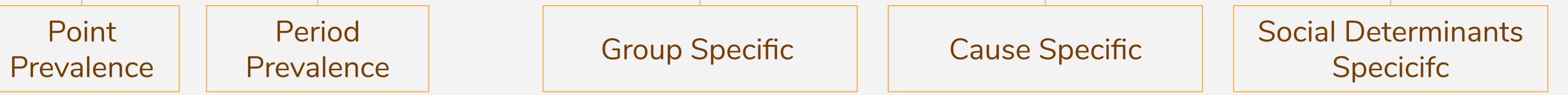
Types:

★ Mortality indicators (crude mortality rate, specific mortality rate, proportionate mortality , case fatality rate, maternal & child mortality)

- ★ Morbidity indicators (incidence, prevalence)
- **Disability indicators** (DALY,QALY,....)
- **H** Nutritional status indicators (anthropometric measurements,...)
- **Health care delivery indicators** (doctor-population ratio, population-bed ratio,.....)
- **t Utilization rates**(bed turnover ratio, vaccine coverage ratio,...)
- ★ Social & mental health indicators (tobacco use, substance abuse, responsible sexual behavior, mental health)
- **t** Environmental indicators (Environmental Quality)
- **★** Socioeconomic indicators (rate of population increase, dependency ratio, literacy rate,....)
- Health policy indicators (GNP spent on healthcare,...)
- **t** Indicators of quality of life
- **to other indicators** (health for all, MDG, SDG,....)

Health Indicators





"Health Indicator Concepts"

Indicators are measurments!

1. Tools of Measurements;

- \star Indicators are <u>measurements of disease magnitude.</u>
- ★ Indicators are <u>expressed in terms</u> of:
 - تناسب Ratio
 - Proportion نسبة
 - o Rate معدل
- \star Clear understanding of the above terms is a <u>MUST</u> for interpretation of indicators.

"We had 400 deaths from Road Traffic Injuries in Riyadh in 2010" <u>So What?</u>

Tool of Measurement	Ratio (simple ratio) البسط ليس جزء من المقام	البسط جزء من المقام Proportion	Rateproportion+ time+ multiplier
Definition	The relationship in size of one measure/variable to another	<u>A specific type of ratio!</u> that relates a part to a whole	<u>A special type of proportion!</u> that measures the occurrence of an event in a <u>population</u> <u>during a given time.</u>
Use	Size of two different variables or quantities	Magnitude of the part of a whole	To allow comparisons
Differentiating Element	The numerator is NOT a component of the denominator.	The numerator is ALWAYS a component of / included in the denominator.	There must be a time dimension and a multiplier (per 1000, per 100,000)
Example	Out of the 400 death, 300 were males and 100 were female. The male to female ratio is 300/100 or 300:100 or 3:1 i.e. there are 3 male deaths for	Out of the 400 deaths, 300 were males i e the proportion of males who	In 2010 population of Riyadh 1,000,000. The mortality rate from RTI in 2010 is (400/1,000,000 X 100,000)= 40 deaths per

every female deaths for

2. Numerator & Denominator:

Numerator Measure of an event	Denominator The group you are interested in studying an event about
 Number of times an event (e.g. death, sickness, births, etc) has occurred in a population during a specified time period. The numerator is always components of (included in) the denominator of proportions and rates The numerator is not a component of (included in the denominator of ratio 	 → Denominators are especially important for rates. → It might be related to: ◆ The population such as mid-year population in a given year ◆ Total events where it's more relevant than than total population. For example, case fatality rate from car injuries, it's more meaningful to have the denominator of 'number of vehicles'.
3. Multipliers (10n / per 100, 1000, 100,000)	Why? As not the whole population drives cars, some use other means of transportation. So its less accurate to include them

75%.

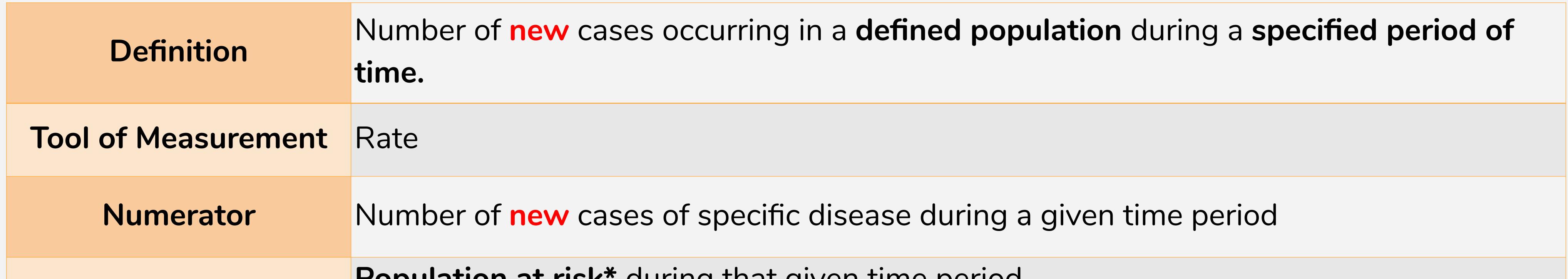
100,000 population in 2010.

Algority of formulae include a multiplier of 100 and most often a multiplier of 1000, 10,000 or even 100,000.

\star A multiplier is used to:

- Indicate how often something occurred per 1000 population or per 100,000 population
- Decrease the use of minute decimal fractions.e.ga mortality rate of 0.000071, huh? This is necessary for common people to understand
- Increase data comprehension (how well we understand the presented data)
- In certain rates, rather than specifying a multiplier such as 1000 or 100,000, you can use 10n so the most appropriate multiplier can be selected to facilitate the data interpretation. In practice its used if you are not sure what is the multiplier used by your fellow statician
 Example: A rate with a numerator of 190,000 and a denominator of 23,000,000 results in a value of 0.00826
 Using a multiplier of 1000: 8.3 per 1000 population
 - Using a multiplier of 10,000: 82.6 per 10,000 population Standarization of population by using Multipliers. is to help in comparisons in rates and to make comprehension of data easier

"Morbidity Indicators" (Incidence)



Denominator	*does not include population that is already infected with the disease		
10n	per 1000		
Time frame	per year (usually a year unless otherwise specified)		
Uses	 Taking action (outbreak), Control disease (outbreak) Research for etiology and pathogenesis Efficacy of therapeutic and preventive measures 		

Number of new cases of enecific

Formula	disease during a given time period	
	Incidence = × 1000	
	Population at-risk during that period	

There are special types of incidence rates such as attack rates (limited time less than year during outbreaks), secondary attack rates, hospital admission rates.

★ Example: In 2010, the number of new cases of influenza in Riyadh region was 5000. The midyear population of Riyadh region during the same year was 3 million.

• Calculate:

5000 / 3000000 x 1000 = 1.67per 1000 per year

Doctor mentioned it should be written as 1.67 new cases of influenza per 1000 population per year.

"It is very important to know how to interpret the results of an indicator/ to express it in the right way; you will be marked on those in OSCE and in MCQs you may have the same result but different interpretation; be careful!!

"Morbidity Indicators" (Prevalnce)

the base prevalence refers to all cases (new & old) existing at a given point in time or over a period of time in a given population.
 Point prevalence is not useful in certain diseases such as seasonal flup because y

 \star Prevalence is a snapshot of the population!

Point prevalence is not useful in certain diseases such as seasonal flu, because you may do the survey in autumn while the flu cases are peak at spring so the prevalence does not really reflect the reality.

"Uses of each indicator are **important** "

Point-Prevalence

DefinitionNumber of all current cases new & old occurring in a defined population at one point of time (a
day, days, or few weeks)

Tool of Measurement Proportion (be careful! **it is a proportion** even when it is called rate)

Numerator	Number of all current cases new & old at a given point of time Since its taken at one point in time		
Denominator	Estimated population at the same given point of time		
10n	Per 100 (always expressed as percentage)		
Time frame	Given point of time		
Uses	 Estimate the magnitude of health, disease and high risk populations, Administrative and planning e.g. hospital beds 		
Formula	Number of all current cases (old and new) of a specified disease existing at a given point in time Estimated population at the same point in time		

Period-Prevalence (less common than point-prevalence)

Definition Number of all current cases new & old occurring in a defined population at a defined pe time (over months or annual)			
Tool of Measurement	Proportion (be careful! it is a proportion even when it is called rate)		
Numerator	Number of all current cases new & old at a a defined period of time		
Denominator	Estimated population at the same a defined period of time		
10n	Per 100 (always expressed as percentage)		
Time frame	Given point of time		
Uses	Estimate the magnitude of health, disease and high risk populations		
Formula	Number of existing cases (old and new) of a specified disease during a given period of time interval		

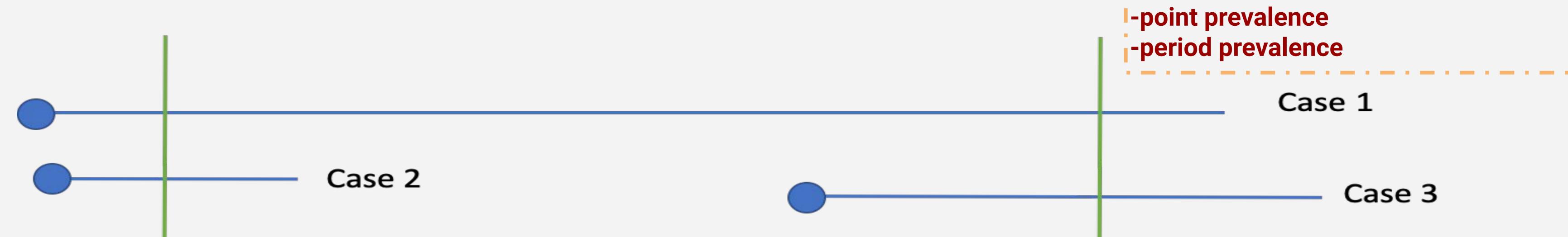
Estimated mid-interval population at-risk $\times 100$

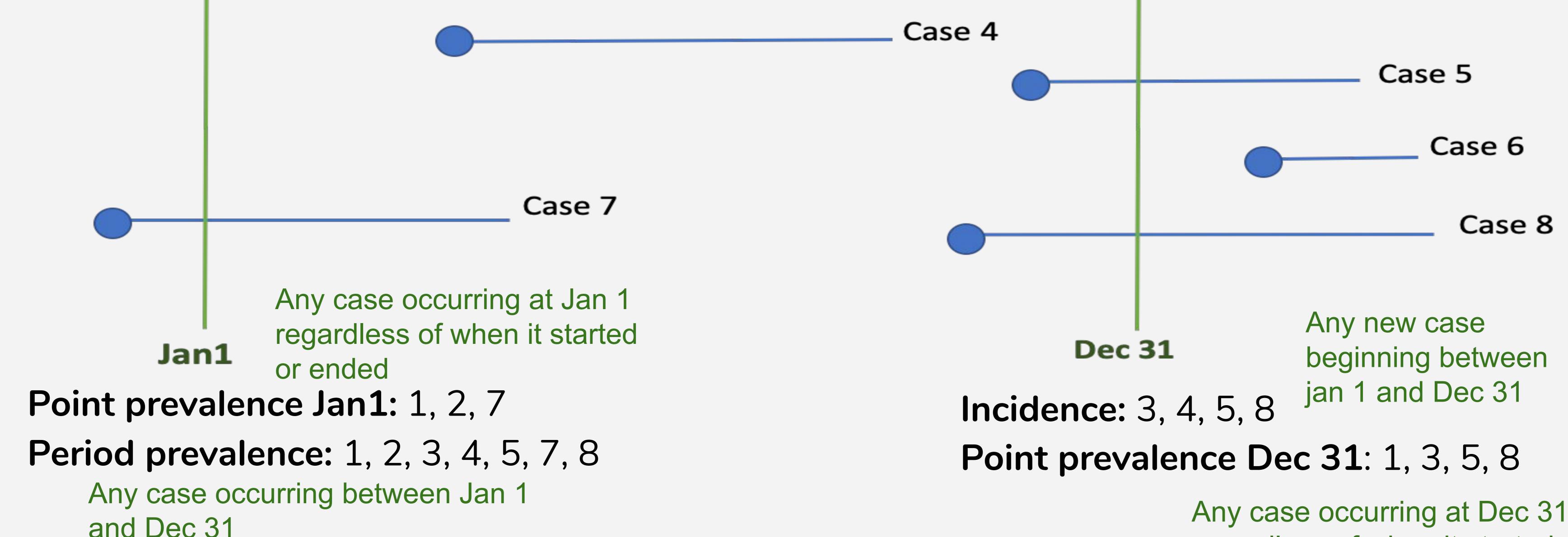
★ Example: In a survey of 1,150 medical students in Riyadh in 2018, a total of 468 reported symptoms of seasonal allergies during the the first week of September. Calculate the prevalence of seasonal allergies in this group.
 Calculate:

468 / 1150 x 100 = 40.7%

"Morbidity Indicators"

What cases will be included in the Incidence, Point Prevalence and Period Prevalence during the below period of time? Important to understand this example because it





Prevalence



regardless of when it started or ended

summarizes differences between:

-incidence

"This model represents the relationship between incidence and prevalence"

"The Epidemiologist Bathtub"

- **The bathtub** represents **community**.
- Water in the tub represents prevalence of disease so:
 - The more water that is in the tub the more disease prevalence is there.
 - The less water that is in the tub the less disease prevalence there.
- \star The prevalence represents burden of disease = how many people have the disease
- \star So we can get rid of the water from the tub by draining it so we can lower the prevalence!
- \star How can we drain the tub? TWO WAYS to get rid of people who have the disease:
 - They can be **CURED**

Sometimes its good to have high prevalence if it means you are maintaining the patient from dying, though you have not fully cured them



 \star How can we get water in the tub? Obviously through the faucet!



• Open the faucet all the way (fast running water): HIGH INCIDENCE Lots of cases and long duration of cases

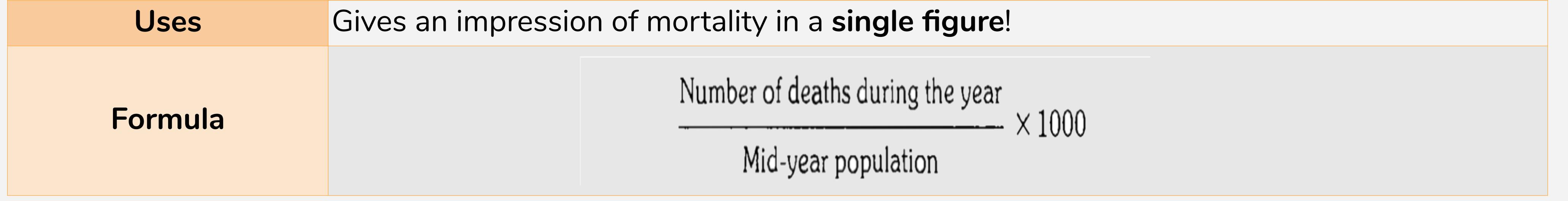
Almost closed (low running water): LOW INCIDENCE

Few cases and short duration of cases

Prevalence = Incidence X Duration of Disease

"Mortality Indicators" (Crude Death Rate)

Definition	Number of deaths from all causes occurring in estimated mid-year population during		
Demition	one year in a given place.		
Tool of Measurement	Rate		
Numerator	Number of <u>deaths from all causes</u> during the year		
Denominator	Mid-year population As the population varies through the year		
10n	Per 1000		
Time frame	One year		



★ Example: In Saudi Arabia in 2017, a total of 119,157 deaths occurred. The estimated population was 33,099,147.

• Calculate CRD for Saudi Arabia in 2017:

 $= 119,157 / 33,099,147 \times 1000 = 3.6 \text{ per } 1000 \text{ people}$

The multiplier can be 10000 or 100000

The doctor mentioned that it should be 3.6 deaths per 1000 population per year

Major Disadvantage of CDR!

Popula —tion	Crude death	Age-specific death rates per 1000 population					
	rate	0-1	1-4	5-7	8-44	45–64	65+
A	15.2	13.5		0.4	1.5	10.7	59.7
в	9.9	22.6	1.0	0.5	3.6	18.8	61.1

 \star At first, population B appears to be healthier than A

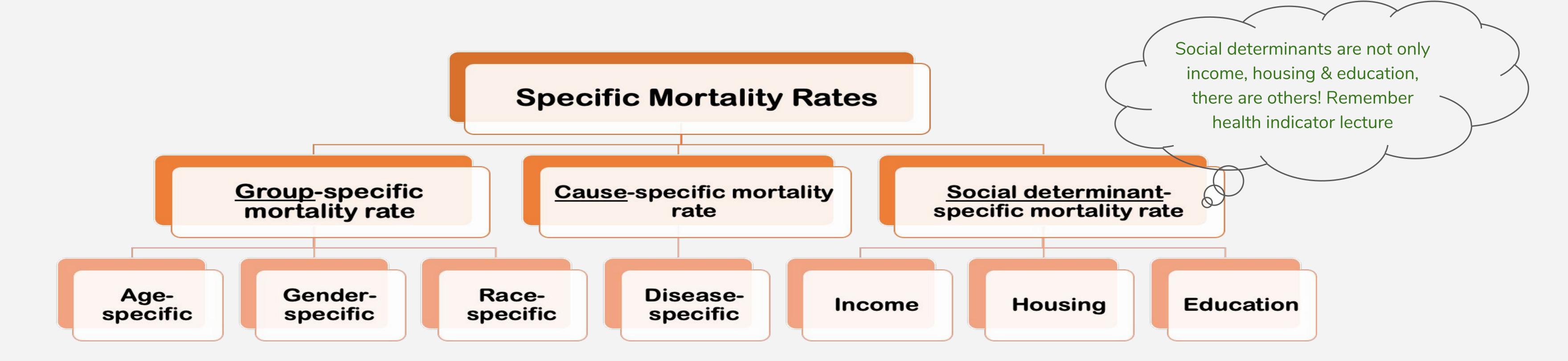
★ When we check the composition by age (age specific mortality rates) → has higher mortality rates in all age groups! Huh?!

 \star Why? cause the higher crude death rate in population A is due to more older population in comparison to B

with relatively younger population.

Lack of comparability for communities with populations that differ by age, gender, race, etc

"Mortality Indicators" (Specific Mortality Rate)



Definition	Number of deaths from/in specific (cause, group, social determinant) occurring in estimated mid-year population during a one year in a given place.		
Tool of Measurement	Rate		
Numerator	Number of deaths from specific (cause, group, social determinant) _ during the year		
Denominator	Cause-specific: mid-year population / group, social determinant: mid-year population of specific group, social determinant		
10n	Per 1000 or per 100,000		
Time frame	One year		
Uses	 Identify at risk groups for preventive action They allow comparison between different causes within the same population 		
Formula If you are taking the mortality rate of specific group then the denominator should be the population of	1. Specific death rate due to tuberculosis = $\frac{\text{Number of deaths from tuberculosis during a calendar year}}{\text{Mid-year population}} \times 1,000$ 2. Specific death rate for males = $\frac{\text{Number of deaths among males during a calendar year}}{\text{Mid-year population of males}} \times 1,000$		
that group	3. Specific death rate in age group 15-20 years = Number of deaths of persons aged 15-20 during a calendar year Mid-year population of persons aged 15-20 × 1,000		

Example: In 2001, a total of 15,555 deaths from Road Traffic Injuries occurred among males and 4,753 deaths occurred among females. The estimated 2001 midyear populations for males and females were 139,813,000 and 144,984,000, respectively.

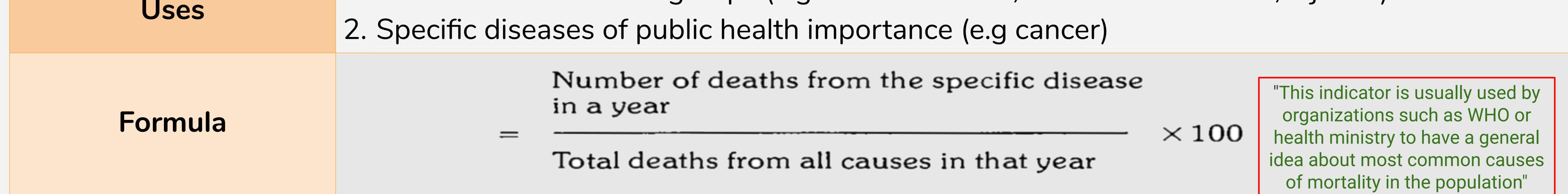
• Calculate Gender Specific Mortality Rates:

RTI mortality rate (males)

- = (# RTI deaths among males/male population) × 100,000
- = 15,555/139,813,000 × 100,000
- = 11.1 RTI deaths per 100,000 population among males
- RTI mortality rate (females)
 - = (# RTI deaths among females / female population) \times 100,000
 - = 4,753/144,984,000 × 100,000
 - = 3.3 RTI deaths per 100,000population among females

"Mortality Indicators" (Proportionate Mortality)

Definition	Number of deaths due to a <mark>particular cause</mark> (or in a specific age group) per 100 total deaths
Tool of Measurement	Proportion
Numerator	Number of deaths from specific cause or age group during the year
Denominator	Total deaths from all causes (not the population in which the deaths occurred)
10n	Per 100 (percentage %)
Time frame	One year
	1. Used in broad disease groups (e.g. communicable, non-communicable, injuries)



Example: In 2003, a total of 128,294 deaths occurred among 24-44 years old. 16,283 deaths were due to heart disease and 7,367 were due to cancer.

• Calculate Proportionate Mortality for heart disease and cancer among 25–44 years:

Proportionate mortality for heart disease, 25–44 years

• = (# deaths from heart disease/ # deaths from all causes) \times 100 = 16,283/128,294 \times 100 = 12.6%

Proportionate mortality for cancer, 25–44 years

= (# deaths from cancer/# deaths from all causes) \times 100 = 7,367/128,924 \times 100 = 5.7%

"Mortality Indicators" (Case Fatality Rate)

Definition	Number of deaths due to a <mark>particular cause</mark> (disease) per 100 total cases	
Tool of Measurement	Proportion (although it is called rate!, called also: deaths to cases ratio)	
Numerator	Number of deaths due to a <mark>particular cause (disease)</mark>	
Denominator	Total number of number of cases (not the population in which the cases occurred)	
10n	Per 100 (percentage %)	
Time frame	Not specified	
Uses	Reflects the killing power of a disease. used mainly in acute infectious diseases.	

Example: In an epidemic of hepatitis A traced to green onions from a restaurant, 555 cases were identified. Three of the

cases died as a result of their infections.

Calculate the Case-Fatality Rate.
 Case fatality rate = (3/555) × 100 = 0.5%

In certain cases such as death from H1N1 the CFR maybe high which could be deceptive as not all H1N1 cases were diagnosed. CFR is especially helpful in cases of outbreaks or poisoning from a certain restaurant or in certain zoonotic diseases where only a limited population came to contact with the animal

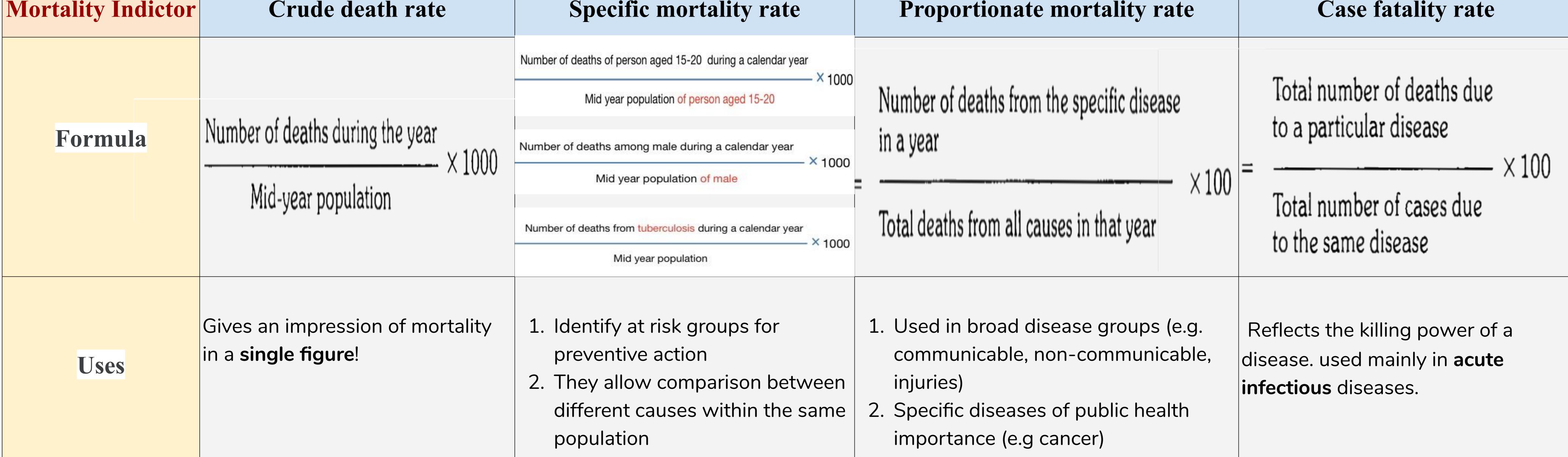


1- Healthcare indicators are Variables that measure indirectly a health status which cannot be measured directly because, Ideal indicators are RARE cause health is <u>Multidimensional.</u>

2- The Characteristics of an ideal Indicator: valid, reliable, relevant, sensitive, specific, feasible

3-Uses of health indicators: Measure health status, compare health status, assess health care needs.

Morbidity Indictor	Incidence	Point prevalence	Period prevalence
Formula	Number of new cases of specific disease during a given time period Incidence = ×1000	Number of all current cases (old and new) of a specified disease existing at a given point in time = × 100	Number of existing cases (old and new) of a specified disease during a given period of time interval
	Population at-risk during that period	Estimated population at the same point in time	= × 100 Estimated mid-interval population at-risk
Uses	 Taking action (outbreak), Control disease (outbreak) Research for etiology and pathogenesis Efficacy of therapeutic and preventive measures 	 Estimate the magnitude of health, disease and high risk populations, Administrative and planning e.g. hospital beds. 	Estimate the magnitude of health, disease and high risk populations
How Interpret It	E.g. 1.67per 1000 per year		



How Interpret It	E.g. 3.6 per 1000 people	E.g. 3.3 RTI deaths per 100,000 population among females	

- for All formulas that use rate to measure you need a multiplier to reach a true number

- for formulas that use proportion multiply by 100 (percentage).

Case fatality rate: proportion of deaths from a disease for example: number of deaths from aids +number of cases ×100



1-Which of the following is not a characteristic of an ideal indicator?

A- Reliable

B- Relative

C-Reasonable

D-Sensitive

2- 'measures what it is supposed to measure' is the definition of?

A-Validity

B-Feasibility

C-Relevancy

D-Specifically

3- There must be a time dimension and a multiplier for which of the following tools of measurement? A-Ratio

B-Rate

C-Proportion

D-None of the above

4- which of the following tools of measurement don't use proportion for calculation?

A-Case specific fatality rate

B-Proportionate mortality

C-Specific mortality rate

D-Point prevalence

5- which of the following Reflects THE KILLING POWER OF A DISEASE. Used mainly in ACUTE INFECTIOUS **Diseases?**

A-Specific mortality rate

B-Crude death rate

C-Case fatality rate

D-Proportionate mortality

6- what does this formula measure?

A-Crude death rate

B-Specific mortality rate

Total number of deaths due to a particular disease

C-Proportionate mortality

D-Case fatality rate

Total number of cases due to the same disease

7- what does this formula measure?

A-Period prevalence

B-Incidence

C-Point prevalence

D-Specific mortality rate

Number of new cases of specific disease during a given time period $\times 1000$ Population at-risk during that period

