THE COVID-19 SEX-DISAGGREGATED DATA TRACKER

European Region Data Update

ABOUT THIS BRIEF

This brief presents regional findings from the COVID-19 Sex-Disaggregated Data Tracker on the WHO EURO Region. The Data Tracker is the world's most comprehensive source of sex-disaggregated data on the direct health impacts of COVID-19 along the clinical pathway, collecting and reporting national data from 205 countries on vaccinations, testing, confirmed cases (including among healthcare workers), hospitalisations, ICU admissions and deaths. It also reports data on sex and age on key indicators.

Since early in the novel coronavirus pandemic, sex differences have been noted in diagnosis and outcomes. Despite known sex differences in COVID-19 and known sex differences in access to care and treatment in many countries, sex-disaggregated data is not uniformly or universally integrated into COVID-19 data reporting.

Tracking 205 countries worldwide for sex-disaggregated COVID-19 data, we have found consistent global sex differences as well as substantial cross-country variation both in the availability of sex-disaggregated data and in the measured sex differences in clinical indicators.

Monitoring these sex differences can help guide the development of COVID-19 policies that address gender-specific needs in a population and help monitor gender equitable access to COVID-19 care and services.

In this brief we present sex-disaggregated data for the WHO Europe Region, which consists of 63 countries (see Table 1 for a full list), providing comparison between the EURO region and global sex-disaggregated data availability and sex differences in key clinical indicators.

KEY TAKEAWAYS

DATA AVAILABILITY

1. The sex of over 19 million cases and 475,000 deaths from COVID-19 in the EURO region is currently unknown. This equates to roughly one in five of all confirmed cases (23%) and three in ten deaths (32) in the region.

2. Data availability is better than the global picture for cases but slightly worse for deaths (globally, the sex of 28% of cases and 28% of deaths is unknown).

3. 94% (59/63) of countries in the region have ever reported sex-disaggregated (SD) data on cases or deaths, with 78% (49/63) in the region reporting SD data on cases or deaths in the past month.

OUTCOMES

4. In the EURO region, men are vaccinated and tested slightly less than women, and make up fewer confirmed COVID-19 cases than women.

5. Men account for more hospitalisations (56%), ICU admissions (67%) and deaths (55%) than women.

National data availability for sex-disaggregated case and death data

At a minimum, countries should report sex-disaggregated data on COVID-19 cases and deaths. Yet across 63 countries in the EURO region, just 42 (67%) reported sex-disaggregated data on both cases and deaths in the past month, with an additional seven countries (11%) reporting on just one of these indicators in the past month. Six countries (10%) have previously reported either or both of these indicators but are no longer doing so. Three countries (5%) in the region have never reported sex-disaggregated data on cases or deaths that we could locate.

Table 1 lists the countries from the EURO region currently included in the tracker with the date of the most recent data available for sex-disaggregated data on cases and deaths.

Table 1. Latest Reporting Date of Sex-Disaggregated Case and Death Data across EURO Countries

Country	Case data available	Death data available
Albania	Nov 2021	Nov 2021
Andorra	Never	Never
Armenia	Feb 2021	Feb 2021
Austria	Nov 2021	Nov 2021
Azerbaijan	Oct 2021	Never
Belarus	Oct 2021	Never
Belgium	Nov 2021	Nov 2021
Bosnia and Herzegovina	Nov 2021	Nov 2021
Bulgaria	May 2020	Never
Croatia	Nov 2021	Oct 2021
Cyprus	Nov 2021	Oct 2021
Czech Republic	Nov 2021	Nov 2021
Denmark	Nov 2021	Nov 2021
England	Nov 2021	Nov 2021
Estonia	Nov 2021	Nov 2021
Faroe Islands	Nov 2021	Never
Finland	Nov 2021	Nov 2021
France	Nov 2021	Nov 2021
Georgia	Oct 2021	Never
Germany	Nov 2021	Nov 2021
Gibraltar	Never	Jan 2021
Greece	Nov 2021	Nov 2021
Greenland	Never	Never
Guernsey	May 2020	Feb 2021
Hungary	Oct 2021	Nov 2021
Iceland	Oct 2021	Oct 2021
Isle of Man	Nov 2021	Apr 2021
Israel	Nov 2021	Nov 2021
Italy	Nov 2021	Nov 2021
Jersey	Sep 2021	Nov 2021
Kyrgyzstan	Oct 2021	Oct 2021
Latvia	Nov 2021	Nov 2021
Liechtenstein	Nov 2021	Never
Lithuania	Nov 2021	Nov 2021
Luxembourg	Nov 2021	Nov 2021
Malta	Oct 2021	Oct 2021
Moldova	Nov 2021	Nov 2021
Monaco	Never	Never
Montenegro	Nov 2021	Oct 2021
Netherlands	Nov 2021	Nov 2021
North Macedonia	Nov 2021	Nov 2021
Northern Ireland	Nov 2021	Nov 2021
Norway	Nov 2021	Nov 2021
Poland	Oct 2021	Oct 2021
Portugal	Nov 2021	Nov 2021
Republic of Ireland	Nov 2021	Nov 2021
Romania	Nov 2021	Nov 2021
Russia	Feb 2021	Never
San Marino	Mar 2020	Never
Scotland	Nov 2021	Nov 2021
Serbia	Never	May 2020
Slovakia	Nov 2021	Nov 2021
Slovenia	Nov 2021	Nov 2021
Spain	Nov 2021	Nov 2021
Sweden	Nov 2021	Nov 2021
Switzerland	Nov 2021	Nov 2021
Tajikistan	Never	Never
Turkey	Aug 2021	Aug 2021
Ukraine	Nov 2021	Nov 2021
Uzbekistan	Mar 2020	Never
Wales	Nov 2021	Nov 2021

Availability of sex-disaggregated data in the EURO Region

Of more than 81.5 million cases and over 1.4 million deaths reported to the WHO by 16 November 2021 in Europe, the sex of approximately 1 in 5 identified cases and nearly 3 in 10 deaths is currently unknown. Data availability is slightly better than the global picture for cases but slightly worse for deaths (see Figures 1 and 2).

Fig 1. Availability of Sex Data for Cases in Europe and Globally, November 2021

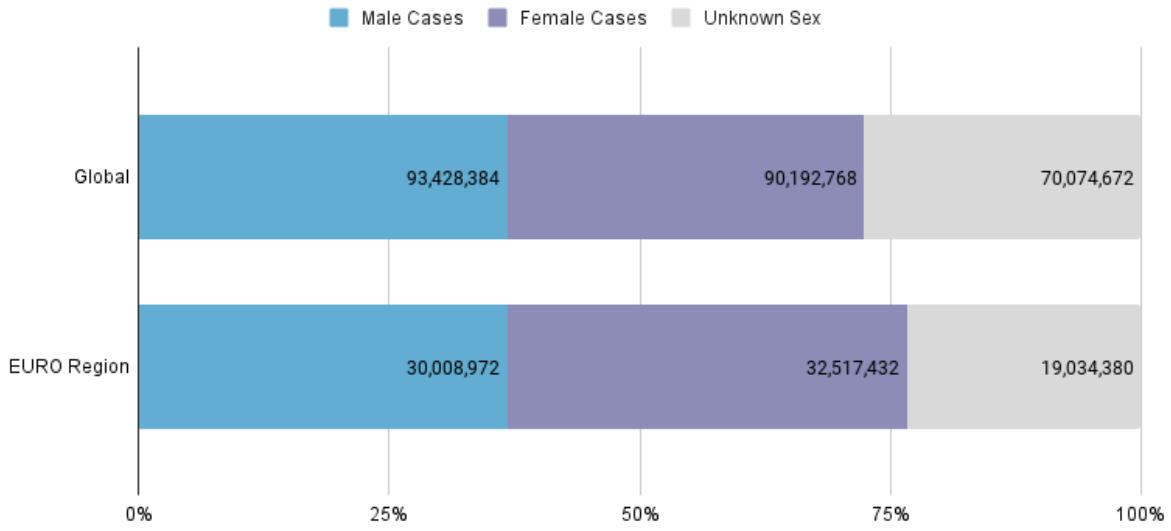
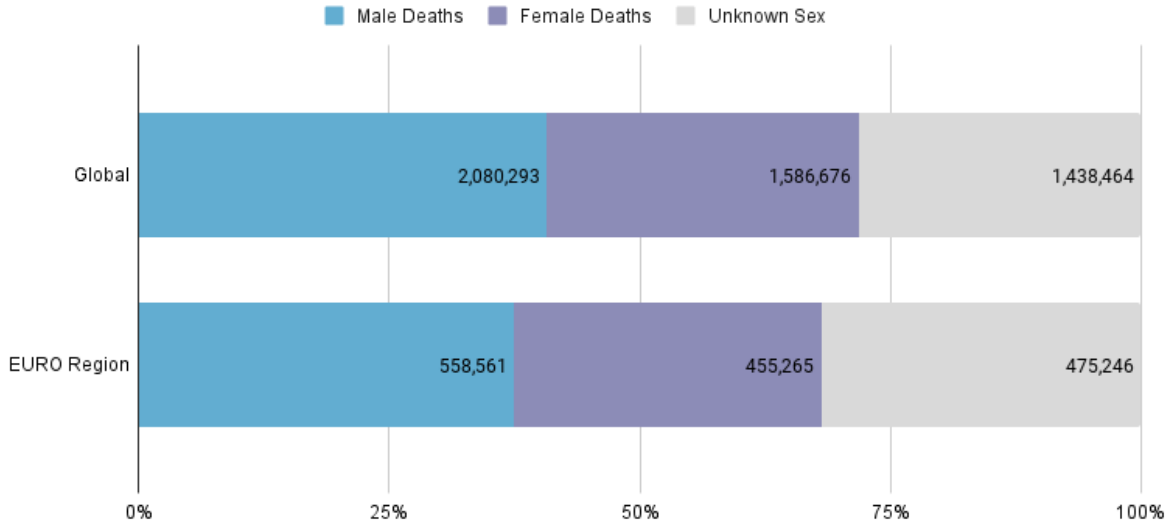


Fig 2. Availability of Sex Data for Deaths in Europe and Globally, November 2021



Data availability along the clinical pathway in the EURO Region and Globally

The Tracker collects sex-disaggregated data for indicators along the clinical pathway, from vaccinations to testing, cases, hospitalisations, ICU admissions and deaths. The EURO region performs better than other regions on sex-disaggregated data availability, with a much larger percentage of countries reporting on all indicators than the global percentage of countries reporting, except confirmed cases among healthcare workers (Figure 3).

Across the EURO region, the most common indicators that countries have reported on in the past month are confirmed cases (76%) and deaths (68%). The least common indicator was cases among healthcare workers (3%).

Fig 3. Proportion of countries reporting sex-disaggregated data by Indicator in the past month, Globally and for EURO Region, November 2021

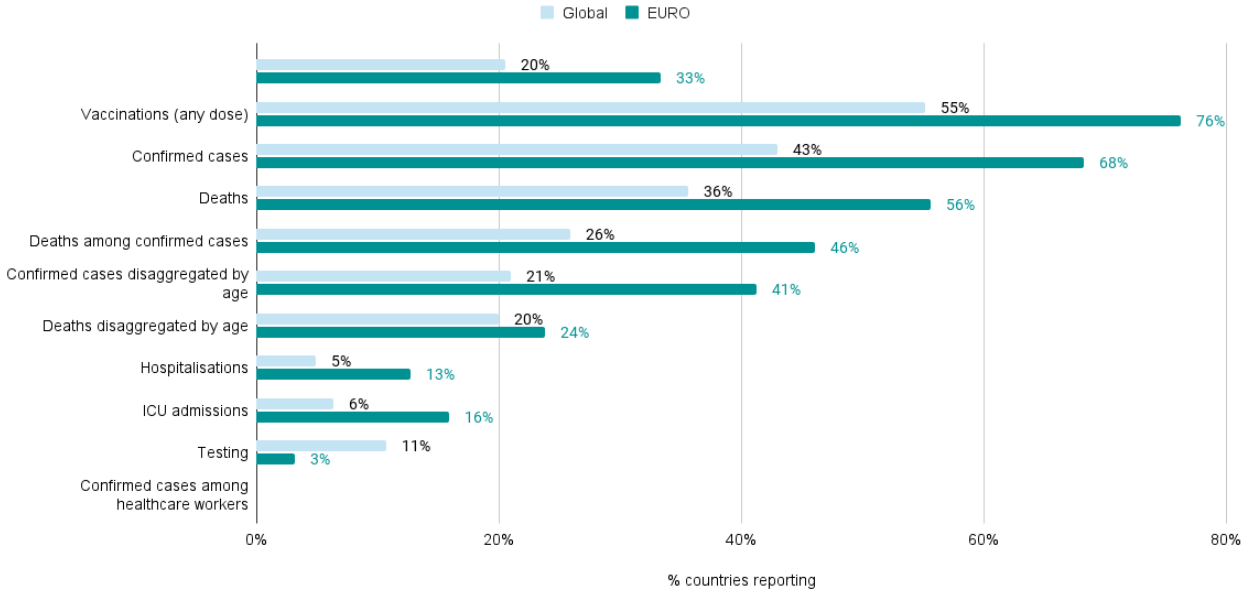
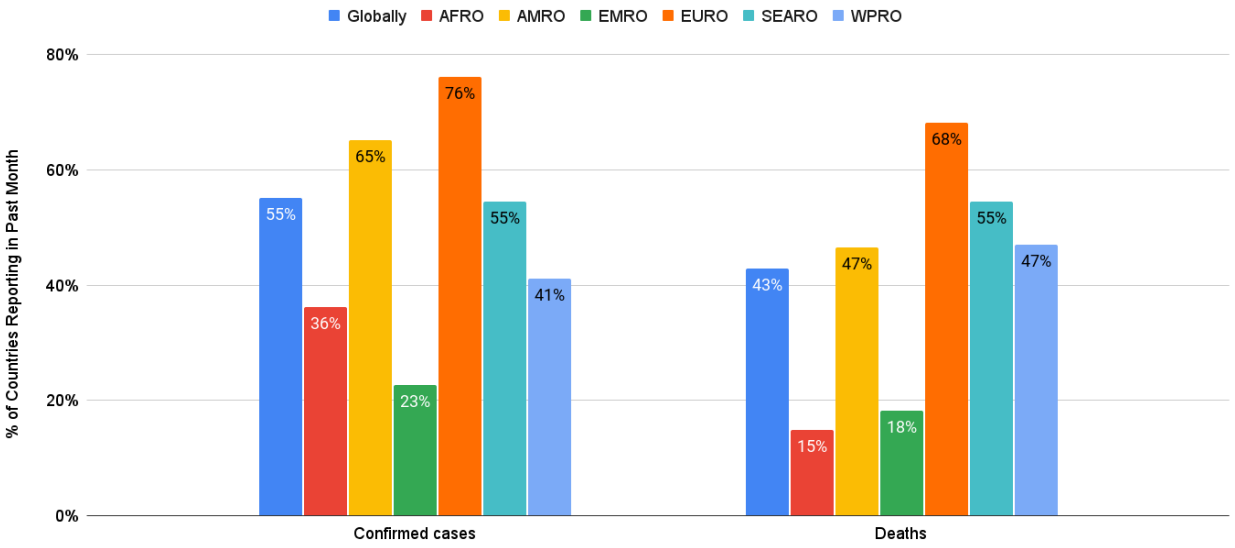


Fig 4. Proportion of countries reporting sex-disaggregated case and death data across WHO regions and globally, November 2021



A look along the Clinical Pathway

The sex differences seen across clinical pathway indicators in the EURO region are consistent with what has been reported globally (see Figure 5). In Europe men are being vaccinated and tested slightly less than women (48% and 44%, respectively), but they account for more reported hospitalisations (56%), ICU admissions (67%) and deaths (55%) than women. In Europe, fewer men have been diagnosed with COVID-19 than women (48%), while globally male and female confirmed cases are nearly equal. Men make up a slightly smaller proportion of healthcare workers with confirmed cases than is seen in the global data, though very few countries are providing this data.

Figure 6 compares the percentage of male outcomes along the clinical pathway indicators all WHO regions.

Fig. 5. Percent of Males Reported for Clinical Pathway Indicators in EURO Region and Globally, November 2021

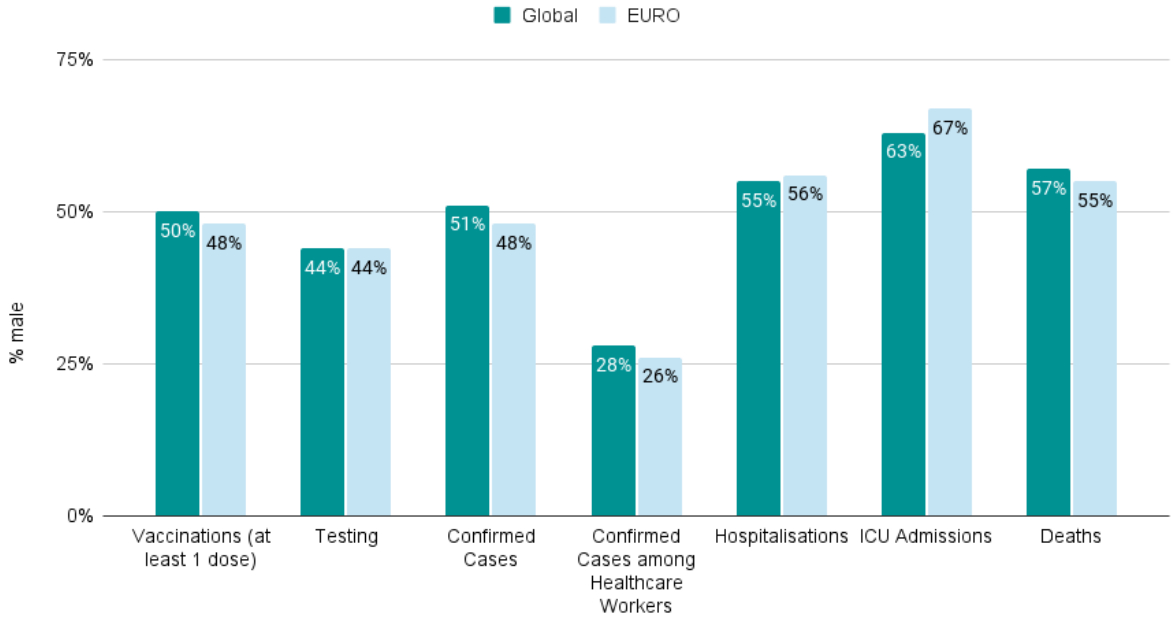
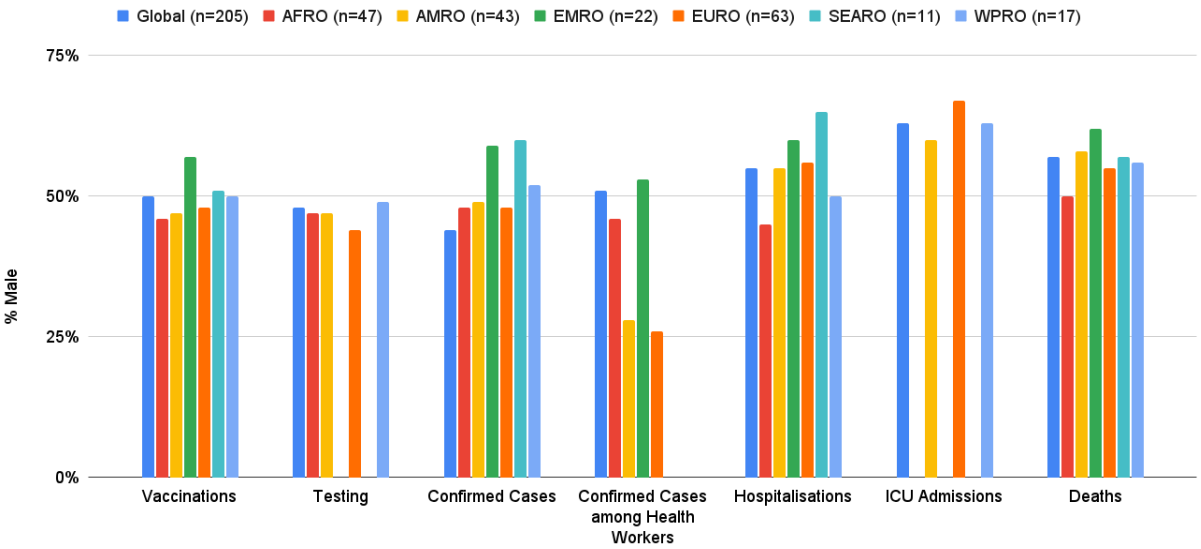


Fig. 6. Percent of Males Reported for Clinical Pathway Indicators by WHO Region, November 2021



About the COVID-19 Sex-Disaggregated Data Tracker

The COVID-19 Sex-Disaggregated Data Tracker is the world's largest database of sex-disaggregated data on COVID-19 health outcomes. The tracker currently collects data from 200+ countries on testing, confirmed cases (including among health workers), hospitalisations, intensive care unit (ICU) admissions, and deaths among women and men. It is also tracking the availability of data disaggregated by other social and demographic characteristics as well as data on pre-existing comorbidities. Data is collected directly from official national sources, including ministry of health websites, national statistics sites, death registers and government social media accounts. The Tracker is updated once a month.

About the Sex, Gender and COVID-19 Project

The Sex, Gender and COVID-19 Project is a partnership of Global Health 50/50, the International Center for Research on Women and the African Population and Health Research Center. Together, these partners are investigating the roles sex and gender are playing in the outbreak, building the evidence base of what works to tackle gender disparities in COVID-19 health outcomes, and advocating for effective gender-responsive approaches to COVID-19.

Learn more about sex, gender and COVID-19 and explore the Sex-Disaggregated Data Tracker here: https://globalhealth5050.org/the-sex-gender-and-covid-19-project/

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If you are aware of countries that are reporting data that we have not been able to locate or collect, we would be grateful if you could make us aware by emailing us at info@globalhealth5050.org and sharing a link to where the data can be found.

Engage with us: @Globalhlth5050 @APHRC @ICRW