



Developing a Child Cohort Research Strategy for Europe

Strategy for European birth cohort research

CHICOS recommendations

CHICOS is a coordination and support action launched in January 2010 funded through the European Community's 7th Framework Programme (HEALTH-FP7-2009-241604). It set out to “develop an integrated strategy for birth cohort research in Europe for the next 15 years through coordination of the most important European birth cohorts”. CHICOS reached its official conclusion on February 2013, this is an overview of the final recommendations.

CHICOS recommends establishing a **collaborative European Birth Cohort**, using data from existing and new cohorts. This cohort should build a permanent Europe-wide data resource to contain prospective, individual-level information about child health in Europe. It will provide key statistics on child health and determinants to enable health surveillance and to provide rapid responses to knowledge gaps that should be tackled to inform policies.

The collaborative European Birth Cohort should include support for:

- **Establishing the infrastructure for a European-wide database platform.** This should include a core platform, data sharing and data harmonisation rules, biobank access guidelines, exchange of methodology and expertise - resulting in more efficient use of existing and newly established cohorts.
- **Including new cohorts that cover groups of European population that are underrepresented in birth cohort research.** There should be efforts to fund, develop, include and improve cohorts from some European regions (e.g. Eastern Europe) and minority groups.
- **Continuing follow-up of existing European cohorts.** This is the most efficient way to obtain information on health and disease in older children, adolescents, and adulthood.
- **Combining data from birth cohorts, routine registries, and other data sources.** This would enhance the contribution of both birth cohorts and population-based registries.
- **Integrating knowledge translation and public and policy engagement.** This would support translation of research findings into political and public health priorities and policies.

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