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6. KEY FINDINGS
Health in Croatia
Life expectancy is increasing, but lags behind the EU average

Health disparities in life expectancy are more pronounced among men
Cardiovascular diseases are the main causes of death

Note: The size of the bubbles is proportional to the mortality rates in 2016.
Source: Eurostat Database.
Fewer Croatians report to be in good health than on average in the EU.

There are also wider social disparities in self-reported health.

Source: Eurostat Database, based on EU-SILC (data refer to 2017).
More than 70% of life after 65 is lived with disability or chronic diseases.
Risk factors
Behavioural risk factors account for more than half of all deaths

Dietary risks
Croatia: 26%
EU: 18%

Tobacco
Croatia: 20%
EU: 17%

Alcohol
Croatia: 7%
EU: 6%

Low physical activity
Croatia: 3%
EU: 3%

Note: The overall number of deaths related to these risk factors (24,281) is lower than the sum of each one taken individually (28,899) because the same death can be attributed to more than one risk factor. Dietary risks include 14 components such as low fruit and vegetable consumption and high sugar-sweetened beverage consumption.
Source: IHME (2018), Global Health Data Exchange (estimates refer to 2017).
Many risk factors are greater than in most EU countries

Croatia has the third highest rate of teenage smoking in the EU

More than half of 15- to 16-year-old boys reported at least one episode of binge drinking during the past month.
The health system
Croatia spends less than half the EU average on health per capita

Source: OECD Health Statistics 2019 (data refer to 2017).
Croatia has fewer doctors and nurses than many other EU countries.
Health system performance: effectiveness
Mortality from preventable and treatable causes is high compared to most other EU countries

Preventable mortality from **lung cancer** is the third highest in the EU

Preventable mortality rates from **ischaemic heart disease and stroke** are double the EU average

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Note: Preventable mortality is defined as death that can be mainly avoided through public health and primary preventive interventions. Mortality from treatable (or amenable) causes is defined as death that can be mainly avoided through health care interventions, including screening and treatment. Both indicators refer to premature mortality (under age 75). The data are based on the revised OCEC/Eurostat lists.

Source: Eurostat Database (data refer to 2015).
Vaccination rates are low for older people and declining for children.
Five-year cancer survival rates are below the EU average

Prostate cancer
Croatia: 81 %
EU26: 87 %

Breast cancer
Croatia: 79 %
EU26: 83 %

Colon cancer
Croatia: 51 %
EU26: 60 %

Lung cancer
Croatia: 10 %
EU26: 15 %

Note: Data refer to people diagnosed between 2010 and 2014.
Source: CONCORD Programme, London School of Hygiene & Tropical Medicine.
The 30-day mortality rate following hospital admission for heart attack is high.
Health system performance: accessibility
OOP spending in Croatia is lower than the EU average

Sources: OECD Health Statistics 2019 (data refer to 2017).
Unmet needs for medical care are lower than the EU average.

Note: Data refer to unmet needs for a medical examination or treatment due to costs, distance to travel or waiting times. Caution is required in comparing the data across countries as there are some variations in the survey instrument used.

Source: Eurostat Database, based on EU-SILC (data refer to 2017).
Health system performance: resilience
Croatia does reasonably well with its level of expenditure.
Day surgery has risen rapidly

Note: Data refer to 2012 and 2016 or the nearest year. Sources: OECD Health Statistics 2018; Eurostat Database.