# SDG 3 - Good health and well-being (statistical annex)

Statistics Explained

## Ensure healthy lives and promote well-being for all at all ages (statistical annex)

*Data extracted in May 2021.*


**EU trend of SDG 3 on good health and well-being**

This article provides an overview of statistical data on SDG 3 'Good health and well-being' in the European Union (EU) . It is based on the set of EU SDG indicators for monitoring of progress towards the UN Sustainable Development Goals (SDGs) in an EU context.

This article is part of a set of statistical articles , which are based on the Eurostat publication 'Sustainable development in the European Union — Monitoring report on progress towards the SDGS in an EU context — 2021 edition' . This report is the fifth edition of Eurostat's series of monitoring reports on sustainable development, which provide a quantitative assessment of progress of the EU towards the SDGs in an EU context.

| Indicator | Long-term trend (past 15 years) | Short-term trend (past 5 years) |
|---|---|---|
| **Healthy lives** | | |
| Healthy life years at birth | ↗ (1) | ↗ (2) |
| People with good or very good self-perceived health | : | ↗ |
| **Health determinants** | | |
| Smoking prevalence | ↑ (3) | ↑ (4) |
| Obesity rate (*) | : | : |
| Population living in households suffering from noise (*) | : | ↑ |
| Exposure to air pollution by particulate matter (*) | ↑ | ↑ |
| **Causes of death** | | |
| Standardised death rate due to tuberculosis, HIV and hepatitis | ↑ (3) | ↑ |
| Standardised avoidable mortality | : | ↑ |
| People killed in accidents at work (*) | : | ↑ |
| Road traffic deaths (*) | ↗ | ↘ |
| **Access to health care** | | |
| Self-reported unmet need for medical care | : | ↑ |

(*) Multi-purpose indicator.
(1) Past 11-year period.
(2) Past 4-year period.
(3) Past 14-year period.
- (4) Past 6-year period.

**Table 1: Indicators measuring progress towards SDG 3, EU**

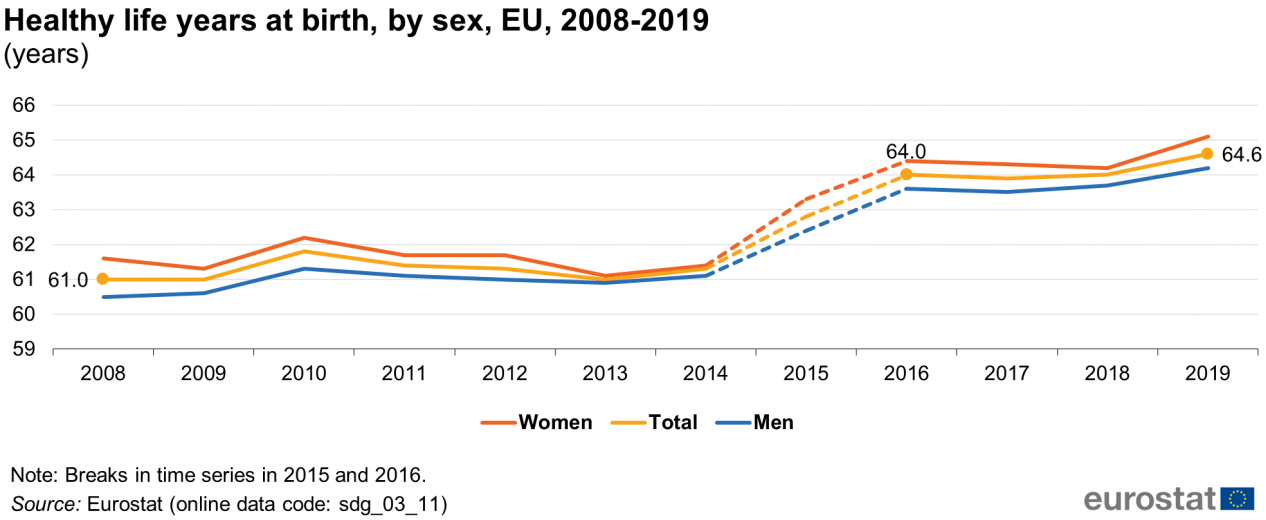
| Symbol | With quantitative target | Without quantitative target |
|---|---|---|
| 🎯 | Trends for indicators marked with this 'target' symbol are calculated against an official and quantified EU policy target. In this case the arrow symbols should be interpreted according to the left-hand column below. Trends for all other indicators should be interpreted according to the right-hand column below. | |
| ↑ | Significant progress towards the EU target | Significant progress towards SD objectives |
| ↗ | Moderate progress towards the EU target | Moderate progress towards SD objectives |
| ↘ | Insufficient progress towards the EU target | Moderate movement away from SD objectives |
| ↓ | Movement away from the EU target | Significant movement away from SD objectives |
| : | Calculation of trend not possible (for example) time series too short) | |

*Note:* The two methods for calculating progress used in this report are explained in more detail in the introduction and in the annex; for an overview of the considered policy targets see Table II.18 in the annex.

**Table 2: Explanation of symbols for indicating progress towards SD objectives and targets**

## Healthy life years at birth

This indicator measures the number of years at birth that a person can expect to live in a healthy condition. Healthy life years is a health expectancy indicator which combines information on mortality (death rate) and morbidity (probability of illness).




Note: Breaks in time series in 2015 and 2016.
*Source:* Eurostat (online data code: sdg_03_11)

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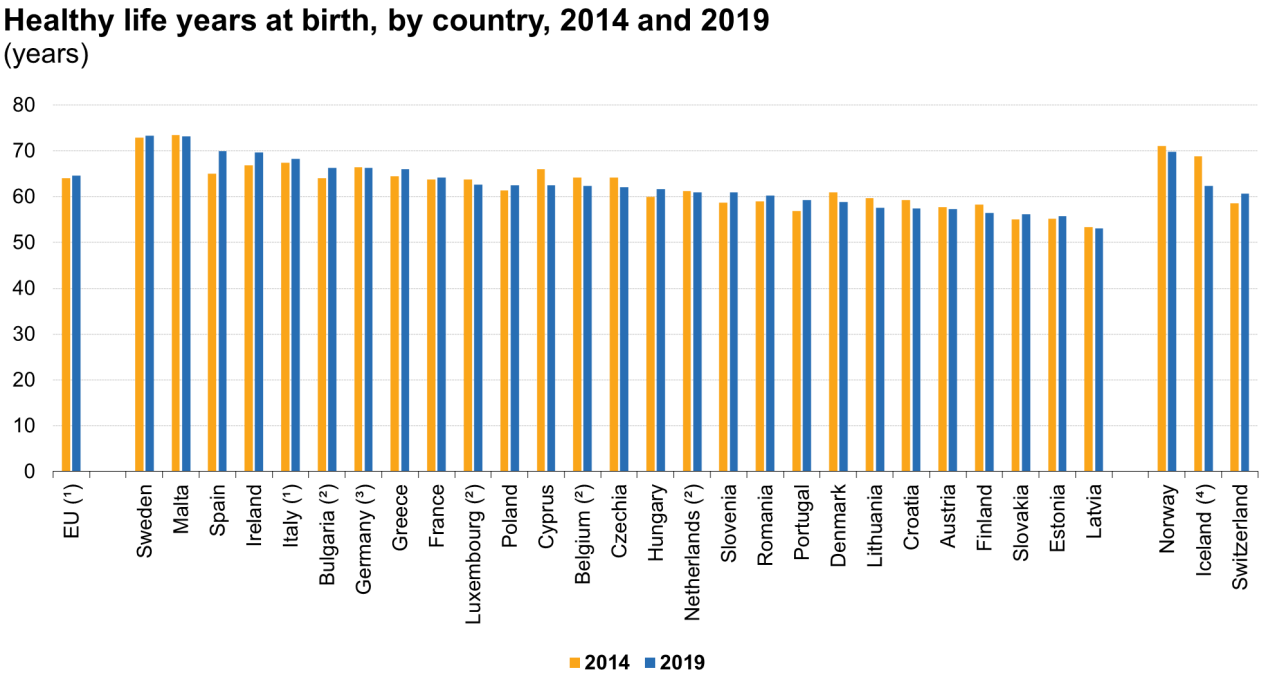
**Figure 1: Healthy life years at birth, by sex, EU, 2008-2019_(years) Compound annual growth rate (CAGR) for the total: 0.5 % per year in the period 2008-2019; 0.3 % per year in the period 2016-2019. Source: Eurostat (sdg_03_11)**




(1) 2016 data (instead of 2014).
(2) Break(s) in time series between the two years shown.
(3) 2015 data (instead of 2014).
(4) 2018 data (instead of 2019).
*Source:* Eurostat (online data code: sdg_03_11)

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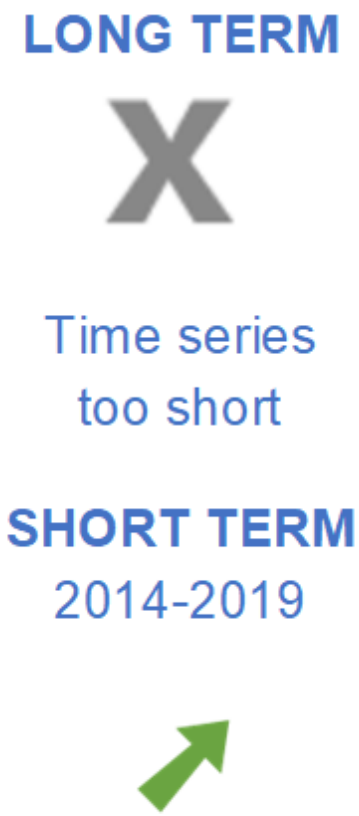
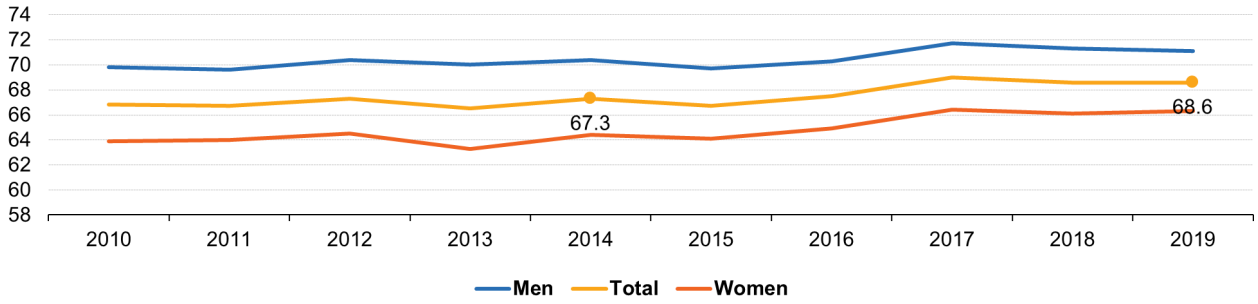
**Figure 2: Healthy life years at birth, by country, 2014 and 2019 (years) Source: Eurostat (sdg_03_11)**

## People with good or very good self-perceived health




The indicator is a subjective measure on how people judge their health in general on a scale from 'very good' to 'very bad'. The data stem from the EU Statistics on Income and Living Conditions (EU-SILC). Indicators of perceived general health have been found to be a good predictor of people's future healthcare use and mortality .

**Share of people with good or very good perceived health, by sex, EU, 2010-2019**
(% of population aged 16 or over)




Note: Estimated data.
*Source:* Eurostat (online data code: sdg_03_20)

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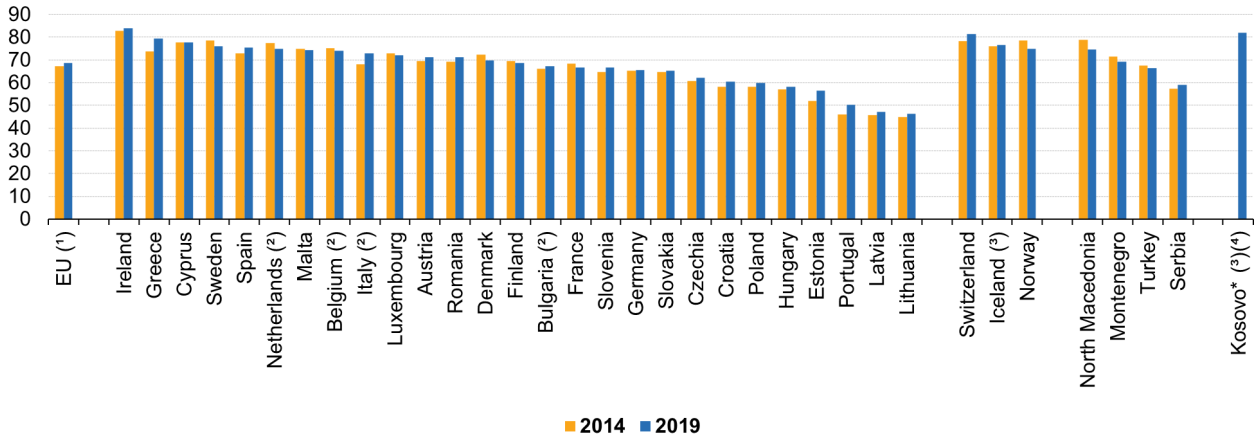
**Figure 3: Share of people with good or very good perceived health, by sex, EU, 2010-2019 (% of population aged 16 or over) Compound annual growth rate (CAGR) for the total: 0.4 % per year in the period 2014–2019. Source: Eurostat (sdg_03_20)**

**Share of people with good or very good perceived health, by country, 2014 and 2019**
(% of population aged 16 or over)




(1) Estimated data.
(2) Break(s) in time series between the two years shown.
(3) 2018 data (instead of 2019).
(4) No data for 2014.
(*) This designation is without prejudice to positions on status, and is in line with UNSCR 1244 and the ICJ Opinion on the Kosovo Declaration of Independence.
*Source:* Eurostat (online data code: sdg_03_20)

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**Figure 4: Share of people with good or very good perceived health, by country, 2014 and 2019 (% of population aged 16 or over) Source: Eurostat (sdg_03_20)**

## Smoking prevalence


This indicator measures the percentage of the population aged 15 years and over who report that they currently smoke boxed cigarettes, cigars, cigarillos or a pipe[1]. It does not include the use of other tobacco and related products such as electronic cigarettes and snuff. The data are collected through a Eurobarometer survey [2]and are based on self-reported use during face-to-face interviews in people's homes.

[1] European Commission (2017), Attitudes of Europeans towards tobacco and electronic cigarettes , Special Eurobarometer 458, Annex.

[2] European Commission (2021), Eurobarometers on tobacco.

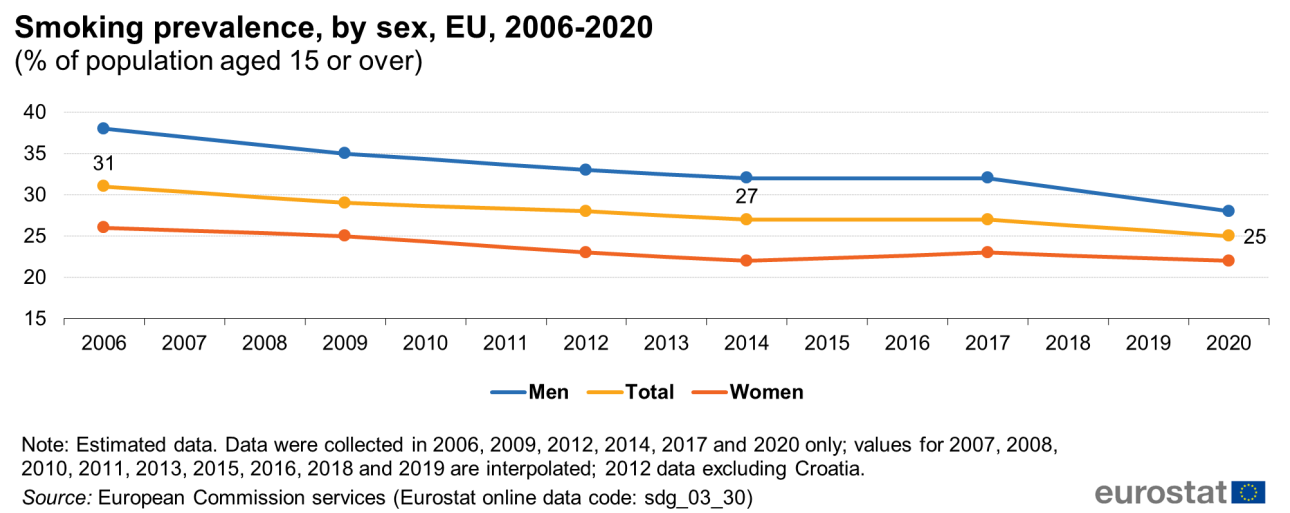



**Figure 5: Smoking prevalence, by sex, EU, 2006-2020 (% of population aged 15 or over) Compound annual growth rate (CAGR) for the total: – 1.5 % per year in the period 2006–2020; – 1.3 % per year in the period 2014–2020. Source: European Commission services, Eurostat (sdg_03_30)**

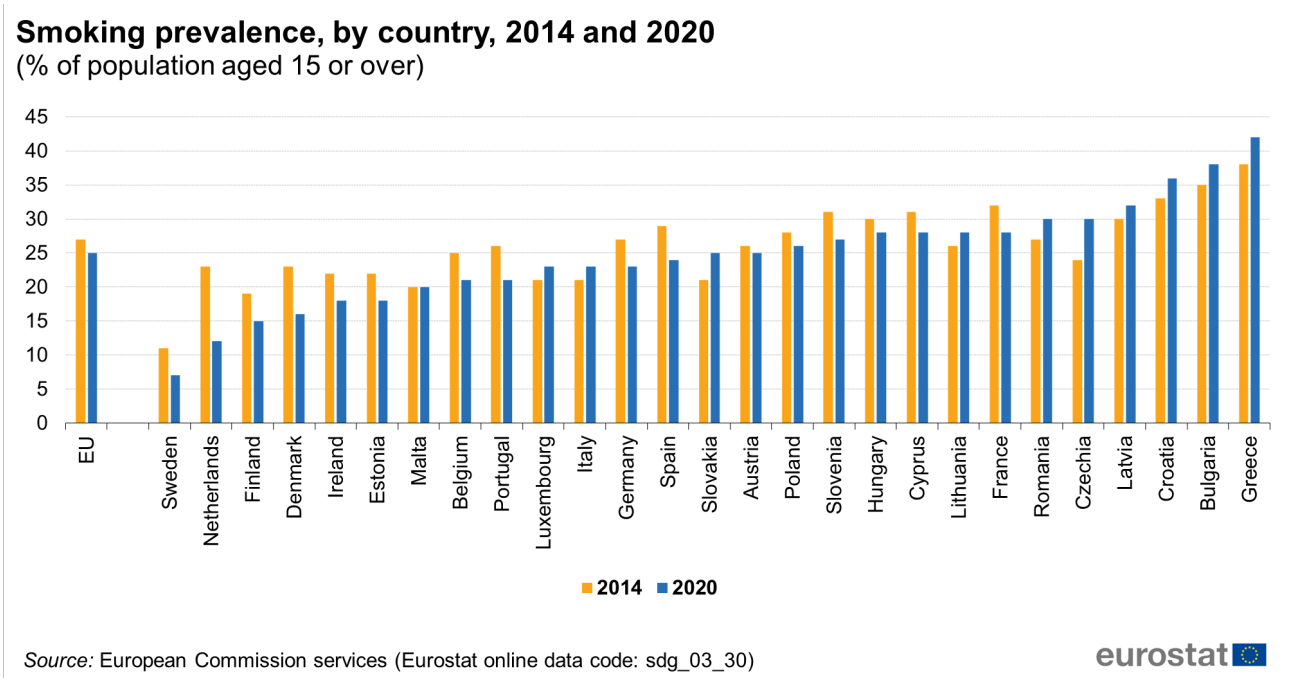


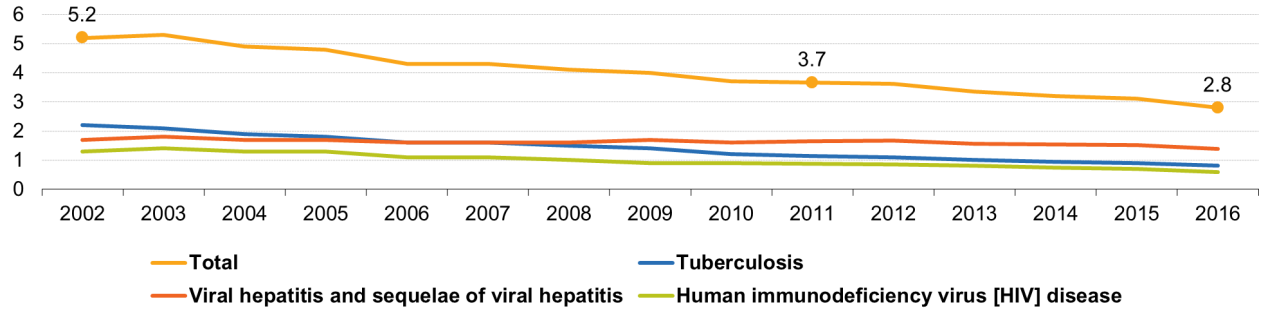

**Figure 6: Smoking prevalence, by country, 2014 and 2020 (% of population aged 15 or over) Source: European Commission services, Eurostat (sdg_03_30)**

## Standardised death rate due to tuberculosis, HIV and hepatitis


The indicator measures the age-standardised death rate of selected communicable diseases. The rate is calculated by dividing the number of people dying due to tuberculosis, HIV and hepatitis by the total population. This value is then weighted with the European Standard Population[3].

[3]Standardised death rates take into account the fact that countries with larger shares of older inhabitants also have higher death rates. See also: Eurostat (2013), Revision of the European Standard Population , Report for Eurostat's Task Force, Publications Office of the European Union, Luxembourg.

**Standardised death rate due to tuberculosis, HIV and hepatitis, by type of disease, EU, 2002-2016**
(number per 100 000 persons)




Note: Data for 2002-2010 are estimated.
*Source:* Eurostat (online data code: sdg_03_41)

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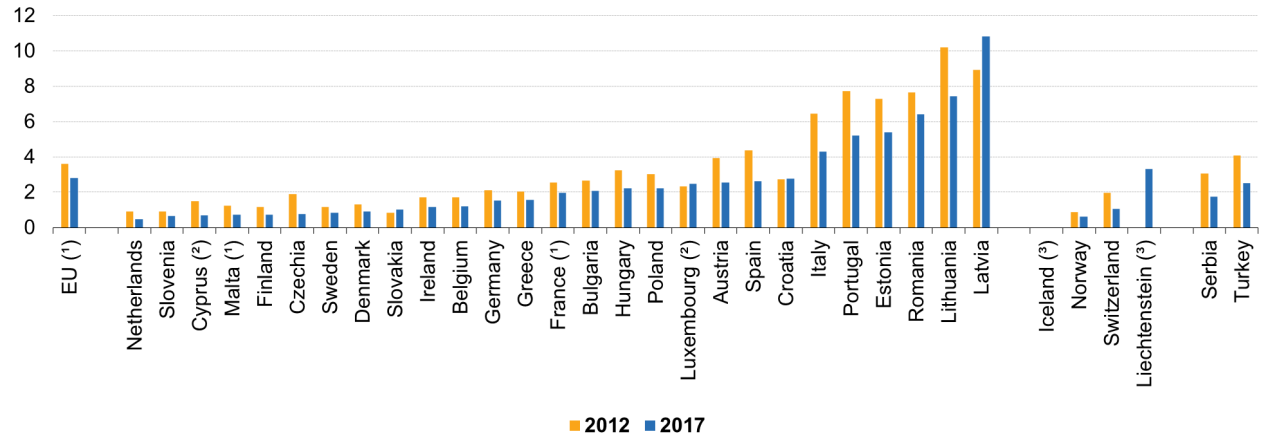
**Figure 7: Standardised death rate due to tuberculosis, HIV and hepatitis, by type of disease, EU, 2002-2016 (number per 100 000 persons) Compound annual growth rate (CAGR) for the total: – 4.3 % per year in the period 2002–2016; – 5.3 % per year in the period 2011–2016. Source: Eurostat (sdg_03_41)**

**Standardised death rate due to tuberculosis, HIV and hepatitis, by country, 2012 and 2017**
(number per 100 000 persons)




Note: 2017 data are provisional.
(1) 2016 data (instead of 2017).
(2) 2014 data (instead of 2012).
(3) No data for 2012.
*Source:* Eurostat (online data code: sdg_03_41)

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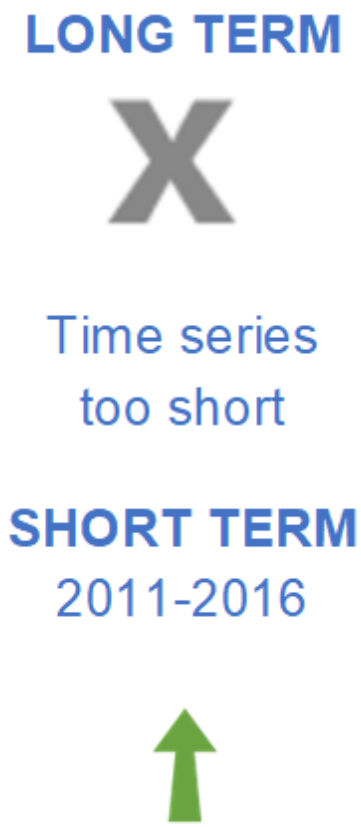
**Figure 8: Standardised death rate due to tuberculosis, HIV and hepatitis, by country, 2012 and 2017 (number per 100 000 persons) Source: Eurostat (sdg_03_41)**

## Standardised avoidable mortality




Avoidable mortality covers both preventable and treatable causes of mortality. Preventable mortality refers to mortality that can mainly be avoided through effective public health and primary prevention interventions (i.e. before the onset of diseases/injuries, to reduce incidence). Treatable mortality can mainly be avoided through timely and effective health care interventions, including secondary prevention and treatment (after the onset of diseases to reduce case-fatality). The total avoidable mortality rate includes a number of infectious diseases, several types of cancers, endocrine and metabolic diseases, as well as some diseases of the nervous, circulatory, respiratory, digestive, genitourinary systems, some diseases related to pregnancy, childbirth and the perinatal period, a number of congenital malformations, adverse effects of medical and surgical care, a list of injuries and alcohol and drug related disorders.

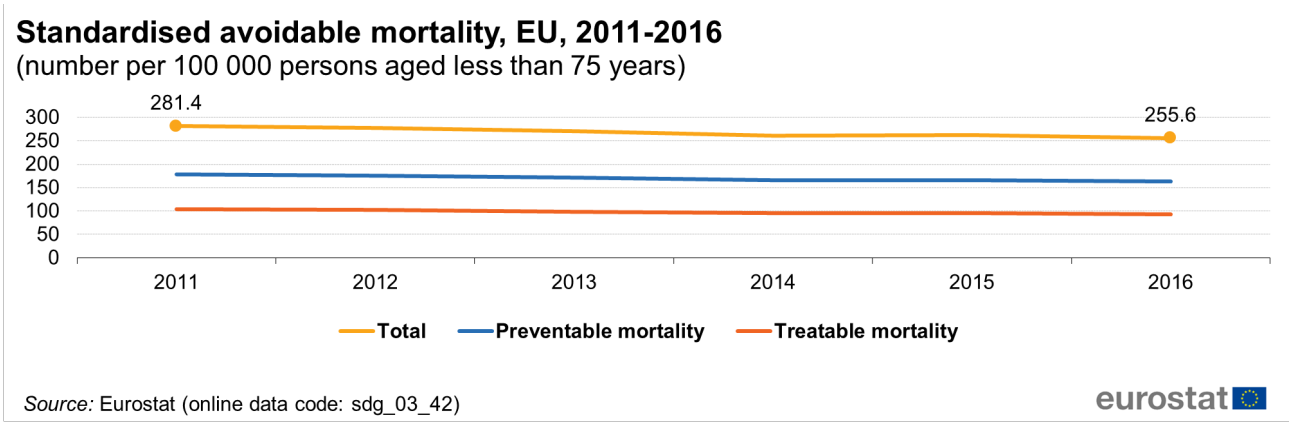



**Figure 9: Standardised avoidable mortality, EU, 2011-2016 (number per 100 000 persons aged less than 75 years) Compound annual growth rate (CAGR) for the total: – 1.9 % per year in the period 2011–2016. Source: Eurostat (sdg_03_42)**

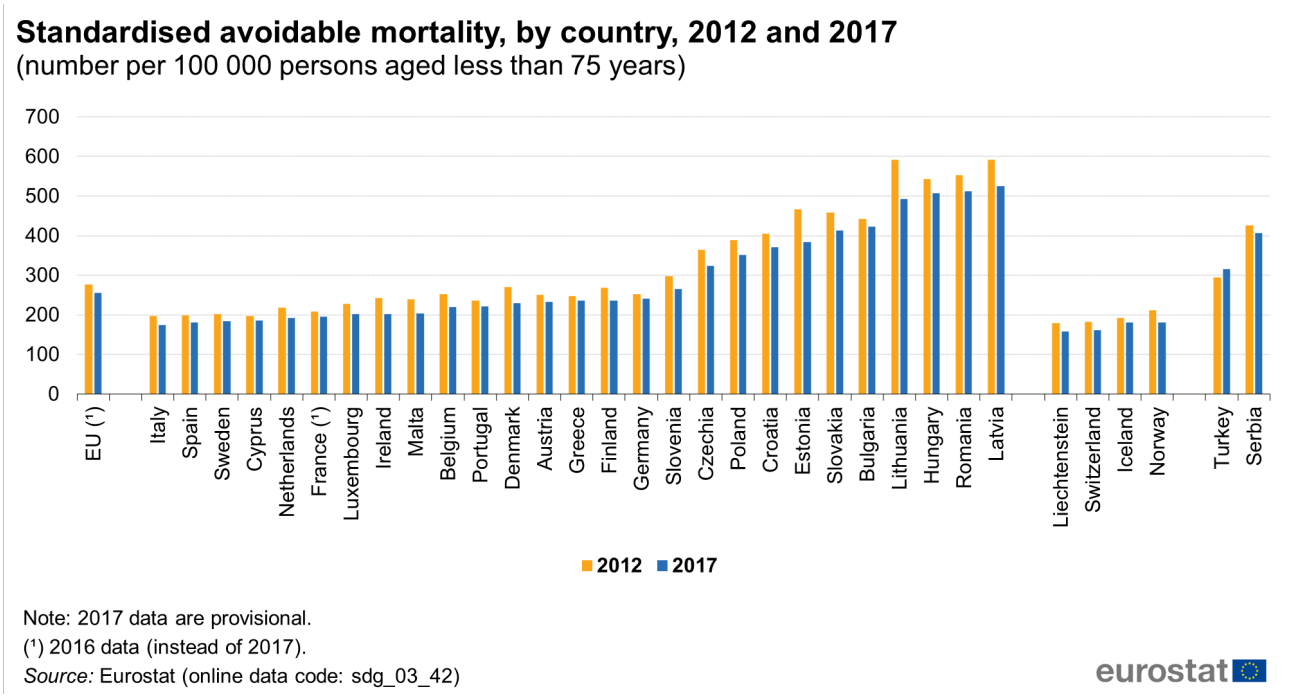
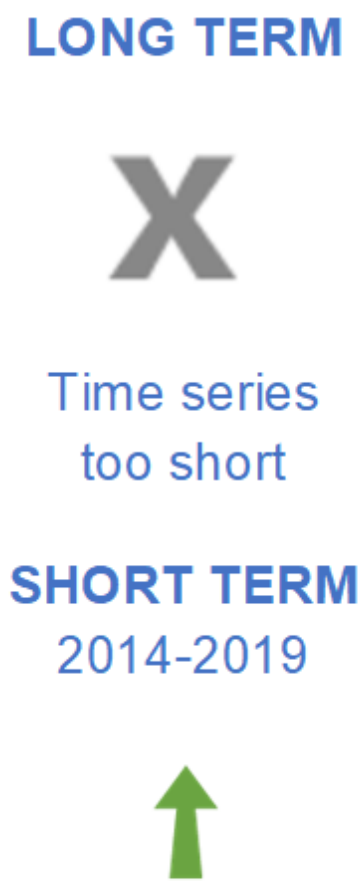



**Figure 10: Standardised avoidable mortality, by country, 2012 and 2017 (number per 100 000 persons aged less than 75 years) Source: Eurostat (sdg_03_42)**

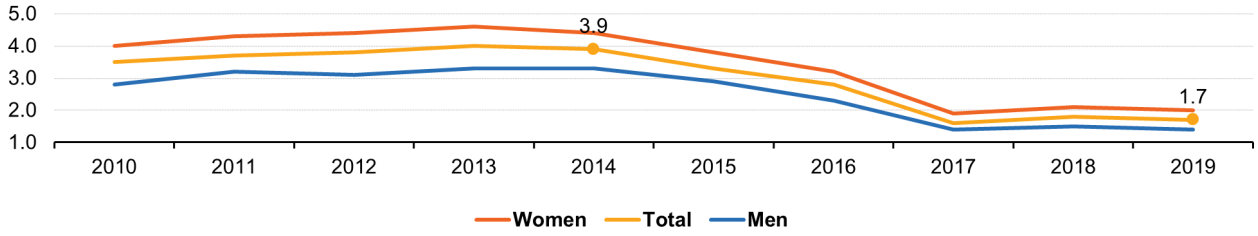
## Self-reported unmet need for medical care




In the context of SDG monitoring, this indicator measures the share of the population aged 16 and over reporting unmet needs for medical care due to one of the following reasons: 'financial reasons', 'waiting list' and 'too far to travel'. Self-reported unmet needs concern a person's own assessment of whether he or she needed medical examination or treatment (dental care excluded), but did not have it or did not seek it. The data stem from the EU Statistics on Income and Living Conditions (EU-SILC). Since social norms and expectations may affect responses to questions about unmet care needs, caution is required when comparing differences in the reporting of unmet medical examination across countries. In addition, the different organisation of health care services is another factor to consider when analysing the data. Finally, there are also some variations in the survey question across countries and across time[4].

[4]OECD/EU (2018), Health at a Glance: Europe 2018 — State of Health in the EU Cycle , OECD Publishing, Paris, p. 170.

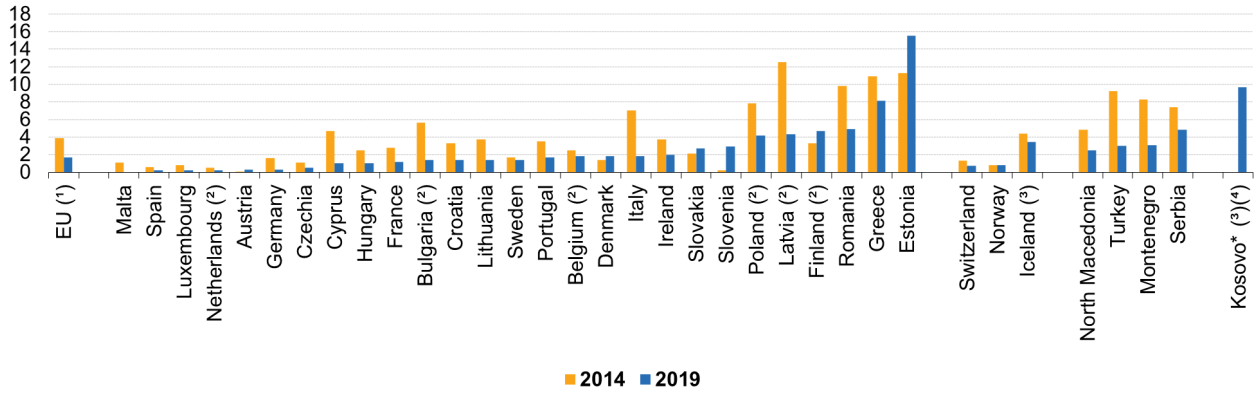
**Self-reported unmet need for medical care, by sex, EU, 2010-2019**
(% of population aged 16 and over)




Note: Estimated data.
*Source:* Eurostat (online data code: sdg_03_60)

**Figure 11: Self-reported unmet need for medical care, by sex, EU, 2010-2019 (% of population aged 16 and over) Compound annual growth rate (CAGR) for the total: – 15.3 % per year in the period 2014–2019. Source: Eurostat (sdg_03_60)**

**Self-reported unmet need for medical care, by country, 2014 and 2019**
(% of population aged 16 and over)




(¹) Estimated data.
(²) Break(s) in time series between the two years shown.
(³) 2018 data (instead of 2019).
(⁴) No data for 2014.
(*) This designation is without prejudice to positions on status, and is in line with UNSCR 1244 and the ICJ Opinion on the Kosovo Declaration of Independence.
*Source:* Eurostat (online data code: sdg_03_60)

**Figure 12: Self-reported unmet need for medical care, by country, 2014 and 2019 (% of population aged 16 and over) Source: Eurostat (sdg_03_60)**

## See also

- All articles on sustainable development goals

## Database

- Sustainable Development Indicators

## Dedicated section

- Sustainable Development Indicators
- Population and Demography overview

## Methodology

More detailed information on EU SDG indicators for monitoring of progress towards the UN Sustainable Development Goals (SDGs), such as indicator relevance, definitions, methodological notes, background and potential linkages, can be found in the introduction of the publication 'Sustainable development in the European Union — Monitoring report on progress towards the SDGS in an EU context — 2021 edition' .