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Policy Analysis
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Access for children in need to the key services covered by the European Child Guarantee

Croatia

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Table of contents

Summary	5
Introduction.....	6
1. Early childhood education and care (ECEC).....	7
1.1 Mapping accessibility and affordability of ECEC	7
1.1.1 Conditions for qualifying as a “low-income child”	9
1.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)	9
1.2 Main barriers to effective and free access to ECEC for low-income children	11
1.2.1 Financial barriers	11
1.2.2 Non-financial barriers.....	11
1.3 Free meals provision for low-income children in ECEC	13
2. Education and school-based activities	13
2.1 Mapping the main school costs in public primary and secondary education.	14
2.1.1 Conditions for qualifying as a “low-income child”	15
2.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)	15
2.2 Cash benefits whose specific purpose is to help meet educational costs	16
2.3 Main barriers to effective and free access to school-based activities for low-income children.....	16
2.3.1 Financial barriers	16
2.3.2 Non-financial barriers.....	17
3. Free meals at school	17
3.1 Mapping free provision of school meals.....	17
3.1.1 Conditions for qualifying as a “low-income child”	18
3.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)	18
3.2 Main barriers to effective and free access to school meals for low-income children	18
3.2.1 Financial barriers	18
3.2.2 Non-financial barriers.....	19
4. Healthcare	20
4.1 Mapping the provision of free healthcare services and products	20
4.1.1 Conditions for qualifying as a “low-income child”	20
4.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)	20
4.2 Cash benefits whose specific purpose is to help meet healthcare costs.....	20
4.3 Non-financial barriers to effective and free access to healthcare.....	21
5. Healthy nutrition	22

5.1	Main barriers to effective access to healthy nutrition	22
5.1.1	Financial barriers	22
5.1.2	Non-financial barriers.....	23
5.2	Publicly funded measures supporting access to healthy nutrition	23
6.	Adequate housing	24
6.1	Publicly funded measures supporting access to adequate housing – Housing allowances	24
6.2	Publicly funded measures supporting access to adequate housing – Social housing	24
6.2.1	Mapping the provision of social housing	24
6.2.2	Main barriers to effective access to social housing.....	25
6.3	Publicly funded measures supporting access to adequate housing – Other measures	25
	References	26
	Annex	29

Summary

On 14 June 2021, the Council of the European Union adopted a Recommendation establishing a “European Child Guarantee”, with a view to guaranteeing access to six key services for “children in need”:

- effective and free access to four services: high-quality early childhood education and care (ECEC); education and school-based activities; at least one healthy meal each school day; and healthcare; and
- effective access to two services: healthy nutrition and adequate housing.

The purpose of the present report is to assess the extent to which low-income children in Croatia do indeed have effective (or effective and free) access to these services.

In Croatia, every child of the appropriate age has the right to enrol in a kindergarten or school institution where early and pre-school education is provided; but ECEC is not mandatory, except for a short pre-school programme. The responsibility for financing and providing ECEC rests almost exclusively with cities and municipalities. Free access to ECEC is mostly available to low-income children whose families receive the guaranteed minimum benefit (GMB). The network of ECEC services is insufficiently developed, and there is a lack of educators.

The government finances compulsory textbooks for all primary school pupils, and compulsory textbooks only for those secondary school students who receive the GMB. Basic school materials and extramural activities are not financed for primary or secondary school students. Two types of cash benefits are usually used to help meet educational costs: compensation for the personal needs of students placed in a dormitory, and one-off cash benefits in the social welfare system.

Under the universal healthcare system, all health services are in principle free for all children, including low-income children. However, there are some challenges in making some health services accessible and available, because of long waiting lists for some specialist examinations and due to an unequal regional distribution of healthcare services (these challenges are faced especially by low-income children in rural and remote areas).

From the beginning of the second semester of the 2022/2023 school year, all primary school students in Croatia (including low-income students) have the right to one free meal per day while attending school. However, many primary schools do not have a school kitchen, a cook or a dining room, meaning that some students are provided with a cooked meal and some with a cold meal. Secondary schools are not obliged to provide meals for their students.

There are no systematic data available to monitor access to healthy nutrition for low-income children. When children are outside the educational system, there are no additional nutrition assistance programmes for these children (except perhaps soup kitchens or the distribution of humanitarian food packages). Low incomes and low social transfers are key barriers to healthy nutrition, as well as the high inflation rate (especially rising food prices).

Low-income households with children are entitled to two types of housing benefits: housing allowance, and a benefit for vulnerable energy consumers. Housing allowance is granted only to GMB beneficiaries, while the second one can be received by beneficiaries of: the GMB; personal disability allowance; the national benefit for older people; a financial allowance for unemployed Croatian war veterans and their family members; and a financial allowance for civilian victims of the Homeland War. Local authorities are responsible for the provision of social housing, but the stock of social housing is very limited and in recent years only larger cities have invested in social rented housing.

Introduction

On 14 June 2021, the EU Member States unanimously adopted the Council Recommendation (EU) 2021/1004 establishing a “European Child Guarantee” (ECG).¹

The objective of the ECG is to offset the impact of poverty on children and to prevent and combat their social exclusion. To this end, it is recommended that Member States guarantee for “children in need” (defined as people **under 18** who are at risk of poverty or social exclusion – AROPE):

- effective and free access to four services: high-quality early childhood education and care (ECEC); education and school-based activities;² at least one healthy meal each school day; and healthcare; and
- effective access to two services: healthy nutrition and adequate housing.

According to the ECG Recommendation, **effective access** means “a situation in which services are readily available, affordable, accessible, of good quality, provided in a timely manner, and where the potential users are aware of their existence, as well as of entitlements to use them” (Article 3d). **Effective and free access** means “effective access” to the services, as well as free-of-charge provision – either by organising and supplying such services or by providing “adequate benefits to cover the costs or the charges of the services, or in such a way that financial circumstances will not pose an obstacle to equal access” (Article 3e).

The Recommendation directs the Member States to prepare action plans, covering the period until 2030, to explain how they will implement the Recommendation.³ These plans are to be submitted to the European Commission.

The purpose of the present report is to assess the extent to which children AROPE have effective and free access to four of the six services covered by the ECG and effective access to the other two (see above). Given that the eligibility criterion (or criteria) for accessing those services in individual Member States (at national and/or sub-national level, depending on how the service is organised) is/are not based on the EU definition of the risk of poverty or social exclusion,⁴ the report focuses on access for **low-income children** to each of these services, using the national low-income criterion (or criteria) that apply (e.g. having a household income below a certain threshold or receiving the minimum income). Throughout this report, “low-income children” is to be understood as children living in low-income households.

In Croatia, one of the six services covered by the ECG is primarily regulated at sub-national level. For this service, the report seeks to provide a general picture of the (effective/free) access for low-income children in the country. In addition to this general picture, if access

¹ The full text of the ECG Recommendation is available at: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=uriserv%3AOJ.L_.2021.223.01.0014.01.ENG&toc=OJ%3AL%3A2021%3A223%3ATOC.

² According to the Recommendation (Article 3f), “school-based activities” means “learning by means of sport, leisure or cultural activities that take place within or outside of regular school hours or are organised by the school community”.

³ Once they have been submitted to the European Commission, the plans are made publicly available online at: <https://ec.europa.eu/social/main.jsp?catId=1428&langId=en>.

⁴ According to the EU definition, children are AROPE if they live in a household that is at risk of poverty (below 60% of median income; hereafter AROP) and/or severely materially and socially deprived, and/or (quasi-)jobless. For the detailed definition of this indicator and all other EU social indicators agreed to date, see: <https://ec.europa.eu/social/main.jsp?catId=756&langId=en>. In 2021, EU Member States agreed a target to be reached by 2030: a reduction in the number of people AROPE in the EU by at least 15 million, including at least **5 million children**.

differs substantially across the country, it illustrates these geographical disparities by providing an example of sub-entities in the country that perform well and those that perform poorly.

The report is structured by service:

- effective and free access to high-quality ECEC;
- effective and free access to education and school-based activities;
- effective and free access to at least one healthy meal each school day;
- effective and free access to healthcare (e.g. free regular health examinations and follow-up treatment, and access to medicines, treatments and support);
- effective access to healthy nutrition;⁵ and
- effective access to adequate housing.⁶

1. Early childhood education and care (ECEC)

This section describes the situation regarding effective and free access for low-income children to ECEC services.

1.1 Mapping accessibility and affordability of ECEC

Table 1.1: Accessibility and affordability of ECEC at the national level

Childcare (usually under age 3)		Pre-school setting (usually age 3 to compulsory school age)	
Accessibility	Affordability	Accessibility	Affordability
ENT-ALL6months	NO	ENT-ALL3years	NO

Note: "ENT-ALLxxx" means a legal entitlement for all children from the age of xxx. "NO" in the affordability column means not free for low-income households. If the information differs between centre-based and home-based care, the information provided applies to centre-based care.

A universal legal entitlement to publicly funded childcare (Table 1.1) is provided by the Pre-school Education Act), Article 20 of which states: "Every child of early and pre-school age has the right to enrol in a kindergarten or school institution where early and pre-school education is provided". However, ECEC is not mandatory, except for a short pre-school programme consisting of 150-250 hours in the year before starting primary school (at age 5 or 6). In practice, this programme is often kept to a minimum and is insufficient for children at risk. Since ECEC is not mandatory, the law does not stipulate that the state or regional/local government is obliged to provide funding for ECEC programmes for every child in its area. In other words, there is no uniform framework for defining the amount of subsidies and parental contributions to the cost of the programmes themselves, or the mechanism for transferring state funds to local authorities for ECEC services (Dobrotić *et al.*, 2018; UNICEF, 2020).

The ECEC system is fully decentralised, and the responsibility for financing and providing regular ECEC programmes rests almost exclusively with cities and municipalities. ECEC is financed almost entirely by local government (99% of funds are from this source), and less

⁵ According to the Recommendation (Article 3g), "healthy meal" or "healthy nutrition" means "a balanced meal consumption, which provides children with nutrients necessary for their physical and mental development and for physical activity that complies with their physiological needs".

⁶ According to the Recommendation (Article 3h), "adequate housing" means "a dwelling that meets the current national technical standards, is in a reasonable state of repair, provides a reasonable degree of thermal comfort, and is available and accessible at an affordable cost".

than 1% of funds come from the state budget. However, under the 2022 Recovery and Resilience Facility,⁷ Croatia was obliged to adopt a new model of financing ECEC by the end of the first quarter of 2023. The model should enter into force in the forthcoming (2023/2024) school year. It provides for a variable level of national budget reimbursement of ECEC costs, depending on the town/municipality development index. Once implemented, the model should provide some fiscal capacity and financial stability to the most vulnerable municipalities and allow for easier recruitment of staff.

At the central (state) level, pedagogical standards are set, experts are given guidelines and accredited, and the implementation of the pre-school programme is monitored. The territorial fragmentation of Croatia (127 cities and 428 municipalities), the weak fiscal capacity of a significant number of local government areas (especially municipalities), and the lack of investment by the central government in new capacity, have resulted in a poorly developed network of services, accompanied by large regional inequalities in the accessibility and affordability of programmes (Dobrotić *et al.*, 2018).

There are not enough places in institutions for all children of pre-school age in many local government areas. According to official data published in 2022, 241 local authorities out of 555 (43.4%) reported that they did not have places for all children (Central State Demographic Office, 2022). This means that each local government area establishes its own priority criteria or criteria for free services. If there are not enough kindergarten places for all children in the existing public institutions, the Pre-school Education Act prescribes that children who turn 4 by 1 April of the current year have priority in the enrolment for the next pedagogical year; and after that children are enrolled in such a way that the following groups have priority in enrolment: (a) children of Croatian disabled war veterans; (b) children from families with three or more children; (c) children of parents both of whom are employed; (d) children with developmental disabilities and chronic diseases; (e) children of single parents; (f) children of people with disabilities; (g) children in foster families; (h) children living in the same area as the kindergarten; (i) children of parents who receive a child allowance; and (j) children of parents who receive the guaranteed minimum benefit (GMB).⁸ However, whether a group of children from low-income households will have priority in enrolment is determined exclusively by the local government area that establishes the facility.

A right to free services is not provided by the Pre-school Education Act: it is left to each local government area to decide which groups of children are entitled to free ECEC services.

As ECEC is primarily regulated at sub-national (local) level, the accessibility and affordability of ECEC for low-income children will be briefly analysed by reference to local government areas that perform well (Table 1.2) and areas that perform poorly (Table 1.3).

Table 1.2: Accessibility and affordability of ECEC in well-performing local government areas

Childcare (usually under age 3)		Pre-school setting (usually age 3 to compulsory school age)	
Accessibility	Affordability	Accessibility	Affordability
ENT-ALL6months	FREE-ALL6months	ENT-ALL3years	FREE-ALL3years

Note: "ENT-ALLxxx" means a legal entitlement for all children from the age of xxx. "FREE-ALLxxx" means free for all children from the age of xxx. If the information differs between centre-based and home-based care, the information provided applies to centre-based care.

⁷ https://planoporavka.gov.hr/UserDocsImages/dokumenti/Countersigned-croatia-rrf-oa_0.pdf?vel=4507290

⁸ The GMB is a minimum income scheme that ensures the basic living needs of a single person or household that does not have sufficient funds to meet basic living needs.

Table 1.3: Accessibility and affordability of ECEC in low- performing local government areas

Childcare (usually under age 3)		Pre-school setting (usually age 3 to compulsory school age)	
Accessibility	Affordability	Accessibility	Affordability
NO	NO	NO	NO

Note: “NO” in the accessibility column means no entitlement or priority for low-income children. “NO” in the affordability column means not free for low-income households. If the information differs between centre-based and home-based care, the information provided applies to centre-based care.

Table 1.2 refers to cities and municipalities that provide free ECEC services for all children, including low-income children. According to an official report, there were 24 such local government areas in Croatia: four cities and 20 municipalities (Central State Demographic Office, 2022). Among these cities and municipalities there were both economically developed and underdeveloped local government areas. All children in these cities and municipalities can therefore attend ECEC programmes, and the services are free for all children.

On the other hand, there are several municipalities that do not co-finance ECEC for low-income children or any other groups of children (Table 1.3). As a rule, such local government areas do not have kindergartens in their territory, and children can only attend the pre-school programme in the year before starting primary school – often for a minimum duration due to a lack of co-financing. In these local government areas, children are exclusively cared for informally within the family (i.e. by grandparents, or often by unemployed or inactive parents). Low-income parents can hardly afford to place their children in private kindergartens or kindergartens in neighbouring local government areas, where they must pay the market price of the services.

1.1.1 Conditions for qualifying as a “low-income child”

A 2018 study found that about 54% of local government areas gave preference to certain groups of children when enrolling in nurseries and kindergartens without clearly defined priority criteria, and only about 38% had a clearly defined scoring system based on certain criteria (Dobrotić *et al.*, 2018). Local government areas (cities and municipalities) used 63 different criteria when enrolling in kindergartens, classifiable into 17 broad categories. Most of the criteria mentioned are prescribed by the Pre-school Education Act. Cities and more developed local government areas used a greater number of criteria than municipalities and less developed local government areas. Regarding priority access for low-income children, two criteria were most often used: receiving a child allowance, or the GMB (social assistance). 50% of local government areas, in which 44% of pre-school-age children lived, used the child allowance criterion; and 9% of local government areas, in which 40% of pre-school-age children lived, used the GMB criterion (Dobrotić *et al.*, 2018). In addition, in many local government areas one or both parents were required to be employed.

Similarly, free access to ECEC services is available to low-income children in some local government areas, and these are mostly children whose families receive the GMB or have monthly income per family member lower than a certain threshold. There are no other conditions that have to be met on top of the low-income criterion.

1.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)

Data on the total number of children (or of low-income children) who have free access to ECEC services are not available. In Croatia in 2021, there were 13.7% (or 26,000) children under 6

who were AROPE.⁹ Data from several sources indicate that AROPE children have a much lower participation rate in ECEC services than non-AROE children (UNICEF, 2020, 2021; Stubbs *et al.*, 2017; Eurostat). According to 2019 data, 3.5% of AROPE children in Croatia aged 0-2 used ECEC services, compared with 17.8% of non-AROE children; and 31.7% of AROPE children aged 3 to compulsory school age participated in ECEC, compared with 62.5% of non-AROE children of the same age (Figures A1 and A2 in Annex). Compared with other EU27 Member States, Croatia had the lowest participation rate in ECEC by AROPE children aged 3 to compulsory school age, and the second lowest rate by AROPE children aged 0-2 (only Slovakia had a lower one) (Figures A1 and A2 in Annex).

According to 2014 data, only 24% of children in families receiving the GMB participated in ECEC (Šučur *et al.*, 2015, 112); and a 2017 study found that 33% of children whose families received the GMB participated in ECEC (Stubbs *et al.*, 2017, 46). ECEC programmes were attended by only 13% of children of the Roma national minority (Kunac *et al.*, 2018) and 29% of Roma children receiving the GMB (Šučur *et al.*, 2015, 112). Pre-school children in households receiving the GMB made up only a relatively small proportion of AROPE children under 6. At the end of 2021, 1,805 children aged 0-4 benefited from the GMB, and 3,021 aged 5-9 (Ministry of Labour, Pensions, Family and Social Policy, 2022). It is very likely that children under 6 who received the GMB (about 2,400) made up less than one tenth of the total number of AROPE children in that age group.

The income thresholds for the child allowance and GMB schemes differ significantly. For a household consisting of two adults and two children to be entitled to child allowance, it is necessary to have a net income per household member lower than €309 per month in the previous year. This means that for this type of household the income threshold is €1,236. On the other hand, the same type of household is entitled to the GMB if the household has total net monthly income lower than €373. However, the actual income may be higher because more than 20 different types of income are disregarded when claiming the GMB.¹⁰ If we add only the minimum housing costs to the GMB amount, which according to the Social Welfare Act amounts to 30% of the corresponding GMB, then the income threshold for the GMB for a household with two adults and two children would be €485.

If these thresholds are compared with the AROP threshold (60% of the median equivalised income) for the same type of household (two adults and two children) – which amounted to €851 per month in 2021¹¹ – it turns out that the income threshold for obtaining child allowance is about 45% higher than the AROP threshold, while the income threshold for the GMB is 56% lower than the AROP threshold if we exclude the minimum housing costs from the benefit, or 43% lower if we take housing costs into account.

In the draft national action plan for implementation of the recommendation of the Council of the EU on the establishment of the European Guarantee for Children, the largest groups of children in need were identified as follows: children of the Roma national minority; children who live in families receiving the GMB; children in less developed (especially rural) areas; children with developmental disabilities; migrant children (unaccompanied children, asylum-seekers, and foreigners under subsidiary and temporary protection aged under 18); children in alternative care; children from Ukraine and all other displaced children; and children whose

⁹ Eurostat, EU-SILC, ILC_PEPS01N, downloaded on 1 February 2023.

¹⁰ For example, according to the Article 30 of the Social Welfare Act 2022, the following income transfers are disregarded: housing allowance; benefit for vulnerable consumers of energy; allowances due to physical damage; orthopaedic allowance; personal disability allowance; assistance and care allowance; child allowance; compensation provided by local and regional government; and scholarships for the education of pupils or students while attending regular schooling or studying.

¹¹ Eurostat, EU_SILC and ECHP, ILC_LI01, downloaded on 1 February 2023.

parents are in prison (Government RC, 2022). However, the groups of children mentioned do not have free access to ECEC in all local government areas. There is no information on non-take-up among these groups of children.

1.2 Main barriers to effective and free access to ECEC for low-income children

1.2.1 Financial barriers

Where access to ECEC services is not free, high levels of parental contributions to the costs of the programmes represent a significant barrier to the participation of children from families of low socio-economic status. Data from the 2016 EU-SILC¹² ad hoc module showed that ECEC services were easily or very easily affordable to only 26% of families, while 5.7% of families stated that they could afford services only with great difficulty.¹³ In a 2013 survey, 66% of parents receiving the GMB stated that they could not afford ECEC for their children, although 86% of them considered it necessary for child development (UNICEF, 2020). In a 2017 survey, 30.9% of parents who were beneficiaries of the GMB stated that some of their children did not attend kindergarten due to financial reasons (Stubbs *et al.*, 2017). The authors found that the rate of kindergarten attendance varied with regard to the income level of GMB recipients. The latter were divided into two groups: the “poorer” and the “less poor” (the poorer were those whose income per household member was lower than the median income for GMB parents, while the less poor were those whose income per household member was higher than the median). 35.9% of the less poor stated that all their children attended kindergarten compared with 29.8% of the poorer (Stubbs *et al.*, 2017).

In most counties in Croatia, the basic amount of parental contribution to the cost of ECEC per child is 9-12% of the average monthly net salary. ECEC programmes are least affordable for parents in Krapina-Zagorje county, where they pay 15.6% (Dobrotić *et al.*, 2018; UNICEF, 2020, 2021). Since the legal framework does not prescribe uniform standards that would define the market price of pre-school programmes, or the (maximum) level of parental contributions, these are left to local government areas to determine.

1.2.2 Non-financial barriers

The network of ECEC services is insufficiently developed and there is a problem of insufficient spatial capacity (not enough places for all children in kindergartens and crèches). Although the participation of children in ECEC programmes has been gradually increasing (Table A1 and A2 in Annex), large regional and local differences are still visible. The situation is less favourable in smaller settlements and sparsely populated areas. In sparsely populated areas, 13.7% of children attended nursery programmes in 2018, and 41.7% attended kindergarten programmes (compared with 23.7% and 77% respectively in more densely populated areas). In local government areas belonging to the first to fourth level of the development index,¹⁴ 2.5-9.9% of children attended nursery and 14.8-30% attended kindergarten programmes (versus 20.8-27.9% and 58.2-77.4% respectively for children in the areas belonging to the sixth to

¹² European Union statistics on income and living conditions.

¹³ Eurostat, EU-SILC, ILC_ATS03, downloaded on 1 February 2023.

¹⁴ The development index is a composite indicator that is calculated as a weighted average of six standardised indicators of socio-economic development: (a) average income per capita; (b) average per capita revenue in a local government area; (c) average unemployment rate; (d) general population movements; (e) level of education of the population; and (f) aging index. Local government areas are ranked according to the development index into eight groups or classes. In the first four classes are local areas with a development index below the national average, and in classes 5-8 are those above the national average.

eighth development level) (Dobrotić *et al.*, 2018; Matković *et al.*, 2020; UNICEF, 2020). In a 2017 survey, 9.4% of parents who were beneficiaries of the GMB stated that there was no kindergarten near their place of residence, or it was too far away (Stubbs *et al.*, 2017).

There are three public sources of financing for ECEC in Croatia: the state budget, EU projects, and funds from local government. Funding from the state budget is considered insufficient, EU funding is perceived as a significant incentive for the development of the pre-school education system, and funding from local sources is considered the main cause of regional and territorial inequalities in access to ECEC. Cities and municipalities on average allocate 10.2% of their budgets to ECEC, but expenditure varies from less than 1% in 78 local government areas¹⁵ (and less than 6% in 233 of them) to more than 15% in 46 of local government areas (UNICEF, 2020). Co-financing of the mandatory pre-school programme by central government is very low, which in practice leads to some local government areas shortening the duration of the mandatory pre-school programme from the prescribed 250 hours to a minimum of 150 in the year before the child starts primary school. The pre-school programme usually lasts 6-10 weeks (about 5 hours a day). However, the number of hours per day can be less (e.g. 3 hours every second day of the week for those in the shorter programme). This is a frequent practice in less developed local government areas.

Due to the poorly developed network of services, only a small number of municipalities and cities (17%) give priority in enrolment to all those groups of children prescribed by the law. This means that the enrolment of low-income children may be low on the list of priorities of an individual local government area. Priority to enrolling the children of working parents is most common (81% of cities and municipalities), followed by children of single parents (66%), children of Croatian disabled war veterans (62%), children from families with three or more children (60%), children in the year before starting school (59%), children with developmental disabilities (52%), children in foster families (52%) and children of parents receiving child allowance (50%) (Dobrotić *et al.*, 2018). Certain groups of children at risk have particular difficulty in accessing ECEC services, such as children of one or more unemployed parents. There is a reluctance to include the children of unemployed parents because it is often stated that these parents are at home anyway, so their children's participation in ECEC is not so important to them. The situation is similar with children from single-parent families, who often cannot collect a sufficient number of points according to different criteria to enrol their children in the kindergarten because the criteria, as already emphasised, strongly favour employed parents.

In addition, in some counties, such as Međimurje, many kindergartens are privately owned (45% in the 2019/2020 pedagogical year), meaning that they are not subject to legal provisions regarding the priority enrolment of low-income children, even though their work is co-financed by local and regional government (UNICEF, 2021). Međimurje is a small county in terms of area, and is known for the development of crafts, and small and medium-sized businesses: the larger share of private kindergartens can be partly explained by these entrepreneurial strategies.

The next problem is the lack of educators, which can slow down the development of the system in terms of new capacity and the quality of the programmes themselves. According to a report, the retirement of existing educators over the 2021-2026 period will contribute to an additional slowdown in the expansion of the service network; maintaining the existing number of educators would require an extra 100-300 educators being hired each year (Dobrotić *et al.*, 2018). In order to meet the national pedagogical standard, an extra 3,300 educators would be needed (National Pedagogical Standard for Pre-school Education, 2008); while to achieve the

¹⁵ There are 555 local areas in total (428 municipalities and 127 cities).

Barcelona goals by 2030, an extra 9,148 educators would be needed, mostly in less developed areas.

Additionally, job insecurity within the ECEC system is on the rise. Research has shown that a fifth of employees in the ECEC system worked on fixed-term employment contracts, which significantly exceeds the usual situation in the public sector, where the average of employees with fixed-term employment contracts is significantly lower, at 6-7% (Matković *et al.*, 2020). Precarious employment is equally present in public and private/religious kindergartens. One of the specifics of the system is the seasonality of employment: some educators are temporarily dismissed before the summer and annual holidays, when kindergartens expect a reduced number of children, and then rehired in the autumn. In addition to the lack of educators, there is a shortage of other professional staff (e.g. speech therapists, and other educational and rehabilitation specialists).

Barriers to accessing services can also be found in the fact that some parents (including those in poverty) still do not sufficiently recognise the importance of pre-school programmes; or they may consider the programmes to be of poor quality, and organise care for the child within the family. Eurostat data for 2021¹⁶ showed that 51.2% of nursery-age children and 23.7% of kindergarten-age children were cared for exclusively by their parents. Some parents are worried about the quality of the programmes due to large groups. Mostly inactive parents or parents who have the support of grandparents in organising care for their children do not see the need for them to attend a pre-school programme (Dobrotić, 2021). Research among members of the Roma national minority showed that almost half of Roma parents (49.4%) did not send their children to kindergarten because they believed that the children were too young, while 17% of parents did not see the need to send their children to kindergarten because someone was able to look after them at home (Kunac *et al.*, 2018).

1.3 Free meals provision for low-income children in ECEC

In local government areas where access to ECEC services is free, children are also entitled to one or more free meals in kindergarten, depending on the length of their stay. As previously indicated, the criterion for access to free services or free meals for low-income children is often receiving the GMB or child allowance, or otherwise an income threshold defined by the local government area. In accordance with the national pedagogical standard, the nutrition of children in kindergartens is determined by a regulation issued by the minister responsible for healthcare with the approval of the minister responsible for education (National Pedagogical Standard for Pre-school Education, 2008). Children staying in the 3-hour programme are thus entitled to one meal; if they stay 4-6 hours they get two meals; if they stay 7-8 hours they get three meals; and if they stay 9-10 hours they get four meals.

2. Education and school-based activities

This section describes the situation regarding effective and free access for low-income children to education and school-based activities.

Section 2.1 maps the main school costs in public primary and secondary education, distinguishing between the following:¹⁷

- compulsory basic school materials (schoolbag, pens, glue, scissors, etc.);

¹⁶ Eurostat, EU-SILC, ILC_CAPARENTS, downloaded on 1 February 2023.

¹⁷ Tuition fees charged by private schools are not covered.

- compulsory school materials (textbooks, school supplies, notebooks, etc.);
- compulsory specific clothing (uniform, sports clothing);
- IT equipment requested by the school;
- sports equipment or musical instruments requested by the school;
- compulsory extramural activities (e.g. school trips, sport, culture) that are part of the curriculum;
- other compulsory fees or costs; and
- transport costs to or from school.

Section 2.2 briefly describes the cash benefits specifically intended to help meet educational costs.

Finally, Section 2.3 seeks to identify the main barriers that prevent low-income children from having effective and free access to “school-based activities” as defined in the Council Recommendation establishing the ECG (see "Introduction" section). Given that the distinction between these activities and some of the activities covered above – especially the “compulsory extramural activities (e.g. school trips, sport, culture) that are part of the curriculum” – may not always be clear-cut, the focus of Section 2.3 is specifically on school-based activities that are not part of the curriculum.

2.1 Mapping the main school costs in public primary and secondary education

Table 2.1a: School costs of primary education (free for all/low-income children)

Basic material	Books	Clothing	IT	Sports or music equipment	Extra-mural activities	Other fees or costs	Transport
NO	ALL	NO	POOR	NO	NO	NA	ALL

Note: “ALL” means that this category is free for all children. “POOR” means that it is free for low-income children. “NO” means that most/all items in the category are not free for low-income children. “NA” (not applicable) means that this category is not requested/compulsory in the country.

Table 2.1b: School costs of secondary education (free for all/low-income children)

Basic material	Books	Clothing	IT	Sports or music equipment	Extra-mural activities	Other fees or costs	Transport
NO	POOR	NO	POOR	NO	NO	NA	POOR

Note: “POOR” means that it is free for low-income children. “NO” means that most/all items in the category are not free for low-income children. “NA” (not applicable) means that this category is not requested/compulsory in the country.

Compulsory textbooks for all primary school pupils in Croatia are free and have been financed from the central state budget since 2018, when the parliament enacted the Textbooks and Other Educational Material for Primary and Secondary Schools Act. In addition, under the act, the government may, subject to available funds, finance the purchase of textbooks for secondary school students. The government finances compulsory textbooks only for secondary school students who are members of households that receive the GMB (Decision on financing compulsory textbooks for secondary school students, 2022).

Data presented in Tables 2.1a and 2.1b reveal that the costs of basic school materials (such as schoolbags, pens, glue, and scissors) are not covered for primary or for secondary school

students, and could be a serious financial burden for students from low-income households. The data might also suggest that there is no funding from national level¹⁸ for physical and musical education, equipment or extramural activities (such as excursions, schools in nature, and graduation trips) for children from low-income households (Družić Ljubotina, 2022; UNICEF, 2021). However, according to research results, some of these costs for basic school materials or extramural activities may be subsidised for low-income students from local government budgets (cities or municipalities) (Šučur *et al.*, 2016): but data for all local government units are not available and it is hard to make any estimate.

The Ministry of Science and Education¹⁹ provided funds to secondary schools from the state budget for the 2019/2020 school year for the purchase of tablets for students whose families are GMB beneficiaries,²⁰ while tablets for primary school students are procured from ESF funds. However, the Ombudsperson has highlighted the problem of a lack of computers and internet connections among children living in poverty, pointing out that most students from families living in poverty, including Roma, could not afford appropriate IT equipment for their children (Ombudsperson for Children, 2020). This situation puts students from low-income households in a disadvantaged position compared with their school peers – which may produce significant negative consequences for their educational opportunities, especially during the COVID-19 school lockdown and online education.

2.1.1 Conditions for qualifying as a “low-income child”

The low-income criterion in Croatia at national level refers to children living in households receiving the GMB.

2.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)

The AROP income threshold for a household consisting of two adults and two children, according to the latest available data for 2021, amounted to €851 monthly, while the same household is entitled to the GMB if the total net household income is less than €373 a month.

According to Eurostat data for 2021, 127,000 children under 18 in Croatia were AROPE, while at the same time a statistical report revealed that only 11,150 children (less than 10% of those AROPE) were receiving the GMB (Ministry of Labour, Pensions, Family and Social Policy, 2022).

It is clear from the aforementioned data that the official low-income criterion (receipt of the GMB) is too narrow, meaning that many children living in households with income below poverty thresholds are not eligible for subsidies for educational costs such as books or IT equipment. This leads to the conclusion that the low-income criterion in Croatia should be changed to encompass all schoolchildren living in households exposed to poverty. Another important suggestion would be to make the AROP threshold (instead of GMB receipt) the new eligibility criterion for different educational cost subventions from the central state budget. In

¹⁸ Such funding may exist in some regional and local government units, but in practice it is very variable, and is more an exception than a rule.

¹⁹ <https://mzo.gov.hr/vijesti/divjak-1-36-milijuna-kuna-srednjim-skolama-za-nabavu-tableta-ucenicima-slabijeg-socijalno-ekonomskog-statusa/3314>

²⁰

<https://mzo.gov.hr/UserDocsImages//dokumenti/Obrazovanje/OpremanjeSkola//Odluka%20o%20dodjeli%20sr-edstava%20srednjim%20skolama%20za%20nabavu%20tableta%20ucenicima%20obitelji%20korisnici%20mimalne%20naknade%202019-2020.pdf>

Croatia there are no publicly available research or data about non-take-up, or groups of children over-represented in the AROPE who lack free access.

2.2 Cash benefits whose specific purpose is to help meet educational costs

At national level there are two types of cash benefits that are usually used to help meet educational costs, both provided by central government (Ministry of Labour, Pensions, Family and Social Policy 2022). The first is a cash benefit named “compensation for the personal needs of accommodation user”, available only to people who use accommodation services – in the education system, it is aimed at primary or secondary students placed in a dormitory. It is granted to a user who cannot finance personal needs from their own income (for primary school students the monthly amount is €66, and for secondary school students it is €93). The second benefit is a one-off cash benefit in the social welfare system, which in practice is very often used by low-income households, mostly GMB beneficiaries, to finance basic school materials for their children and other educational costs not covered from any other source, and which often represent a serious financial burden for students from low-income households. Children in foster care families may apply for a one-off cash benefit for the purchase of compulsory school textbooks. On the other hand, even though there is no available research about this topic, it may be estimated that these cash benefits are not sufficient to cover different (hidden) costs (such as for extramural activities and IT) in primary and secondary education for low-income students.

Beside benefits at the national level, there are also cash benefits provided by regional or local government (cities and municipalities) to low-income families to help them meet different costs connected with the education of their children. A study found that regional and local government provided 11 different types of compensation for primary and secondary school students, usually from low-income families; these benefits mostly related to co-financing of costs for transport, accommodation, and textbooks or basic materials (Šućur *et al.*, 2016). In Croatia there are no other conditions (household type, work attachment of parents, etc.) that have to be met on top of the low-income criterion. Data about the non-take-up rate and number of children receiving one-off cash benefits are not publicly available. There are no other cash benefits to help other groups of children in Croatia.

2.3 Main barriers to effective and free access to school-based activities for low-income children

2.3.1 Financial barriers

Some schools in Croatia organise school-based activities that are not part of the curriculum. These include various sporting activities, chess playing, cultural activities (museums and theatres), and excursions.

These activities are not funded at the national level,²¹ which means that their cost has to be borne entirely or partially by parents. As a result, low-income children do not usually take part in them (Družić Ljubotina, 2022; UNICEF, 2021). Moreover, this situation creates a feeling of exclusion among low-income children, which can produce negative effects on their psychosocial development.

²¹ They are sometimes covered for low-income children by the parents of other students, by school solidarity funds, or through cash benefits from local government: but these are more an exception than a rule.

2.3.2 Non-financial barriers

One non-financial barrier experienced by low-income children from rural areas is the organisation and availability of transport to school, especially to secondary schools located in cities/towns. Children from low-income families more often live in rural communities, which lack various resources and social services compared with urban environments. One example is transport services: even though transport costs for primary and secondary school students are subsidised (either fully or partially), the problem is a lack of public (or other organised) transport to schools. The main problem for low-income children from rural areas is that they are therefore unable to attend extramural or extracurricular activities, which are often organised in the early evening when regular school classes have finished and bus services are often not available. This situation puts these students at a disadvantage compared with those from urban areas (Knezić and Opačić, 2021).

3. Free meals at school

This section describes the situation regarding effective and free access for low-income children to at least one free healthy meal each school day.

3.1 Mapping free provision of school meals

From the beginning of the second semester of the 2022/2023 school year, all primary school students in Croatia (including low-income students) have the legal right to one free meal per day while attending school (Act on Amendments to the Education in Primary and Secondary Schools Act, 2022). However, this does not permanently solve the problem of financing free school meals, because the act states that the right is subject to there being sufficient funds in the state budget. For the second semester of the 2022/2023 school year, the government has decided to finance the nutrition of each primary school student in the amount of €1.33 per day. These funds will be transferred monthly to the regional and local government areas that established the schools, and which are obliged, according to the Education in Primary and Secondary Schools Act, to co-finance and organise nutrition for students.

The government decision also states that nutrition must, to the greatest extent possible, be organised in accordance with the nutrition norms for students in primary schools and the national guidelines for the nutrition of students in primary schools (Ministry of Health, 2013). The former prescribes, among other things, the recommended types of food and meals, the optimal intake of energy and nutrients, the number of meals and the distribution of recommended energy intake per meal. It means that schools are expected to provide each student with a nutritionally valuable cold or cooked meal. However, it is quite clear that many schools will not be able to provide cooked meals, and a nutritional cold meal is considered as a better solution than a child without a meal during the school day. One free meal for all primary school students is an initiative that has been supported by all stakeholders in public and political life in Croatia, because it introduces *"a universal system that will not stigmatise children, that will ensure the right of every child to one free school meal and that will put children's interests and rights first"*.²²

Before these changes, free meals for the poorest primary school students were funded by the FEAD (the Fund for European Aid to the Most Deprived). According to data from the Ministry of Labour, Pensions, Family and Social Policy (which implemented the FEAD projects), about

²² Media report: <https://www.portalnovosti.com/blok-za-obrok>.

€3.5 million was spent during the 2021/2022 school year on school meals for about 27,000 students whose families were recipients of the child allowance, and the projects included schools in 15 counties. However, FEAD funds were limited, relative to the needs of many schools in Croatia. The FEAD allocated about €0.66 per meal per poor student, and now €1.33 will be allocated per meal for each student. So, the annual amount of funds from the FEAD was about €3.5 million, while the government provided about €73.3 million for the 2022/2023 school year. In addition, it was often known in schools which children were in the FEAD programme, and that is why children AROPE were exposed to additional stigmatisation at a sensitive age, thereby violating the children's right to privacy and dignity.

During the 2021/2022 school year, 208,570 primary school students (67% of the total) received school nutrition, out of which 81% had one meal a day, and only 39,911 (19%) had two or more meals.²³ Two or more meals were provided mostly for students who were included in the extended stay (26,178), and these are primarily students in grades 1-4. According to data from the competent ministry, during the same school year free meals were also provided for about 30% of primary school students, meals were partially co-financed for about 20% of students, and for about 50% meals were financed exclusively by their parents or guardians.

Secondary schools are not obliged to provide meals for their students at all and most often do not have kitchens. During the school day, high school students may be able to buy food from a bakery or fast-food restaurant located in the immediate vicinity of the school. It is interesting to mention that in Croatia there is a system of subsidised and organised nutrition for university students, but there is no nutrition support for children in adolescence, which is characterised by high nutritional risks and is the most critical for maintaining healthy eating habits (UNICEF, 2021). Additionally, children of secondary school age are at greater risk of poverty and social exclusion than children of pre-school or primary school age. For example, in 2021 the AROPE rate for children aged 15-19 (mostly high school students) was 22.2%, compared with 18.1% for children aged 6-10, 20.9% for children aged 11-15, and 13.7% for pre-school children under 6.²⁴ High school students who live in poverty often therefore forego meals when they are at school and rationalise their existential needs, claiming that they "can do without breakfast" (Kletečki Radović *et al.*, 2017).

3.1.1 Conditions for qualifying as a “low-income child”

Not applicable: access is free for all children.

3.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)

Not applicable: access is free for all children.

3.2 Main barriers to effective and free access to school meals for low-income children

3.2.1 Financial barriers

Under the new model of one free meal for all primary school students that began in 2023, there should be no financial barriers to access for low-income children. However, the question is whether the central government will fully finance the cost of one meal per day per student in

²³ News report: <https://www.srednja.hr/novosti/pitali-smo-ministarstvo-sto-je-besplatnim-obrocima-u-skolama-koje-nemaju-kuhinju-evo-kako-odgovaraju/>.

²⁴ Eurostat, ILC_PEPS01N, downloaded on 1 February 2023.

the future, as there is currently no such legal obligation. If such an obligation were to be transferred to local or regional budgets, differences in access for (low-income) children from different local or regional government areas would reappear.

Until now, financing school meals has been a significant challenge for some parents of low socio-economic status. According to research by four professors from the Faculty of Law of the University of Zagreb,²⁵ over 15% of primary school principals reported that they had to initiate enforcement proceedings against parents due to non-payment of school meals, and that since the beginning of the COVID-19 crisis the number of parents who could not pay for their children's meals at school had increased. There were cases where the cost of school meals for families with three primary school children that received child allowances could not be financed from the FEAD, so parents had to pay for one or more children from their own funds, which was a significant burden on their household budget.

3.2.2 Non-financial barriers

In order for all primary schools to provide students with one free meal in accordance with the existing pedagogical standards, they should employ a cook and support staff, and have the necessary infrastructure – a school kitchen and dining room, which many schools do not have. According to data from the Ministry of Science and Education, in the 2021/2022 school year meals were organised in 815 out of 924 central schools (88%) and in 700 out of 1,115 regional/local schools (63%). About 85% of central schools had a school kitchen, but local schools, which are mostly in rural areas, had them in smaller numbers.²⁶ Some schools are in a very poor condition or have not yet been rebuilt in the areas recently affected by an earthquake. In six counties (Varaždin, Koprivnica-Križevci, Bjelovar-Bilogora, Virovitica-Podravina, Požega-Slavonia and Istria), all central schools have kitchens. On the other hand, Dubrovnik-Neretva (28%), Split-Dalmatia (41%) and Zadar (65%) have the fewest school kitchens in central schools. This means that students in schools that have the necessary infrastructure (cook, kitchen, dining room, etc.) will be provided with a hot or cooked meal, while students in schools without such facilities will receive a meal with dairy products. According to the explanation of the competent ministry, this meal may include not only sandwiches and fruit but also anything that does not require cooking (yogurt or milk, pastries, pies, etc.). In schools that do not have a school kitchen, one possibility is to deliver food from another school or hire external providers. The problems include how schools with low salaries will attract cooking staff, and how they will succeed in a short time in adapting the space for the consumption of one meal according to pedagogical standards. More than 1,300 cooks are already employed in more than 720 primary schools. The Ministry of Science and Education is going to approve the employment of additional cooks in accordance with objective needs, so that all schools will have the infrastructure and other conditions for preparing and serving hot/cooked meals to primary school students by the 2027/2028 school year. It is envisaged that kitchens and other infrastructure will be financed from the National Recovery and Resilience Plan, with a list of schools that are going to be extended or completely rebuilt throughout the country. Pilot projects are also being implemented involving full-day classes, which would mean that students will have longer breaks and more time available for lunch. Free meals for all students have only been implemented for a month, and there is still not enough information about the difficulties in its implementation.

The Ombudsperson for Children has emphasised that the organisation of school meals depends mostly on the sensibility and financial capabilities of cities and counties, which could

²⁵ Media report: <https://n1info.hr/vijesti/mnoga-djeca-u-hrvatskoj-u-skoli-pojeđu-jedini-topli-obrok-u-danu/>.

²⁶ News report: <https://www.srednja.hr/novosti/pitali-smo-ministarstvo-sto-je-besplatnim-obrocima-u-skolama-koje-nemaju-kuhinju-evo-kako-odgovaraju/>.

again create differences between children depending on where they live. In her view, the lack of necessary space for kitchens and dining rooms cannot therefore be an excuse for not realising every child's right to a free meal at school, and that the schools themselves must think about the fact that education must be accessible to every child.²⁷

4. Healthcare

This section describes the situation regarding effective and free access for low-income children to healthcare, focusing on vaccinations, care from a general practitioner (GP) or infant nurses, specialist care, dental care (not orthodontics) and prescribed medicines.

4.1 Mapping the provision of free healthcare services and products

Table 4.1: Healthcare costs (free for all/low-income children)

Vaccination	GP	Infant nurses	Specialist care	Dental care (not orthodontics)	Prescribed medicines
ALL	ALL	ALL	ALL	ALL	ALL

Note: "ALL" means that all services/products in the category are free for all children.

Croatia has a healthcare system of the Bismarckian type (i.e. it is mainly financed through contributions, and provides universal coverage). Health insurance is extended to many groups besides those employed and paying contributions. Children under 18 and full-time students, the unemployed and other inactive people, are exempt from paying contributions, but have the same rights as those who do pay contributions. That means that all health services in Table 4.1 are in principle cost-free for all children, including children from low-income families. But there are challenges in making some health services in Table 4.1 accessible and available to low-income children.

4.1.1 Conditions for qualifying as a "low-income child"

Not applicable: access is free for all children.

4.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)

Not applicable: access is free for all children.

4.2 Cash benefits whose specific purpose is to help meet healthcare costs

Due to the universal healthcare system and the fact that children below 18 are exempt from co-payments, there are no specific cash benefits in Croatia aimed at meeting healthcare costs for low-income children. Some GMB beneficiaries and low-income families with children may

²⁷ Media report: <https://www.portalnovosti.com/blok-za-obrok>.

use one-off assistance benefits to pay some costs for specific medicines, but precise data are not available.

4.3 Non-financial barriers to effective and free access to healthcare

One of the most important non-financial barriers recognised by the European Commission in the European semester for Croatia was that, although access to healthcare is generally good (based on the principle of universality), unmet health needs due to distance (unequal regional distribution of healthcare services) are among the greatest in the EU (Stubbs and Zrinščak, 2018). This challenge of uneven access to health services is especially important in the context of ensuring the availability of healthcare services to low-income children from smaller rural areas, far from health centres – studies have shown that they are the most vulnerable to health problems (Šučur *et al.*, 2015). This situation is even more problematic for children with disabilities or special needs from low-income families who living in rural and remote areas, where the services of paediatricians, speech therapists and rehabilitators are almost completely unavailable. This risks producing long-term negative effects on their health and psycho-social development. The problem is exacerbated by inadequate public transport in rural and remote areas; according to research, 1 in 3 parents of children with disabilities living in poverty cite financial reasons (e.g. costs of travel to hospitals/rehabilitation centres, medical supplies, and special medicines) as an obstacle to accessing health services (Šučur *et al.*, 2015). Even though preventive healthcare through paediatric and school medicine services is relatively well organised, and the vaccination rate is relatively high, the vaccination rate among Roma children is significantly lower (UNICEF, 2021).

Another very important non-financial barrier in Croatia to accessing healthcare services for low-income children is long waiting lists for specialist examinations and medical treatment (Stubbs and Zrinščak, 2018). For example, speech therapy treatment or eye examinations for children need to be scheduled almost a year in advance.²⁸ There is also a downward trend in the number of paediatricians: in 2019 it fell by 7.1% compared with 2018, and at the same time the number of family medicine specialists fell by 4.7% (CIPH, 2020). There was a shortage of 74 paediatricians in 2021 (UNICEF, 2021) and an analysis in the National Recovery and Resilience Plan (Government of the RC, 2021) showed that there was a shortage of 48 paediatric teams.

During and after the COVID-19 pandemic, the problem of protecting children's mental health, and the regional availability of mental health support services, became an important issue. The problem of adequate protection of children's mental health has long been an issue in Croatia. Children's mental health problems have been aggravated during the COVID-19 pandemic, the lockdown and the earthquakes that recently hit Croatia. There is no adequate answer to this issue due to an insufficient number of mental health professionals working with children and the unavailability of public professional psychological assistance to children (especially to low-income children and children living outside major cities). It is important to invest new efforts to ensure professional psychological and psychiatric assistance to the children affected (Ombudsperson for Children, 2020).

²⁸ <https://www.poslovni.hr/hrvatska/liste-cekanja-probile-sve-granice-na-neke-preglede-ceka-se-i-po-dvije-godine-4346088>

5. Healthy nutrition

This section describes the situation regarding effective access for low-income children to healthy nutrition.

5.1 Main barriers to effective access to healthy nutrition

5.1.1 Financial barriers

There are no systematic data available to monitor access to healthy nutrition for all children or low-income children, as well as no research that would provide a more detailed insight into the obstacles to accessing nutritionally adequate food for children. However, the issue of school and out-of-school nutrition primarily affects children who grow up AROP and have less access to adequate nutrition, especially children who grow up in rural or less developed areas.

When children are outside the educational system (e.g. weekends and holidays), there are no additional nutrition assistance programmes for children AROP. Children may benefit from local soup kitchens, or receive humanitarian food packages. But the suitability for children of the former is questionable, while the latter are unevenly distributed across regions.

A significant number of poor children in Croatia do not have access to adequate nutrition. For example, in 2021, 10.5% of households AROP with dependent children could not afford one meal with meat, fish or a vegetarian substitute every second day.²⁹ This risk was twice as high (20.7%) for single-parent families AROP. A representative survey in 2014 of the well-being of pre-school children whose families received the GMB showed that 40-50% of parents could not afford one meal with meat, fish or a vegetarian substitute every second day for their children (Šučur *et al.*, 2015). In addition, 22% of parents from the Roma national minority, 12% of parents of children with developmental disabilities, and 10% of parents receiving temporary financial assistance, were not able to provide their children with three meals a day. Consumption of fresh fruit and vegetables once a day was not affordable for 35% of children with developmental disabilities, for 48% of children from the Roma national minority, and for 32% of children from families receiving the GMB. Recent data indicate a high level of consumption of low-quality food and drinks among children of the Roma national minority. More than 60% of Roma households drank carbonated drinks and ate chocolate/sweets several times a week or every day. As many as 21.9% of Roma households never ate fish, and 29.6% ate it only once a month or less. The only positive aspect was the relatively high consumption of fruit and vegetables: 23% of households consumed them several times a week, and 50.9% every day or almost every day (Kunac *et al.*, 2018).

Research has shown that children and young people from families of lower socio-economic status have worse eating habits, and that Croatia is one of the countries where children consume the least amount of fruit and vegetables per day (HBSC, 2020). Adolescents from poorer families are also more likely to be overweight or obese, and significantly more often have a negative body image (HBSC, 2020). Croatia has recorded a continuous increase in the number of overweight children. The results of monitoring children's obesity in 2018/2019 showed that 33.1% of girls and 37% of boys aged 8 were overweight and obese. At the national level, the highest proportion of children with excessive body weight and obesity was found in the Adriatic region, where the smallest number of primary schools have school kitchens (Musić

²⁹ Eurostat, EU-SILC, ILC_MDES03, downloaded on 3 February 2023.

Milanović *et al.*, 2021). An increase in obesity was also recorded among older children aged 11, 13 and 15.

Low incomes and low social transfers are certainly the key barriers to healthy nutrition. In 2021, 15.1% of households with dependent children, and 37.5% of single people with dependent children, were AROP.³⁰ According to research on access to a healthy diet in 24 EU Member States, Croatia belonged to the majority of eastern and southern Member States where recipients of the minimum salary or minimum income had insufficient resources to access a healthy diet and rent a dwelling (Penne and Goedemé, 2021). Children from families receiving the GMB and child allowance experience significant obstacles in accessing a healthy diet, as both benefits are very low. For example, the monthly amount of GMB for a household with two adults and two children in 2023 is €373, which is lower than the monthly budget required for a healthy diet in 2015 for the same type of household (€564).³¹ The net minimum salary for 2023 is €560.

In addition, access to high-quality food for low-income children has been even more difficult since 2022 due to the high inflation rate, and especially due to rising food prices. According to the first official estimates, the prices of goods and services for personal consumption, measured by the consumer price index, were on average 12.7% higher in January 2023 than in January 2022. Food prices increased the most in the same period, by 15.4% (Central Bureau of Statistics, 2023).

5.1.2 Non-financial barriers

It can be assumed that non-financial barriers (such as insufficient knowledge by parents of low-income children about healthy nutrition) affect their eating habits, but there is little evidence about it in Croatian research studies. Nonetheless, it is necessary to increase the number of parenting support programmes and pregnancy courses that discuss the topic of a healthy and nutritionally balanced diet, create educational materials for parents on the importance of a healthy diet, and distribute them regularly to families (UNICEF, 2021).

5.2 Publicly funded measures supporting access to healthy nutrition

Social grocery stores can be regarded as one of the measures supporting access to healthy nutrition for low-income children, which are often operated by charities such as the Red Cross and Caritas, but also by local government. They are intended for socially vulnerable families that may or may not already be covered by social programmes at the national, regional and local level. In social grocery stores, users can independently choose food products that are available free of charge. Donors of food are usually supermarkets, individual citizens, but also local authorities (the Ministry of Agriculture can also act as a facilitator in donating food). However, social grocery stores often lack fresh food, and dry food or food packages are more likely to be available. The criteria for exercising the right to food in social grocery stores are determined by local and regional government in co-operation with the competent centres for social welfare. In some cases, users may not receive family packages or benefit from soup kitchens, or sometimes may exceed certain income thresholds. There are no other conditions that have to be met on top of the low-income criterion.

³⁰ Eurostat, EU-SILC and ECHP, ILC_LI03, downloaded on 5 February 2023.

³¹ This food basket for Croatia was estimated under the European reference budgets network (European Commission, 2016).

6. Adequate housing

This section describes the situation regarding effective access for low-income children to adequate housing.

6.1 Publicly funded measures supporting access to adequate housing – Housing allowances

According to the Social Welfare Act, the right to housing allowance is granted to recipients of the GMB. Local government (municipalities and cities) provides housing allowance in the amount of at least 30% of the monthly amount of the GMB. If housing costs are less than 30% of the monthly amount of the GMB, the right to housing allowance is recognised in the amount of actual housing costs. The monthly income threshold for the GMB for a household with two adults and two children is €373. In 2021 there were 14,434 recipients of housing allowance (Ministry of Labour, Pensions, Family and Social Policy, 2022). There are no precise data on the number of households with children receiving housing allowance.³²

The right to housing allowance for a vulnerable energy consumer includes the right to co-financing of the costs of electricity, gas and/or thermal energy.

The status of a vulnerable energy consumer can be achieved by beneficiaries of: the GMB; personal disability allowance (if not provided with accommodation or organised housing); a national allowance for older people; a financial allowance for unemployed Croatian veterans from the Homeland War and their family members; and a financial allowance for civilian victims of the Homeland War.

The amount of the allowance for a vulnerable energy consumer is up to €27 per month; exceptionally in the period from 1 October 2022 to 31 March 2023 it could reach a maximum monthly amount of €66. In 2021 there were 59,287 recipients of this benefit. There are no available data on the number of households with children that receive the benefit for vulnerable energy consumers.

There are no studies/data analysing whether these allowances adequately cover housing costs for low-income households with children.

6.2 Publicly funded measures supporting access to adequate housing – Social housing

6.2.1 Mapping the provision of social housing

Local authorities are responsible for the provision of social housing. The stock of social housing is very limited and in the last 20 years only larger cities have invested in social rented housing (Bežovan, 2019). According to the application lists, the high demand for social rented housing is evident in larger cities. In the city of Zagreb, the final list of priority cases for giving flats for renting included 601 households in 2021. The stock of social rented housing in the City of Zagreb is only 6,743 flats, which represents 1.7% of the total housing stock.

Based on its decision about renting flats, every five years the City of Zagreb announces a tender for the allocation of social flats to people who have not solved their housing problem, or

³² Given that only GMB beneficiaries are entitled to housing allowance and that households with children make up about 21% of all households receiving GMB, the number of households with children receiving housing allowance is estimated at about 3,000.

who do not have the possibility of solving it in another way. Before they can submit an application, people must have lived in the territory of the City of Zagreb continuously for at least 10 years. A flat is rented for a fixed period of five years, with a protected rent, to a citizen of the City of Zagreb who does not own a habitable house or flat in the territory of Croatia (and nor do the members of their household). People are eligible for social rented housing if the total average monthly income per member of their household does not exceed 50% of the average monthly salary paid in the economic sector of the city of Zagreb in the previous year.

Additional criteria are housing status, the applicant's social status determined according to income, the number of household members, incapacity for work, and mental or physical impairment of a minor member of the household.

Low-income households with children, if they fulfil the criteria mentioned, get priority access to social rented housing in the City of Zagreb.

6.2.2 Main barriers to effective access to social housing

6.2.2.1 Financial barriers

Cities lack affordable funding to invest in social rented housing.

6.2.2.2 Non-financial barriers

Lack of social rented housing is a non-financial barrier. In addition, a lack of political will to deal with this issue is evident at national and local levels (Bežovan, 2019). There is no other evidence on non-financial barriers.

6.3 Publicly funded measures supporting access to adequate housing – Other measures

Evictions are not carried out during the winter. There are no other publicly funded measures supporting access to adequate housing for low-income households with children.

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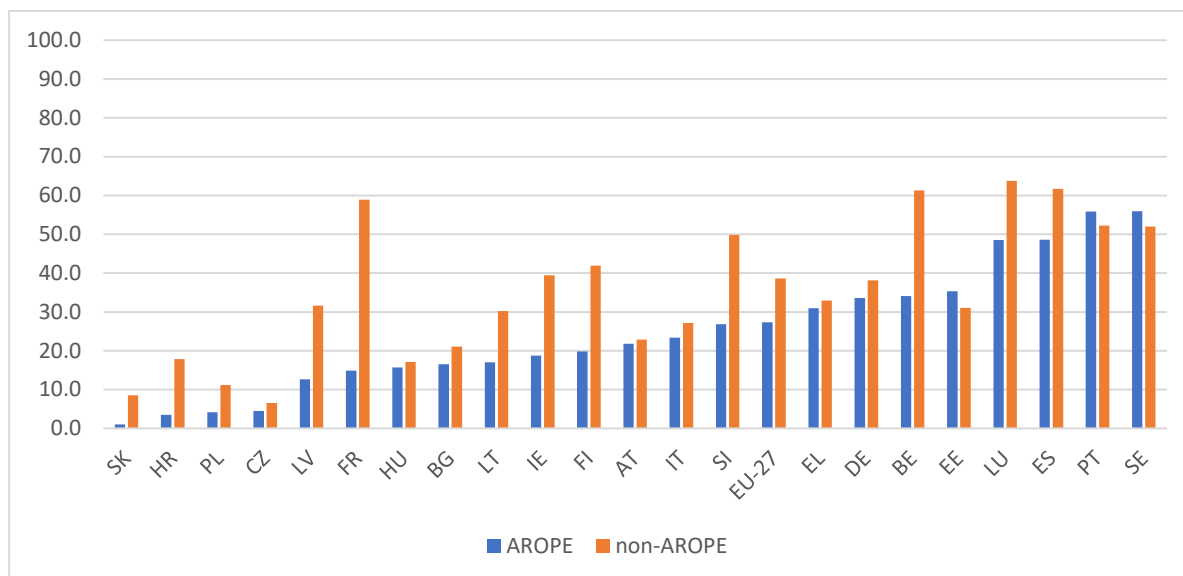
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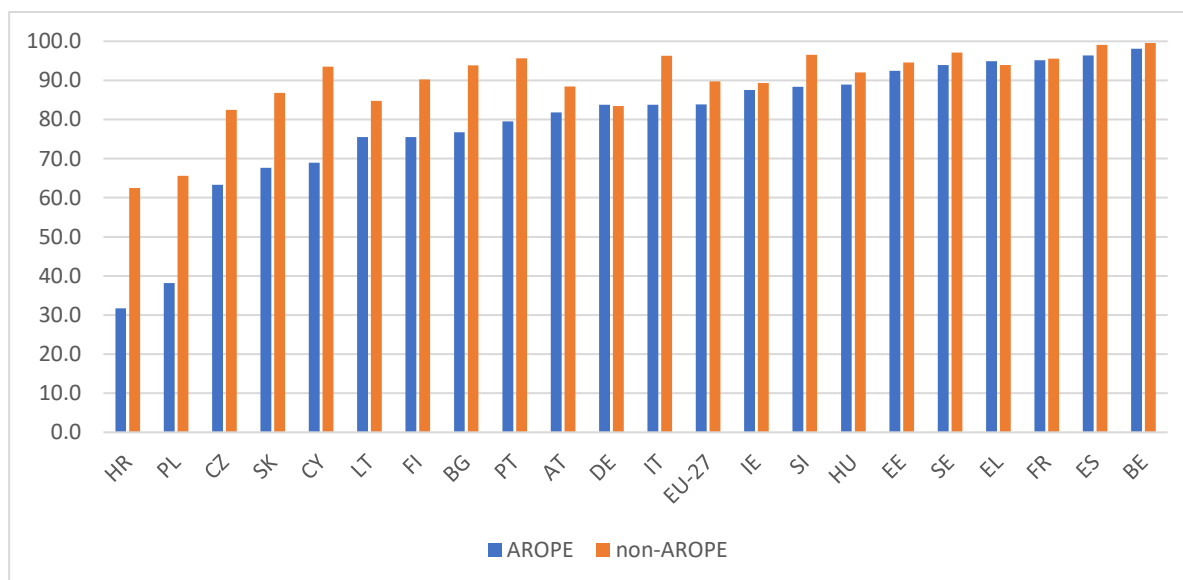
Annex

Figure A1: Proportion of children aged 0-2 participating in ECEC in EU27, by AROPE status (2019)



Source: *Employment and social developments in Europe 2022 – Young Europeans: employment and social challenges ahead.*

Figure A2: Proportion of children aged 3 to minimum compulsory school age participating in ECEC in EU27, by AROPE status (2019)



Source: *Employment and social developments in Europe 2022 – Young Europeans: employment and social challenges ahead.*

Table A1: Coverage (%) of children aged 0-2 by ECEC in Croatia (2016-2021), by county

County	2016	2017	2018	2019	2020	2021	2016-2021
City of Zagreb	40.4	39.9	39.7	41.6	41.0	41.1	+0.7
Istria	29.2	30.2	31.2	35.1	35.6	38.0	+8.8
Dubrovnik-Neretva	24.8	25.7	26.6	27.9	25.0	24.2	-0.6
Zagreb	26.3	27.2	28.9	29.2	31.7	38.8	+12.5
Primorje-Gorski kotar	19.7	23.3	23.4	25.9	27.2	30.1	+10.5
Zadar	11.9	13.5	15.6	16.5	16.8	17.7	+5.7
Split-Dalmatia	12.9	14.1	15.7	17.3	17.7	20.1	+7.2
Varaždin	19.1	18.9	23.5	26.2	28.9	29.8	+10.7
Međimurje	16.7	15.2	16.9	21.2	23.0	22.2	+5.4
Krapina-Zagorje	14.0	18.2	20.6	18.3	20.0	27.2	+13.2
Koprivnica-Križevci	15.0	17.7	17.8	19.9	17.2	17.6	+2.7
Šibenik-Knin	16.1	19.8	22.7	23.0	24.1	27.6	+11.5
Osijek-Baranja	9.3	11.3	12.9	15.7	17.2	19.1	+9.8
Karlovac	14.1	17.0	17.5	20.0	23.2	25.2	+11.1
Požega-Slavonia	12.6	15.1	17.3	16.5	21.6	22.3	+9.7
Brod-Posavina	7.6	8.2	11.8	12.1	17.2	16.1	+8.5
Bjelovar-Bilogora	12.6	14.5	16.3	15.6	17.8	19.3	+6.7
Lika-Senj	13.2	14.2	17.0	19.4	25.2	20.9	+7.7
Vukovar-Sirmium	10.8	13.9	15.5	16.9	18.2	20.5	+9.8
Sisak-Moslavina	20.5	18.9	20.0	21.8	24.4	25.2	+4.7
Virovitica-Podravina	7.4	8.5	9.3	9.9	11.2	13.2	+5.8
RC Total	21.6	22.8	24.1	25.8	26.7	28.4	+6.9

Note: Counties are ordered according to the value of the development index, from the most developed to the least developed.

Source: Dobrotić and Matković, 2022.

Table A2: Coverage (%) of children aged 3-4 by ECEC in Croatia (2016-2021), by county

County	2016	2017	2018	2019	2020	2021	2016-2021
City of Zagreb	94.7	89.7	87.5	86.1	84.0	86.1	-8.6
Istria	78.6	83.7	85.3	84.3	82.5	84.1	+5.5
Dubrovnik-Neretva	70.5	77.0	73.9	72.0	70.9	70.1	-0.4
Zagreb	64.5	67.4	68.8	72.9	71.7	75.5	+11.0
Primorje-Gorski kotar	73.9	76.5	75.9	82.6	82.2	82.3	+8.4
Zadar	52.3	60.0	57.5	61.4	66.7	66.6	+14.3
Split-Dalmatia	69.5	70.3	73.6	78.2	77.5	79.1	+9.6
Varaždin	54.3	58.3	64.0	67.6	70.2	73.5	+19.2
Međimurje	59.5	56.2	69.1	69.7	67.7	68.3	+8.8
Krapina-Zagorje	36.6	43.3	45.4	46.3	44.8	55.8	+19.2
Koprivnica-Križevci	48.8	46.5	47.2	54.5	52.2	60.3	+11.5
Šibenik-Knin	62.7	68.9	72.4	77.7	75.8	76.6	+13.9
Osijek-Baranja	42.9	44.5	48.7	52.4	52.7	61.2	+18.3
Karlovac	47.9	45.1	48.2	56.2	57.2	63.6	+15.7
Požega-Slavonia	32.3	33.2	40.5	48.7	50.1	53.3	+20.9
Brod-Posavina	29.9	34.4	36.6	39.0	37.5	55.9	+26.0
Bjelovar-Bilogora	38.1	36.9	38.9	44.0	49.9	55.7	+17.7
Lika-Senj	41.7	45.8	51.2	57.1	54.9	56.8	+15.1
Vukovar-Sirmium	33.5	36.9	41.2	44.1	49.1	58.7	+25.3
Sisak-Moslavina	53.3	42.2	49.3	56.0	56.4	54.4	+1.1
Virovitica-Podravina	27.1	37.5	45.7	43.3	42.3	51.0	+23.9
RC Total	63.6	64.4	66.6	69.3	69.0	72.7	+9.1

Note: Counties are ordered according to the value of the development index, from the most developed to the least developed.

Source: Dobrotić and Matković, 2022.

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