

Prevalence of and reasons for unmet needs for health and social care in the European region

Technical notes
Prepared for the World Health
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Development (WHO Kobe Centre)

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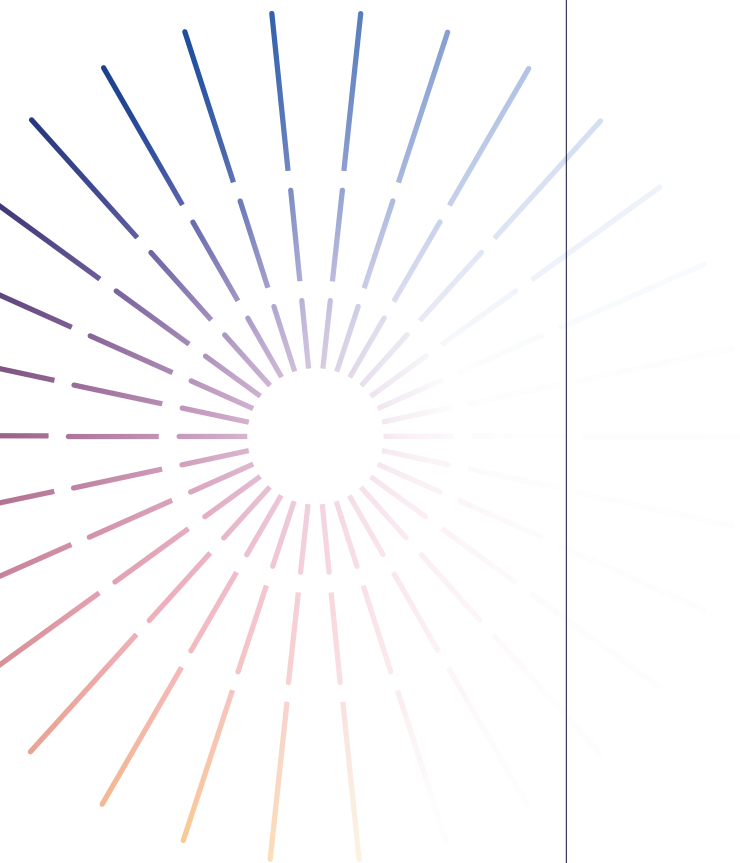
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1. Objectives

The objectives of this project are:

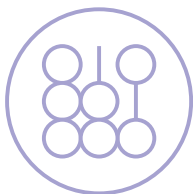
1. Measure the prevalence of self-reported unmet healthcare needs and, among older people aged 65+ years, unmet social care needs across European countries, and stratify the estimates by sex, age groups, and location.
2. Identify the main reasons for unmet healthcare needs across European countries.
3. Assess country-level correlations between the prevalence of self-reported unmet healthcare needs and social care needs (among older people) and the universal health coverage (UHC) service coverage index.

2. Datasets

Three datasets were used in the analyses:

- European Health Interview Survey (EHIS) Wave 3 in 2019 focuses on the population aged 15+ in private households.
- The most recent EU statistics on income and living conditions (SILC) focuses on the population aged 18+ years old.
- SDG 3.8 indicators of the UHC service coverage index and prevalence of catastrophic and impoverishing health expenditure were obtained from the World Health Organization Global Health Observatory.

Both the EHIS and SILC data were obtained from Release 1 in April 2023, DOI 10.2907/EUSILC2004-2021V.2



3. Methods

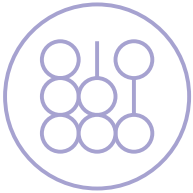
3.1 Indicators to be estimated

From the EHIS dataset

1. Unmet healthcare needs
 - a. Unmet healthcare needs (all reasons).
 - b. Unmet healthcare needs due to a long waiting list.
 - c. Unmet healthcare needs due to distance/transportation.
 - d. Unmet healthcare needs due to financial reasons.
2. Unmet social care needs based on ADL.
3. Unmet social care needs based on IADL.

From the SILC dataset

1. Unmet need for medical examination or treatment
 - a. Unmet medical need due to a long waiting list.
 - b. Unmet medical needs due to distance/transportation.
 - c. Unmet medical needs due to financial reasons.
2. Unmet dental need
 - a. Unmet dental need due to a long waiting list.
 - b. Unmet dental needs due to distance/transportation.
 - c. Unmet dental needs due to financial reasons.



3.2 Sample population

Questions for assessing ADL and IADL only apply to respondents aged 65+ in the EHIS survey, except for Italy, for which the eligible age is 55. For consistency and comparability, we proposed the following age categories for the stratifying unmet social care needs: 65–69, 70+.

For unmet healthcare needs using the EHIS/SILC data, no restriction on age is set up in the survey. We, therefore, can follow the suggestion and use age <60 as a comparison group. The following age groups were used in the analysis: <60, 60–69, and 70+ years. For EHIS' unmet healthcare needs data, we disaggregated the age group 60–69 into 60–64 and 65–69 years to allow comparison with the unmet social care data available only for individuals aged 65+.

3.3 Definitions for unmet healthcare needs

From the EHIS dataset:

EHIS provides six questions on unmet healthcare needs. The first two questions aim to capture, whether respondents had an unmet need for health care due to long waiting lists or distance/transportation. While the term healthcare is not further specified in these questions, the subsequent four indicators refer to specific types of healthcare (including medical care, dental care, prescribed medicines, mental health care), and assess whether respondents had an unmet need due to financial reasons. For all six questions, respondents could indicate, that they had an unmet need due to the specific reason (“Yes”), had no unmet need due to the specific reason (“No”) or did not need care (“No need for healthcare”). Based on these questions, the following indicators were created:



a. Unmet healthcare needs (all reasons)

This indicator combines all six questions on unmet healthcare needs. Respondents choosing the answer option “Yes” for any of the questions were considered as having unmet healthcare needs. Respondents choosing answer option “No” for any of the questions and did not answer with “Yes” to any of the other questions, were considered as having met healthcare needs. Respondents indicating that they did not need care on any question and neither answered with “Yes” nor “No” to any of the other questions, were considered as not needing care. We included respondents when they had data for at least one variable.

No need for healthcare: Proportion of respondents who reported not needing healthcare

Numerator	Number of respondents who reported that they did not need health care
Denominator	All respondents

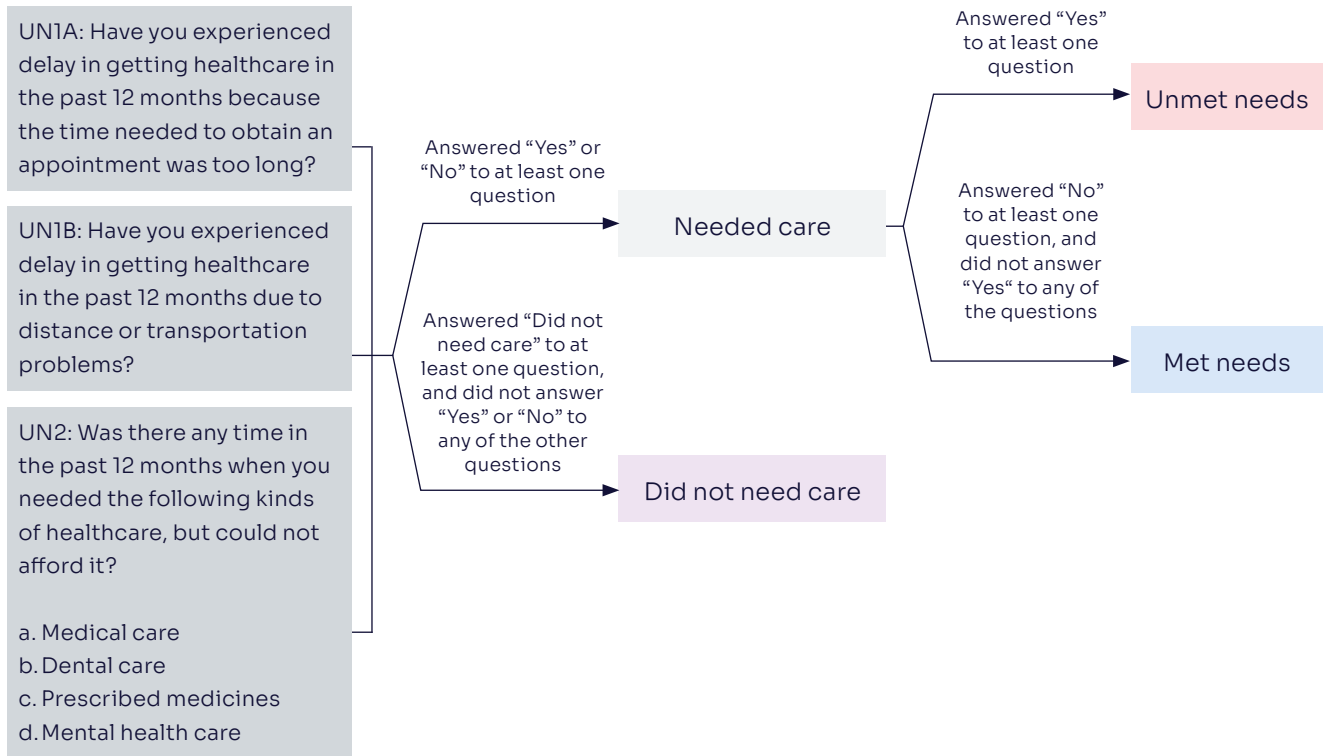
Healthcare needs met: Proportion of respondents who reported that their need for healthcare was met

Numerator	Number of respondents who reported that they have met needs for at least one indicator and did not have any unmet needs among the other indicators
Denominator	a. All respondents b. Only those with needs (unmet + met needs)

Healthcare needs unmet: Proportion of respondents who reported that their need for healthcare was unmet

Numerator	Number of respondents who reported that they have unmet needs/could not afford healthcare for at least one indicator
Denominator	a. All respondents b. Only those with needs (unmet + met needs)

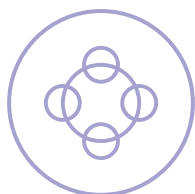
Figure 1. Construction of unmet healthcare needs variable in EHIS



b. Unmet healthcare needs due to specific reasons

- Unmet healthcare needs due to a long waiting list
- Unmet healthcare needs due to distance/transportation
- Unmet healthcare needs due to financial reasons: Four indicators provide information on whether respondents had unmet needs due to financial reasons for specific types of care. The overall variable “Unmet healthcare needs due to financial reasons” combines these four indicators. To categorize respondents, the same approach as for “Unmet healthcare needs (all reasons)” was chosen, except that the first two questions were not considered.

Reason for unmet healthcare needs: Proportion of respondents with specific reasons for unmet healthcare needs	
Numerator	Number of respondents with unmet healthcare needs for a specific reason (i.e. long waiting list, distance/transportation or financial)
Denominator	Number of respondents indicating a need for the specific indicator (those with met and unmet needs)



From the SILC dataset:

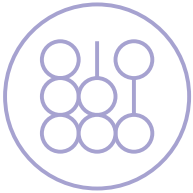
The estimates for unmet medical/dental care needs were processed differently for different countries. The SILC dataset provides a flag indicator for the questions on unmet medical/dental care needs. This indicator provides information, on whether data is available, data is missing, the question was not applicable as the person did not really need treatment or examination (screening question is applicable in some country questionnaires), or whether the respondent was not selected. Data on the flag indicators for “did not need healthcare” was missing for: Austria, Denmark, Estonia, Iceland, Norway, Portugal, Serbia, Slovakia and the United Kingdom. For countries with a flag indicator, we defined three categories (Did not need health care (for specific type)/ Healthcare needs met/ Healthcare needs unmet), while for the countries without a flag indicator only the categories “healthcare needs met” and “healthcare needs unmet” were defined. For these countries, we could only use option (a) as the denominator for presenting the results. Therefore, all estimates are presented in separate tables. Besides, respondents could only state their main reason for unmet needs.

Did not need healthcare: Proportion of respondents who reported not needing healthcare

Numerator	Number of respondents who reported that they did not need health care (medical/dental examination or treatment)
Denominator	a. All respondents b. Number of respondents with healthcare needs

Healthcare needs met: Proportion of respondents who reported that their need for healthcare was met

Numerator	Number of respondents who reported that their demand for health care service(s) (including medical/dental examination or treatment) was met
Denominator	a. All respondents b. Number of respondents with healthcare needs



Healthcare needs unmet: Proportion of respondents who reported that their need for healthcare was unmet

Numerator	Number of respondents who reported that they needed health care service(s) (including medical/dental examination or treatment) but did not receive it
Denominator	a. All respondents b. Number of respondents with healthcare needs

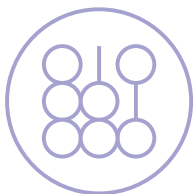
Reason for unmet healthcare needs: Proportion of respondents with specific reasons for unmet healthcare needs

Numerator	<p>Number of respondents with specific types of unmet healthcare needs, including:</p> <ul style="list-style-type: none"> ▪ unmet medical or dental care needs due to a long waiting list ▪ unmet medical or dental care needs due to distance/transportation ▪ unmet medical or dental care need due to financial reasons <p>(Respondents were asked about their main reason and could only choose one reason)</p>
Denominator	Number of respondents with unmet healthcare needs

3.4 Definitions for unmet social care needs

From the EHIS dataset:

In EHIS, five and seven questions are used to assess ADL and IADL, respectively, among respondents aged 65 or above. People with at least one limitation for ADL/IADL were considered as needing care. People without limitation were considered as not needing care. We included respondents when they had data for at least one variable. Those with an ADL/IADL problem received two more questions which captured whether respondents usually receive help with one or more self-care activities and whether they would need help or more help. As these two questions were asked separately for ADL and IADL, we assessed unmet social care needs for ADL and IADL separately. Respondents with no ADL/IADL were considered to have no need for social care, while those with at least one ADL/IADL were considered to have needs. People with needs were further grouped into four categories (see details 2a, 2b, 2c, 2d below). We derived estimates for these specified categories among the population and those with needs. In the stratification analysis, categories 2a and 2d were grouped together and considered as “Met needs”, and 2b and 2c were combined as “Unmet needs”.



Did not need social care:

Numerator	Number of respondents who reported that they did not have any ADL/IADL problem
Denominator	All respondents

Need for social care: Respondents who reported at least one limitation with ADL/IADL

a. Perceived fully met needs: Proportion of respondents who reported that their need for social care was fully met

Numerator	Number of respondents who reported receiving care and no need for more help
Denominator	a. All respondents b. Number of respondents with social care needs (reported ADL/IADL problems)

b. Perceived some unmet needs: Proportion of respondents who reported some unmet needs

Numerator	Number of respondents who reported receiving care and need for more help
Denominator	a. All respondents b. Number of respondents with social care needs (reported ADL/IADL problems)

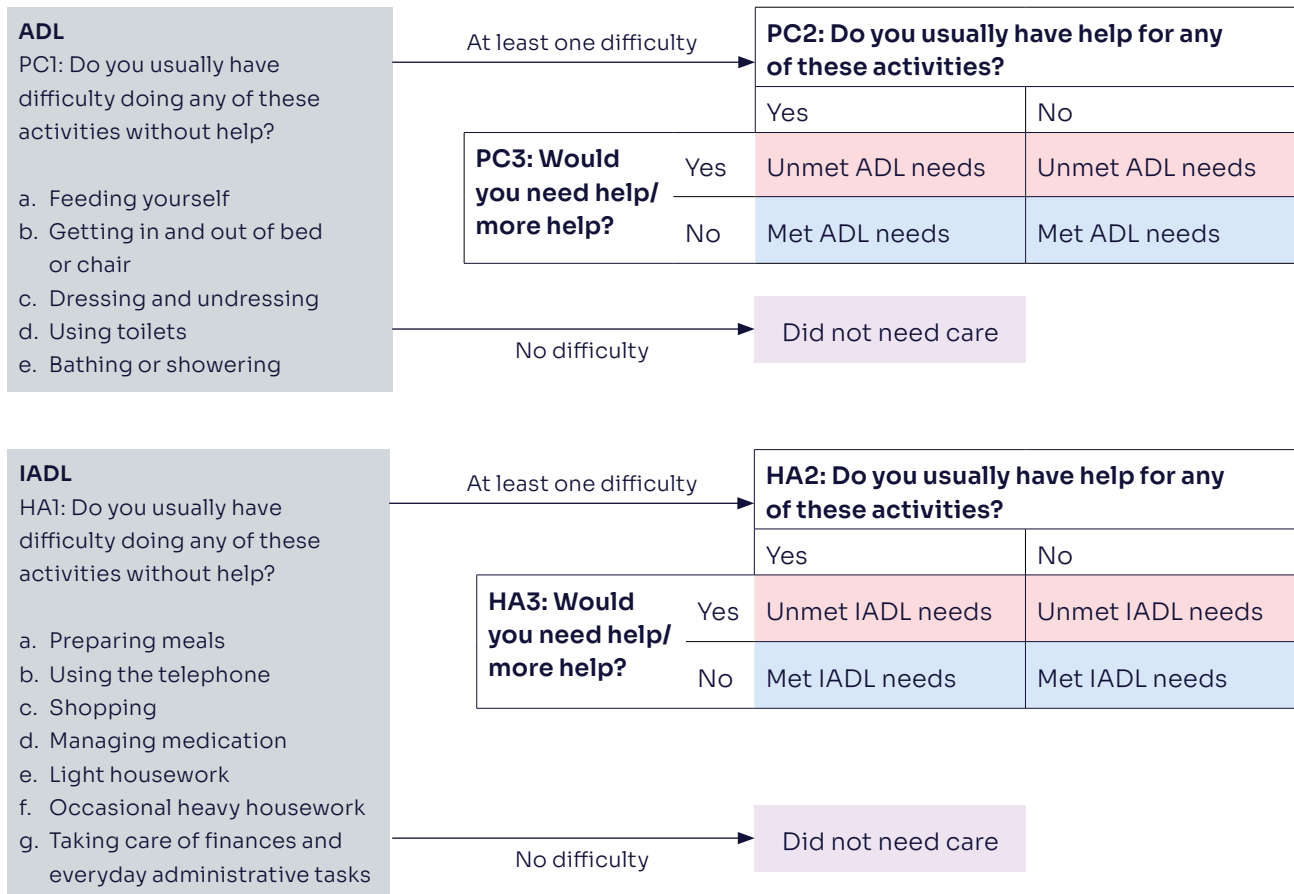
c. Perceived only unmet needs: Proportion of respondents who reported having only unmet needs

Numerator	Number of respondents who reported receiving no care and need for help
Denominator	a. All respondents b. Number of respondents with social care needs (reported ADL/IADL problems)

d. Did not perceive any unmet needs: Proportion of respondents who has no perception of the need for social care

Numerator	Number of respondents who reported receiving no care and no need for help
Denominator	a. All respondents b. Number of respondents with social care needs (reported ADL/IADL problems)

Figure 2. Construction of unmet social care needs variable in EHIS Wave 3



3.5 Inclusion criteria and treatment of missing data

For consistency, proxy interviews from the EHIS survey were excluded as some questions used for creating the unmet needs indicators were not eligible for proxy interviews (n = 14,544). Besides this, we only included respondents with complete data on the concerned indicators, including the variables used for stratified analyses. Detailed information on missing data is provided in the Annex, Table 17a.

For the SILC dataset, estimates were only calculated for respondents with complete data to ensure consistency. Further, estimates were presented separately for countries with and without the flag indicator providing information on the “need” (see 5.1). Full information on missing data can be reviewed in the Annex, Table 17b.

In Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia, not all respondents were selected for the questions on unmet medical/dental care needs in the SILC survey. As these respondents were not considered in the analysis, it may be noted that the sample size for these countries may be smaller.

3.6 Reflection of the analyses

Based on the following reasons, we are uncertain about the use of the EU SILC data and encourage to focus on the estimates based on EHIS data:

- Non-availability of a general harmonized questionnaire for all countries in English, country-specific questionnaires exist in multiple languages, some without English translation.
- Specially selected respondents in a few countries, in Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia – the comparability to the remaining countries is questionable.
- Some countries have screening questions, and some not – the estimates will not be comparable. It is possible to separate the estimates (as done by providing separate tables in this document) but the usefulness is questionable.
- The datasets provide a variable that indicates if the respondent had an unmet need or not and a flag variable indicating whether the respondent needed care. In Austria, for example, there was a screening question, but no information on the flag variable if the respondents needed care. Please review Codebook EU-SILC 2020 cross-sectional file, page 78ff./219 for more detailed information.
- Some countries conducted the interviews with proxies (about 20% of the observation, plus 100,000 observations with missing detail if they had been conducted with interview) – insecure about half of the data points (Ref: Codebook EU-SILC 2020 cross-sectional file, page 130/219)

Table 1. Prevalence of unmet healthcare needs, weighted estimates from EHIS, 2019

Country	In the population				Among people with healthcare needs	
	Sample size	Healthcare needs met (any type) (%)	Healthcare needs unmet (any type) (%)	No need for healthcare (%)	Healthcare needs met (any type) (%)	Healthcare needs unmet (any type) (%)
AT	15,253	66.97	21.99	11.04	75.28	24.72
BG	7,185	56.55	11.04	32.41	83.67	16.33
CY	5,906	83.06	5.16	11.78	94.15	5.85
CZ	7,884	73.11	15.78	11.11	82.25	17.75
DE	22,061	65.24	24.10	10.66	73.02	26.98
DK	6,009	58.79	26.87	14.35	68.63	31.37
EE	4,851	56.87	33.68	9.45	62.81	37.19
EL	7,823	69.81	17.21	12.98	80.23	19.77
ES	21,276	79.15	19.17	1.68	80.51	19.49
FI	5,566	54.84	31.32	13.84	63.65	36.35
HR	5,177	58.11	29.47	12.42	66.35	33.65
HU	5,509	66.70	20.87	12.42	76.16	23.84
IE	7,576	67.81	20.33	11.86	76.94	23.06
IS	3,838	61.44	29.41	9.15	67.63	32.37
IT	38,266	53.13	18.95	27.92	73.71	26.29
LT	4,836	64.20	22.81	12.99	73.79	26.21
LU	3,879	59.48	32.27	8.25	64.83	35.17
LV	5,832	53.55	31.55	14.90	62.93	37.07
MT	4,211	67.96	19.44	12.60	77.75	22.25
NL	8,187	71.84	13.07	15.09	84.60	15.40
NO	7,872	87.64	11.63	0.73	88.28	11.72
PL	16,734	63.78	28.43	7.79	69.17	30.83
PT	14,368	47.23	34.79	17.98	57.58	42.42
RO	15,780	74.13	11.95	13.93	86.12	13.88
SE	9,287	51.16	23.14	25.70	68.86	31.14
SI	9,535	57.01	21.19	21.80	72.90	27.10
SK	5,523	74.63	9.14	16.23	89.09	10.91
Total	270,224	65.39	21.05	13.55	75.64	24.36

Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: Respondents were considered as having needs when they either responded that their need was met or unmet. All estimates are weighted.

Table 2. Prevalence of unmet healthcare needs: reason-specific estimates among people with healthcare needs

Country	Unmet healthcare needs due to waiting list (%)	Unmet healthcare needs due to transportation (%)	Unmet medical care needs due to financial reasons (%)	Unmet prescribed medicine needs due to financial reasons (%)	Unmet mental health care needs due to financial reasons (%)	Unmet dental care needs due to financial reasons (%)	Unmet any type of care needs due to financial reasons (%)
AT	20.41	2.77	5.14	3.24	6.17	8.35	10.79
BG	4.79	2.82	7.41	7.05	4.91	13.23	14.22
CY	3.30	0.14	2.51	1.04	4.73	3.45	3.74
CZ	14.20	5.13	6.14	3.11	2.38	2.17	7.05
DE	21.05	4.64	4.39	4.62	3.86	9.37	12.91
DK	24.71	3.93	3.22	4.90	14.21	15.71	20.26
EE	25.62	3.61	9.85	4.06	3.34	25.29	26.00
EL	12.49	4.98	6.64	3.58	4.56	12.51	14.31
ES	13.06	1.11	1.88	1.12	1.14	10.25	10.26
FI	24.70	4.02	10.25	7.87	29.63	21.85	24.86
HR	26.22	7.77	10.94	10.63	2.87	11.12	17.85
HU	13.06	2.90	5.00	5.42	2.65	11.11	13.80
IE	18.33	2.29	6.97	4.28	5.16	8.57	12.09
IS	33.03	4.43	3.97	4.40	33.35	14.67	15.07
IT	25.07	8.32	8.78	5.59	2.64	10.20	13.48
LT	19.71	3.27	3.81	5.22	2.83	15.47	14.80
LU	33.75	4.89	5.46	3.38	4.49	8.70	11.93
LV	25.60	5.78	16.61	11.80	5.47	25.25	25.91
MT	17.04	2.28	3.34	2.64	1.59	3.60	6.04
NL	17.47	2.51	2.80	1.28	2.16	4.01	5.25
NO	3.93	1.26	1.04	4.26	1.23	4.85	8.69
PL	26.57	4.40	7.21	6.12	3.09	9.04	13.04
PT	29.26	3.82	12.50	6.76	27.67	28.79	25.23
RO	3.64	1.71	5.21	6.19	1.19	10.98	12.17
SE	23.92	3.11	5.93	7.49	8.58	15.60	18.73
SI	22.38	3.02	4.31	4.68	3.29	12.44	15.01
SK	7.11	2.03	1.79	3.04	2.06	5.33	5.91
Total	18.52	3.89	5.31	4.45	3.38	10.29	12.79

Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: Respondents are considered as having needs when they either responded that their need was met or unmet. Respondents may have reported unmet needs due to more than one reason. All estimates are weighted.

Table 3. Prevalence of overall unmet healthcare needs among people with needs, stratified by sex, age groups, and geographical areas (%)

Country	Sex		Age Groups				Geographical Areas		
	Male (%)	Female (%)	<60 (%)	60–64 (%)	65–69 (%)	70+ (%)	Cities (%)	Town (%)	Rural (%)
AT	21.09	28.09	26.28	24.44	20.82	19.61	28.96	23.27	22.63
BG	15.49	16.99	12.95	17.31	18.95	23.07	16.65	13.38	19.94
CY	5.69	5.99	5.06	9.26	7.23	7.66	4.98	10.59	4.32
CZ	15.52	19.75	16.09	18.05	23.08	21.52	19.36	18.29	15.93
DE	24.55	29.28	30.48	23.20	23.20	18.36	29.84	25.23	25.07
DK	29.38	33.22	37.19	22.12	19.34	15.95	33.20	30.85	30.02
EE	34.80	39.15	38.44	39.80	34.53	32.08	39.82	35.51	32.36
EL	18.16	21.15	17.70	24.26	23.74	23.37	20.19	18.08	20.22
ES	17.80	21.09	19.72	20.64	19.44	17.88	19.06	20.76	18.62
FI	34.15	38.22	40.18	28.62	27.17	29.05	41.56	35.79	28.44
HR	31.26	35.35	29.13	31.39	39.42	41.10	35.95	36.39	28.54
HU	21.74	25.60	24.91	25.23	24.87	18.46	27.56	23.78	19.52
IE	20.32	25.56	24.57	20.43	19.68	16.96	25.81	22.78	20.90
IS	27.83	36.10	36.31	32.62	27.02	19.31	32.08	35.05	31.05
IT	23.14	28.76	24.60	27.44	27.19	30.11	27.38	26.01	25.70
LT	21.71	29.56	25.86	28.86	25.23	26.66	30.14	23.02	23.36
LU	32.81	37.53	38.74	28.87	18.52	24.43	40.80	34.47	32.79
LV	34.00	39.24	36.58	41.94	41.59	34.38	41.24	32.48	34.39
MT	19.43	24.97	20.61	26.28	24.41	27.05	23.69	21.04	16.39
NL	13.76	16.94	17.84	10.45	8.83	10.78	17.40	12.79	13.17
NO	10.07	13.37	14.95	7.15	2.85	2.20	12.69	11.45	11.16
PL	27.26	33.46	27.23	36.78	35.37	40.10	36.36	29.71	26.52
PT	38.09	45.93	42.27	42.80	42.56	42.66	42.98	40.84	43.61
RO	12.49	15.04	9.30	18.84	24.16	24.78	11.86	15.39	14.57
SE	29.86	32.32	34.19	28.08	26.44	24.14	32.70	30.55	28.97
SI	25.31	28.77	29.53	25.08	20.95	21.75	33.00	27.81	24.59
SK	8.92	12.63	9.38	11.37	13.85	16.29	15.20	8.58	10.65
Total	21.86	26.53	24.59	24.40	24.37	23.47	25.73	23.84	22.92

Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: Respondents are considered as having needs when they either responded that their need was met or unmet in the overall unmet healthcare variable. For the country-specific pooled estimates, please see the last column in Table 1. All estimates are weighted.

Table 4. Prevalence of unmet social care needs based on ADL in the population

Country	Sample size	% with no need	% perceived fully met needs	% perceived some unmet needs	% perceived only unmet needs	% did not perceive any unmet needs
AT	3,850	80.66	9.01	4.12	0.84	5.36
BE	1,927	87.97	NA	NA	2.53	9.50
BG	2,444	79.56	3.18	7.62	3.38	6.26
CY	1,537	83.82	8.63	3.96	1.10	2.49
CZ	2,911	67.59	9.98	6.52	2.36	13.54
DE	7,610	76.52	5.53	3.33	3.16	11.46
DK	2,079	89.22	2.43	2.07	1.08	5.20
EE	1,432	86.27	1.78	9.89	0.44	1.62
EL	2,912	80.82	8.88	5.56	1.19	3.55
ES	6,594	86.31	4.95	5.33	1.70	1.71
FI	2,153	85.75	1.00	2.29	1.44	9.53
HR	1,813	66.32	6.31	15.23	3.95	8.19
HU	1,610	77.09	4.43	6.94	1.70	9.85
IE	2,002	87.60	3.26	5.00	0.81	3.33
IS	891	87.97	3.27	1.45	1.37	5.94
IT	11,831	82.05	7.04	5.89	1.89	3.14
LT	1,375	72.65	10.82	6.70	2.50	7.34
LU	739	86.63	1.72	3.86	1.74	6.05
LV	1,425	74.83	11.03	2.73	2.44	8.96
MT	1,175	88.31	1.57	2.99	1.81	5.32
NL	2,060	68.54	7.23	1.47	1.60	21.16
NO	1,798	92.70	2.19	1.04	0.27	3.80
PL	5,190	73.42	5.10	6.87	2.62	11.98
PT	5,332	79.72	6.40	4.24	3.11	6.53
RO	4,701	63.88	7.73	12.87	6.97	8.54
SE	2,615	82.15	3.95	2.19	1.43	10.28
SI	2,484	81.63	5.95	4.30	1.48	6.64
SK	1,501	64.29	8.05	7.75	6.72	13.19
Total	83,991	78.26	5.85	5.15	2.54	8.20

Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: All estimates are weighted.

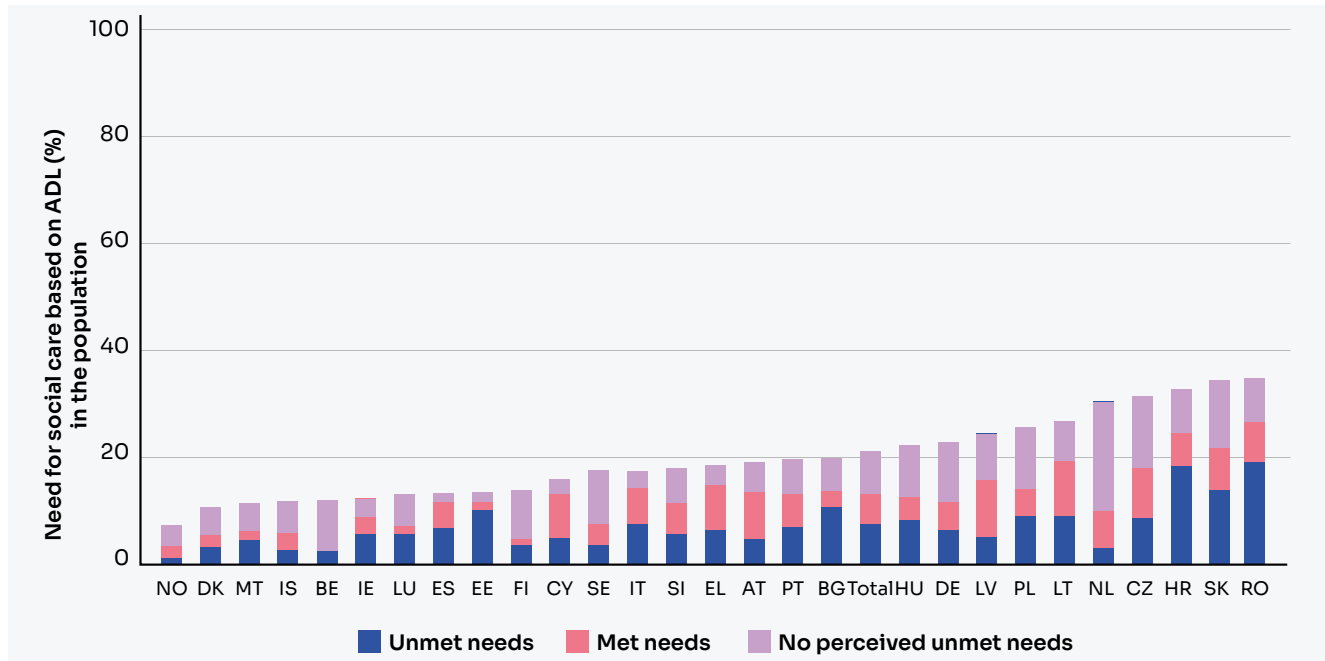
Table 5. Prevalence of unmet social care needs based on ADL among people with needs

Country	% perceived fully met needs	% perceived some unmet needs	% perceived only unmet needs	% did not perceive any unmet needs
AT	46.59	21.33	4.36	27.72
BE	NA	NA	21.03	78.97
BG	15.55	37.31	16.53	30.61
CY	53.36	24.45	6.83	15.37
CZ	30.80	20.13	7.28	41.79
DE	23.55	14.17	13.48	48.81
DK	22.52	19.23	9.99	48.26
EE	12.97	72.06	3.18	11.80
EL	46.31	28.98	6.22	18.49
ES	36.13	38.95	12.42	12.49
FI	6.99	16.04	10.07	66.89
HR	18.73	45.21	11.74	24.32
HU	19.33	30.28	7.41	42.98
IE	26.30	40.31	6.52	26.87
IS	27.21	12.02	11.37	49.40
IT	39.20	32.80	10.52	17.48
LT	39.54	24.49	9.13	26.85
LU	12.87	28.86	13.03	45.23
LV	43.83	10.85	9.71	35.61
MT	13.43	25.57	15.51	45.49
NL	22.97	4.67	5.09	67.27
NO	29.95	14.29	3.71	52.05
PL	19.21	25.86	9.86	45.08
PT	31.58	20.89	15.32	32.21
RO	21.41	35.65	19.31	23.64
SE	22.11	12.26	8.03	57.60
SI	32.37	23.42	8.05	36.15
SK	22.53	21.71	18.81	36.95
Total	26.91	23.68	11.71	37.70

Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: Respondents with at least one ADL were considered as having a need for social care. All estimates are weighted.

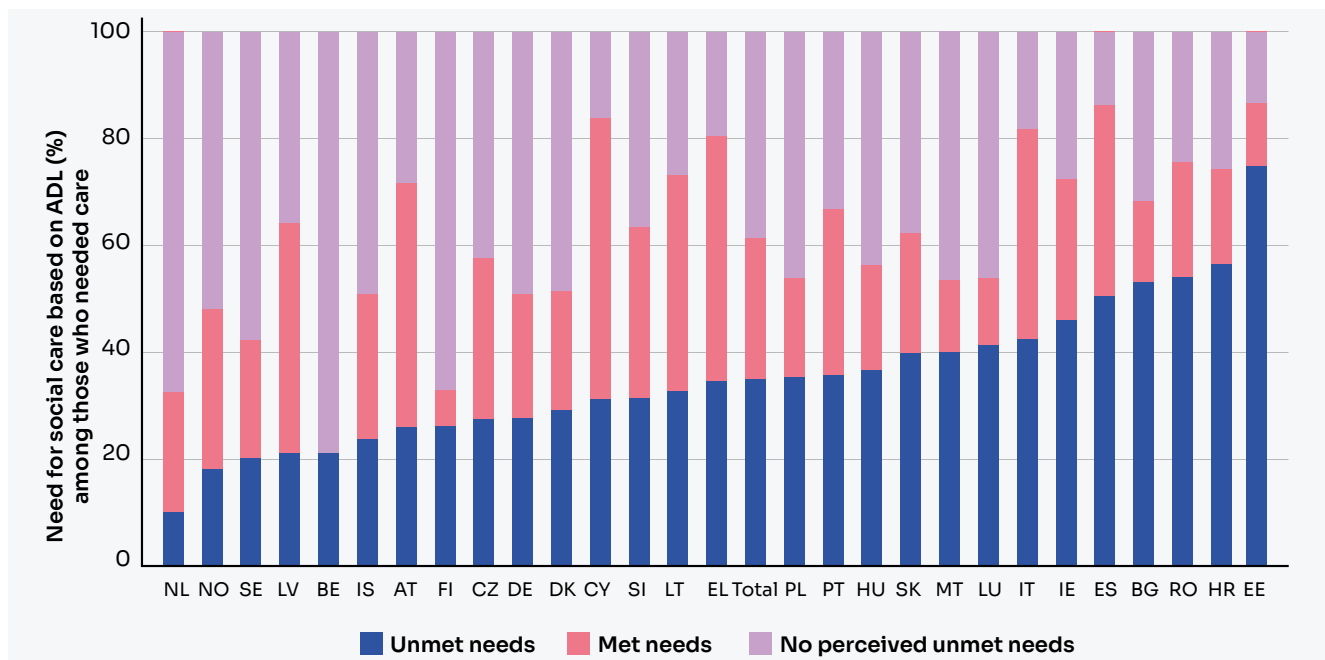
Figure 3. Prevalence of how social care needs were perceived based on ADL in the population



Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: All estimates are weighted.

Figure 4. Prevalence of how social care needs were perceived based on ADL among people with needs



Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: Respondents with at least one ADL were considered as having a need for social care. All estimates are weighted.

Table 6. Prevalence of unmet social care needs based on ADL among people with needs, stratified by sex, age groups, and geographical areas (%)

Country	Sex		Age Groups		Geographical Areas		
	Male (%)	Female (%)	65–69 (%)	70+ (%)	Cities (%)	Town (%)	Rural (%)
AT	18.78	29.78	22.72	26.07	24.47	28.46	24.41
BE	14.72	24.71	24.10	20.27	17.68	25.52	6.56
BG	47.76	56.98	43.59	55.26	55.80	52.94	52.50
CY	32.14	30.92	22.01	32.18	37.04	21.89	23.85
CZ	26.47	28.00	19.40	29.14	28.13	29.51	25.13
DE	23.38	30.43	22.15	28.69	24.38	30.78	27.88
DK	22.14	35.60	15.79	31.81	35.38	35.31	22.22
EE	79.49	73.09	64.99	76.92	72.25	77.52	79.75
EL	30.43	37.63	33.59	35.38	32.07	36.56	37.63
ES	46.53	53.51	34.10	53.04	52.28	46.18	54.59
FI	21.71	29.48	20.00	27.55	28.64	24.03	25.11
HR	54.93	57.94	47.52	58.48	58.95	53.48	57.21
HU	34.84	39.53	31.12	39.67	39.21	34.80	39.12
IE	49.67	45.10	43.99	47.37	41.85	44.83	51.15
IS	14.50	30.39	13.03	28.84	27.70	30.39	12.02
IT	40.92	44.43	37.69	43.85	43.08	41.57	46.50
LT	26.40	35.92	31.35	33.93	36.68	29.20	32.11
LU	40.73	42.75	17.63	48.50	45.41	45.25	34.72
LV	10.50	24.15	12.02	22.35	24.98	18.18	16.79
MT	31.32	47.91	30.84	42.92	44.59	35.47	100.00
NL	6.35	12.16	3.78	11.52	11.33	8.97	5.07
NO	13.38	19.99	26.97	15.11	4.70	23.86	16.24
PL	31.99	37.26	26.01	38.20	37.40	40.03	31.65
PT	35.72	36.42	19.04	38.29	44.77	30.36	31.85
RO	50.32	57.36	43.37	57.38	53.94	51.78	57.27
SE	15.38	24.78	19.48	20.47	22.41	23.35	11.42
SI	28.62	33.04	17.77	33.66	30.92	30.57	32.24
SK	37.68	41.88	27.04	44.29	41.78	38.55	41.31
Total	30.54	38.06	25.97	37.11	34.16	34.78	37.50

Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: Respondents with at least one ADL were considered as having a need for social care. Categories “Some unmet needs” and “Only unmet needs” were combined together as “Unmet needs” for the stratification analysis. For the country-specific pooled estimates, please see the columns in Table 5. All estimates are weighted.

Table 7. Prevalence of unmet social care needs based on IADL in the population

Country	Sample size	% with no need	% perceived fully met needs	% perceived some unmet needs	% perceived only unmet needs	% did not perceive any unmet needs
AT	3,846	58.87	24.87	6.13	1.27	8.87
BE	1,551	80.88	NA	NA	3.28	15.84
BG	2,439	47.67	12.77	20.40	6.86	12.31
CY	1,537	49.57	27.47	7.27	4.26	11.44
CZ	2,910	37.98	9.14	6.07	3.80	43.00
DE	7,600	59.31	19.05	7.79	3.77	10.07
DK	1,987	67.82	8.74	4.79	3.57	15.07
EE	1,432	71.76	18.90	7.98	0.70	0.66
EL	2,911	52.52	28.20	11.74	2.31	5.23
ES	6,580	63.09	17.76	10.55	3.63	4.96
FI	2,050	65.52	7.49	12.75	3.30	10.93
HR	1,808	38.20	16.50	31.01	4.50	9.80
HU	1,588	53.55	10.64	11.74	1.74	22.34
IE	1,997	60.63	14.18	9.37	2.80	13.02
IS	888	70.09	16.92	3.66	2.60	6.73
IT	11,816	56.50	17.54	8.46	3.09	14.40
LT	1,374	34.77	39.32	10.72	2.83	12.35
LU	697	69.92	8.82	10.15	3.57	7.55
LV	1,425	38.66	33.45	5.93	3.30	18.65
MT	1,172	56.29	6.69	12.48	4.74	19.80
NL	2,066	44.25	25.73	4.77	2.87	22.38
NO	1,824	79.17	11.01	4.98	1.26	3.58
PL	5,189	39.39	17.08	13.61	2.66	27.26
PT	5,316	49.70	21.72	8.49	4.89	15.20
RO	4,679	20.67	24.30	32.12	9.99	12.92
SE	2,606	65.51	13.40	7.50	3.04	10.55
SI	2,467	58.10	18.69	9.41	2.64	11.16
SK	1,501	34.83	28.72	15.33	7.29	13.82
Total	83,256	53.78	18.23	10.50	3.72	13.76

Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: All estimates are weighted.

Table 8. Prevalence of unmet social care needs based on IADL among people with needs

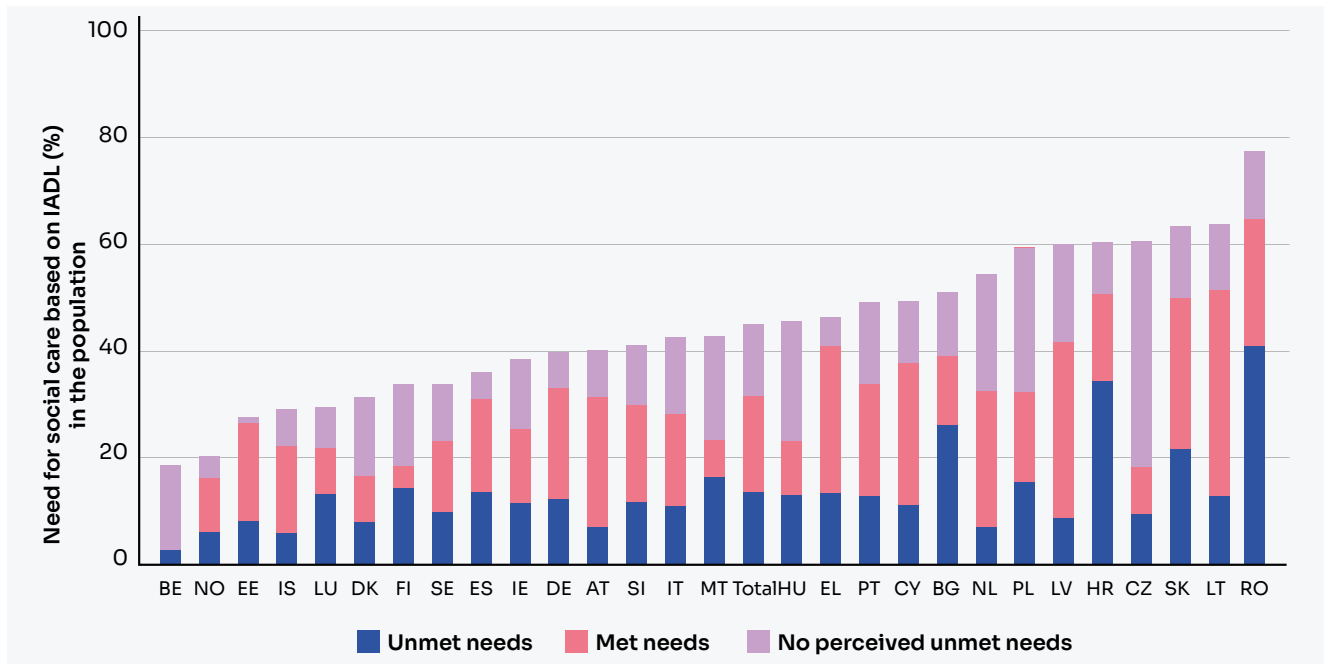
Country	% perceived fully met needs	% perceived some unmet needs	% perceived only unmet needs	% did not perceive any unmet needs
AT	60.45	14.91	3.08	21.56
BE	NA	NA	17.14	82.86
BG	24.40	38.98	13.10	23.52
CY	54.47	14.41	8.45	22.68
CZ	14.74	9.79	6.13	69.34
DE	46.83	19.15	9.27	24.75
DK	27.17	14.89	11.10	46.85
EE	66.92	28.26	2.47	2.35
EL	59.39	24.73	4.86	11.01
ES	48.13	28.59	9.84	13.44
FI	21.71	36.99	9.59	31.71
HR	26.69	50.17	7.27	15.86
HU	22.90	25.28	3.75	48.08
IE	36.02	23.79	7.12	33.07
IS	56.56	12.24	8.69	22.51
IT	40.33	19.46	7.11	33.10
LT	60.29	16.44	4.35	18.93
LU	29.31	33.74	11.86	25.09
LV	54.54	9.67	5.38	30.41
MT	15.30	28.56	10.84	45.30
NL	46.15	8.55	5.15	40.15
NO	52.85	23.92	6.05	17.17
PL	28.18	22.45	4.38	44.98
PT	43.18	16.88	9.72	30.22
RO	30.63	40.49	12.59	16.29
SE	38.85	21.73	8.82	30.60
SI	44.61	22.46	6.30	26.63
SK	44.07	23.53	11.19	21.21
Total	39.45	22.72	8.06	29.78

Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: Respondents with at least one IADL were considered as having a need for social care.

All estimates are weighted.

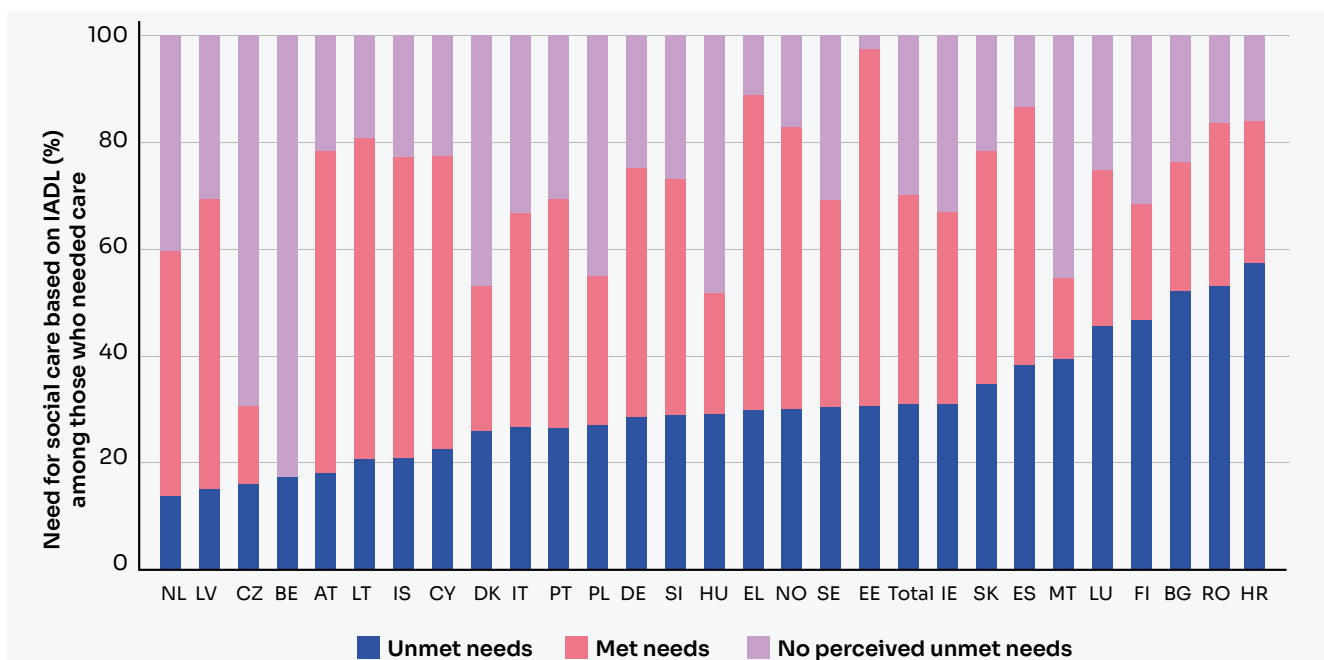
Figure 5. Prevalence of how social care needs were perceived based on IADL in the population



Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: All estimates are weighted.

Figure 6. Prevalence of how social care needs were perceived based on IADL among individuals with needs



Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: Respondents with at least one IADL were considered as having a need for social care. All estimates are weighted.

Table 9. Prevalence of unmet social care needs based on IADL among those with needs, stratified by sex, age groups, and geographical areas (%)

Country	Sex		Age Groups		Geographical Areas		
	Male (%)	Female (%)	65–69 (%)	70+ (%)	Cities (%)	Town (%)	Rural (%)
AT	16.06	19.06	9.62	19.51	20.44	15.85	18.03
BE	9.25	22.03	15.82	17.53	19.84	15.91	17.62
BG	47.73	54.19	42.20	54.46	54.93	51.22	48.11
CY	21.05	23.74	20.38	23.42	25.08	17.80	20.33
CZ	14.01	17.15	9.28	17.82	16.08	15.67	16.02
DE	29.73	27.72	24.49	29.28	28.78	27.61	29.52
DK	19.81	30.59	14.99	28.23	28.85	29.12	22.54
EE	26.45	32.51	36.03	29.83	29.26	31.11	32.89
EL	25.31	31.81	24.49	30.43	29.13	30.18	29.91
ES	32.46	40.90	26.85	40.69	37.00	39.36	40.45
FI	36.09	53.67	33.75	49.46	48.74	42.69	48.57
HR	48.79	62.08	45.13	60.25	55.75	61.54	56.24
HU	25.87	30.50	25.20	30.17	29.41	26.52	31.07
IE	25.94	34.11	21.04	33.48	29.65	36.47	30.27
IS	6.85	28.07	24.63	19.59	22.61	22.99	14.61
IT	23.23	28.20	22.38	27.31	28.02	25.40	27.17
LT	14.25	23.14	15.23	22.18	22.53	16.60	20.31
LU	35.70	50.49	40.91	47.45	46.68	48.37	40.66
LV	8.99	17.05	9.85	16.58	19.06	9.24	14.08
MT	25.37	48.30	31.31	41.75	37.06	41.77	39.06
NL	9.27	16.39	10.60	14.67	16.41	11.09	10.09
NO	17.91	35.63	24.23	31.61	24.63	29.05	33.55
PL	24.20	28.02	16.51	30.47	26.49	26.27	27.53
PT	23.30	27.76	17.01	28.69	29.25	23.41	26.30
RO	48.85	55.51	46.27	55.78	54.46	48.41	54.99
SE	25.70	33.77	30.69	30.52	35.41	29.80	25.14
SI	25.95	30.45	15.55	31.96	23.70	30.68	28.86
SK	31.40	36.55	27.78	37.16	37.11	34.29	33.92
Total	27.75	32.32	24.70	32.28	31.50	28.75	32.27

Source: European Health Interview Survey (EHIS) Wave 3 in 2019

Note: Respondents with at least one IADL were considered as having a need for social care. Categories “Some unmet needs” and “Only unmet needs” were combined together as “Unmet needs” for the stratification analysis. For the country-specific pooled estimates, please see the last columns in Table 8. All estimates are weighted.

Table 10a. Prevalence of unmet need for medical examination or treatment (%)

Country	Whole population				People with care needs	
	Sample size	Medical care needs met (%)	Medical care needs unmet (%)	No need for medical care (%)	Medical care needs met (%)	Medical care needs unmet (%)
BE	13,667	77.73	2.97	19.29	96.32	3.68
BG	15,219	59.05	2.54	38.40	95.87	4.13
CH	12,502	52.29	1.86	45.86	96.57	3.43
CY	8,940	81.52	0.49	17.98	99.40	0.60
CZ	15,745	75.15	2.52	22.32	96.75	3.25
DE	22,812	57.17	0.52	42.30	99.09	0.91
EL	24,333	38.77	12.27	48.96	75.95	24.05
ES	41,676	58.00	2.83	39.17	95.36	4.64
FI	9,281	60.80	5.42	33.78	91.81	8.19
FR	25,311	80.40	6.62	12.98	92.40	7.60
HR	17,101	53.10	5.87	41.02	90.04	9.96
HU	14,345	46.09	5.92	47.99	88.61	11.39
IE	9,796	39.46	3.21	57.32	92.47	7.53
IT	31,277	38.87	2.37	58.77	94.26	5.74
LT	10,290	62.40	4.06	33.55	93.89	6.11
LU	8,652	67.64	1.92	30.44	97.24	2.76
LV	11,199	62.98	10.22	26.80	86.04	13.96
PL	28,837	43.88	14.24	41.87	75.50	24.50
RO	15,288	62.82	8.75	28.43	87.78	12.22
SE	8,845	49.52	4.73	45.75	91.27	8.73

Source: EU statistics on income and living conditions (SILC) in 2021, except for Poland and Switzerland in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 10a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 10b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Table 10b. Prevalence of unmet need for medical examination or treatment (%)

Country	Whole population		
	Sample size	Medical care needs met (%)	Medical care needs unmet (%)
AT	9,568	99.18	0.82
DK	7,809	88.07	11.93
EE	11,840	87.34	12.66
IS	2,955	92.70	7.30
NO	6,017	96.95	3.05
PT	10,478	94.03	5.97
RS	13,223	91.15	8.85
SK	11,706	92.49	7.51
UK	17,183	91.73	8.27

Source: EU statistics on income and living conditions (SILC) in 2021, except for Iceland and United Kingdom in 2018, Norway, Poland, Serbia, and Slovakia in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 10a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 10b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Table 11a. Main reason for unmet need for medical examination or treatment among those with unmet needs (%)

Country	Sample size	Reasons for unmet needs		
		Due to a long waiting list (%)	Due to distance/ transportation (%)	Due to financial reasons (%)
BE	400	18.50		34.00
BG	404	2.23	8.91	28.47
CH	218	1.83	0.92	21.10
CY	46	10.87	2.17	21.74
CZ	459	6.32	5.45	1.09
DE	114	6.14	7.02	8.77
EL	3,817	3.38	2.12	46.84
ES	1,190	32.27	0.67	3.53
FI	449	78.84	0.45	0.67
FR	1,675	15.10	2.33	21.07
HR	1,046	12.24	11.76	6.50
HU	882	14.63	1.47	3.29
IE	288	55.90		3.82

Table 11a. Main reason for unmet need for medical examination or treatment among those with unmet needs (%) (continued)

Country		Whole population		
		Sample size	Medical care needs met (%)	Medical care needs unmet (%)
IT	767	31.55	0.52	43.02
LT	440	52.95	3.18	4.55
LU	157	17.20	2.55	17.83
LV	1,194	16.58	4.10	20.10
PL	4,459	9.80	0.96	2.47
RO	1,588	9.26	4.60	33.44
SE	374	27.27	0.27	0.53

Source: EU statistics on income and living conditions (SILC) in 2021, except for Poland and Switzerland in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 11a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 11b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. Respondents could only state the main reason for unmet needs. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Table 11b. Main reason for unmet need for medical examination or treatment among those with unmet needs (%)

Country	Sample size	Reasons for unmet needs		
		Due to a long waiting list (%)	Due to distance/ transportation (%)	Due to financial reasons (%)
AT	88	10.38	5.92	17.43
DK	871	7.03	1.20	2.29
EE	1,379	60.18	2.42	1.69
IS	206	10.05	2.81	33.83
NO	173	21.79	0.58	5.61
PT	634	12.70	0.52	29.11
RS	1,145	21.81	5.37	15.27
SK	1,024	26.16	5.51	10.75
UK	1,344	51.60	1.38	1.73

Source: EU statistics on income and living conditions (SILC) in 2021, except for Iceland and United Kingdom in 2018, Norway, Poland, Serbia, and Slovakia in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 11a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 11b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. Respondents could only state the main reason for unmet needs. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Table 12a. Prevalence of unmet need for medical examination or treatment among those with needs, stratified by sex, age groups, and geographical areas (%)

Country	Sex		Age Groups			Geographical Areas		
	Male (%)	Female (%)	<60 (%)	60–69 (%)	70+ (%)	Densely populated (%)	Intermedi-ate (%)	Thinly populated (%)
BE	3.39	3.95	3.59	4.31	3.52	3.81	3.73	3.32
BG	4.53	3.83	3.84	4.02	4.90	3.78	4.24	4.55
CH	3.44	3.43	4.48	1.58	1.39	3.12	3.51	3.81
CY	0.56	0.64	0.68	0.34	0.44	0.48	0.55	1.08
CZ	3.16	3.32	2.45	4.29	5.11	2.99	3.35	3.37
DE	0.87	0.94	1.22	0.43	0.60	0.94		0.80
EL	24.26	23.88	12.73	24.13	41.67	22.00	21.02	30.43
ES	4.40	4.84	4.63	5.25	4.33	4.83	4.71	3.71
FI	7.50	8.81	6.33	10.05	12.25	8.99	7.98	7.22
FR	6.24	8.80	7.49	8.20	7.53	7.29	8.36	7.30
HR	10.05	9.89	7.55	12.49	13.60	12.97	8.89	8.25
HU	10.13	12.28	10.93	11.80	12.27	16.10	9.55	8.52
IE	6.34	8.53	7.82	7.95	6.20	7.44	7.84	7.43
IT	5.39	6.01	6.07	6.51	4.84	6.11	5.33	5.99
LT	5.40	6.59	5.27	7.06	7.60	6.01	7.67	5.66
LU	2.79	2.73	3.23	1.57	0.81	5.44	2.62	1.71
LV	13.54	14.24	11.97	15.85	18.20	15.30		11.26
PL	24.66	24.40	21.58	28.55	28.44	21.82	26.44	26.04
RO	10.12	14.07	6.21	18.32	26.41	10.64	12.03	13.58
SE	8.69	8.31	10.48	6.11	5.34	9.28	9.08	6.86

Source: EU statistics on income and living conditions (SILC) in 2021, except for Poland and Switzerland in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 12a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 12b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Table 12b. Prevalence of unmet need for medical examination or treatment among those with needs, stratified by sex, age groups, and geographical areas (%)

Country	Sex		Age Groups			Geographical Areas		
	Male (%)	Female (%)	<60 (%)	60–69 (%)	70+ (%)	Densely populated (%)	Intermedi-ate (%)	Thinly populated (%)
AT	0.63	1.00	0.84	0.77	0.78	1.15	0.57	0.74
DK	12.31	11.56	13.53	9.46	7.48	12.93	11.16	11.47
EE	9.89	15.06	11.24	16.91	14.88	14.09		10.10
IS	5.73	8.94	8.21	3.97	4.61	7.01	7.81	7.83
NO	3.01	3.09	3.68	1.64	1.36	3.06	3.03	3.06
PT	4.74	7.02	4.64	6.64	10.12	4.68	6.73	7.40
RS	7.95	9.68	6.22	13.77	14.34	8.89	7.40	9.84
SK	6.99	7.99	6.24	8.33	13.49	4.84	9.14	7.51
UK	6.96	9.40	8.64	7.98	7.21	8.56	8.09	7.41

Source: EU statistics on income and living conditions (SILC) in 2021, except for Poland and Switzerland in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 12a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 12b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Table 13a. Prevalence of unmet need for dental examination or treatment

Country	Whole population				People with care needs	
	Sample size	Dental care needs met (%)	Dental care needs unmet (%)	No need for dental care (%)	Dental care needs met (%)	Dental care needs unmet (%)
BE	13,667	69.22	5.95	24.83	92.09	7.91
BG	15,219	25.49	2.89	71.62	89.83	10.17
CH	12,502	52.09	4.11	43.80	92.69	7.31
CY	8,940	62.39	3.08	34.53	95.30	4.70
CZ	15,745	66.92	2.27	30.81	96.72	3.28
DE	22,812	41.55	0.95	57.50	97.77	2.23
EL	24,333	28.10	11.09	60.81	71.69	28.31
ES	41,676	38.37	5.53	56.10	87.40	12.60
FI	9,281	44.03	7.85	48.12	84.87	15.13
FR	25,311	70.88	9.12	20.00	88.61	11.39
HR	17,101	40.95	3.10	55.95	92.96	7.04
HU	14,345	16.73	2.32	80.94	87.80	12.20
IE	9,796	26.73	2.24	71.03	92.28	7.72
IT	31,277	32.93	2.74	64.33	92.31	7.69
LT	10,290	39.01	2.90	58.09	93.08	6.92
LU	8,652	57.27	1.68	41.04	97.14	2.86
LV	11,199	45.56	12.10	42.34	79.01	20.99
PL	28,837	26.79	4.19	69.02	86.46	13.54
RO	15,288	61.64	6.08	32.28	91.02	8.98
SE	8,845	40.34	4.08	55.58	90.82	9.18

Source: EU statistics on income and living conditions (SILC) in 2021, except for Poland and Switzerland in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 13a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 13b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Table 13b. Prevalence of unmet need for dental examination or treatment

Country	Whole population		
	Sample size	Dental care needs met (%)	Dental care needs unmet (%)
AT	9,568	98.97	1.03
DK	7,809	89.15	10.85
EE	11,840	96.58	3.42
IS	2,955	88.51	11.49
NO	6,017	91.36	8.64
PT	10,478	86.88	13.12
RS	13,223	93.44	6.56
SK	11,706	94.84	5.16
UK	17,183	96.28	3.72

Source: EU statistics on income and living conditions (SILC) in 2021, except for Iceland and United Kingdom in 2018, Norway, Poland, Serbia, and Slovakia in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 13a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 13b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Table 14a. Main reason for unmet need for dental examination or treatment among those with unmet needs (%)

Country	Sample size	Reasons for unmet needs		
		Due to a long waiting list (%)	Due to distance/ transportation (%)	Due to financial reasons (%)
BE	828	9.31	0.55	38.13
BG	434	3.82	1.33	53.77
CH	463	1.03		59.19
CY	273	2.60	0.51	71.65
CZ	354	9.38	4.40	12.40
DE	205	0.87	3.50	34.61
EL	2,569	0.55	0.03	69.76
ES	2,172	1.42	0.26	73.35
FI	660	64.71	0.10	5.89
FR	2,245	9.46	2.33	46.69
HR	478	5.90	3.79	19.84
HU	339	6.88	1.50	24.86
IE	182	10.20	0.80	38.54
IT	890	7.68	0.42	71.69
LT	325	17.17	0.29	44.29
LU	147	3.65	1.61	62.42
LV	1,447	4.96	1.24	61.84
PL	1,176	5.86	0.23	13.53
RO	1,002	1.51	0.51	67.77
SE	332	15.43		30.01

Source: EU statistics on income and living conditions (SILC) in 2021, except for Poland and Switzerland in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 14a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 14b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. Respondents could only state the main reason for unmet needs. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Table 14b. Main reason for unmet need for dental examination or treatment among those with unmet needs (%)

Country	Sample size	Reasons for unmet needs		
		Due to a long waiting list (%)	Due to distance/ transportation (%)	Due to financial reasons (%)
AT	108	5.89	7.37	16.76
DK	782	0.65	0.15	44.98
EE	352	20.99	1.45	49.39
IS	323	0.59	0.85	66.48
NO	465	1.14	0.38	54.92
PT	1,447	1.10	0.21	70.40
RS	890	3.41	2.32	47.80
SK	696	14.84	3.04	36.48
UK	574	27.56	1.44	37.25

Source: EU statistics on income and living conditions (SILC) in 2021, except for Iceland and United Kingdom in 2018, Norway, Poland, Serbia, and Slovakia in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 14a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 14b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. Respondents could only state the main reason for unmet needs. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Table 15a. Prevalence of unmet need for dental examination or treatment among those with needs, stratified by sex, age groups, and geographical areas (%)

Country	Sex		Age Groups			Geographical Areas		
	Male (%)	Female (%)	<60 (%)	60–69 (%)	70+ (%)	Densely populated (%)	Intermedi-ate (%)	Thinly populated (%)
BE	8.10	7.73	7.83	8.82	7.47	9.13	7.78	6.51
BG	10.60	9.85	8.16	12.11	19.83	9.02	8.82	13.55
CH	8.33	6.35	9.31	4.34	2.78	7.96	6.76	7.76
CY	4.38	4.98	4.59	5.62	4.46	4.81	4.40	4.68
CZ	3.48	3.11	2.92	3.76	4.78	3.91	3.00	3.02
DE	2.55	1.95	2.66	1.47	1.76	2.38		1.62
EL	28.70	27.97	28.03	28.05	29.84	27.36	25.27	34.43
ES	12.91	12.33	11.82	14.77	14.01	12.00	13.99	12.03
FI	14.92	15.32	17.28	11.67	11.67	18.34	14.60	12.39
FR	10.81	11.91	11.52	12.82	9.88	11.29	11.93	11.04
HR	8.19	6.12	5.67	11.04	12.70	7.85	6.36	6.87
HU	11.37	12.79	11.54	15.33	13.01	11.31	12.38	13.11
IE	6.02	9.04	8.12	4.69	8.11	9.05	6.97	6.72
IT	7.36	7.97	7.16	8.74	8.40	8.73	7.40	6.29
LT	6.37	7.28	5.04	12.82	10.95	6.65	9.51	6.33
LU	3.06	2.65	3.24	1.32	1.75	5.29	3.01	1.63
LV	22.80	19.69	17.37	30.49	33.20	21.32		20.24
PL	14.09	13.15	12.81	16.96	15.75	11.79	15.30	14.61
RO	8.15	9.72	7.68	11.45	11.75	6.38	10.63	9.82
SE	8.85	9.49	9.79	6.82	9.11	9.72	10.01	9.70

Source: EU statistics on income and living conditions (SILC) in 2021, except for Poland and Switzerland in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 15a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 15b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Table 15b. Prevalence of unmet need for dental examination or treatment among those with needs, stratified by sex, age groups, and geographical areas (%)

Country	Sex		Age Groups			Geographical Areas		
	Male (%)	Female (%)	<60 (%)	60–69 (%)	70+ (%)	Densely populated (%)	Intermedi-ate (%)	Thinly populated (%)
AT	1.12	0.93	0.91	1.16	1.43	1.40	0.97	0.77
DK	11.54	10.16	12.35	8.78	6.45	12.73	9.83	9.56
EE	3.17	3.63	3.63	3.57	2.47	3.76		2.80
IS	11.14	11.85	12.28	8.64	9.08	11.32	12.95	10.95
NO	8.56	8.72	10.60	4.75	2.95	8.74	8.16	9.21
PT	12.76	13.42	11.50	17.23	15.99	11.74	13.97	14.60
RS	6.97	6.19	6.26	8.41	5.99	4.79	5.17	9.15
SK	5.31	5.02	5.16	5.60	4.66	3.76	6.66	4.65
UK	3.55	3.86	4.44	3.04	1.74	3.95	3.37	3.45

Source: EU statistics on income and living conditions (SILC) in 2021, except for Iceland and United Kingdom in 2018, Norway, Poland, Serbia, and Slovakia in 2020.

Note: Calculations for unmet medical care needs were performed separately for specific countries. As for countries in Table 15a, a flag indicator was available which provided information on the need for care, while this indicator was not available for the countries in Table 15b. Sample sizes for Denmark, Finland, Iceland, Netherlands, Norway, Sweden, and Slovenia may be smaller as non-selected respondents were not considered in the analysis. All estimates are weighted. For countries with special respondent selection, the personal weight of selected respondents was used.

Annex

Annex 1. List of countries and country codes

Country code	Country
AT	Austria
BE	Belgium
BG	Bulgaria
CH	Schweiz
CY	Cyprus
CZ	Czechia
DE	Germany
DK	Denmark
EE	Estonia
EL	Greece
ES	Spain
FI	Finland
FR	France
HR	Croatia
HU	Hungary
IE	Ireland

Country code	Country
IS	Iceland
IT	Italy
LT	Lithuania
LU	Luxembourg
LV	Latvia
MT	Malta
NL	Netherlands
NO	Norway
PL	Poland
PT	Portugal
RO	Romania
RS	Serbia
SE	Sweden
SI	Slovenia
SK	Slovakia
UK	United Kingdom

Annex 2. Missing Data – EHIS

Variable	Missing	
	Frequency	%
Unmet health care – 91.03% complete data (among non-proxy interviews)		
Age	0	0
Sex	0	0
Residence	13316	4.4
Unmet healthcare (all reasons)	869	0.3
Unmet healthcare needs (waiting)	2132	0.7
Unmet healthcare needs (transportation)	2347	0.8
Unmet healthcare (financial reasons, all types)	10050	3.4
Unmet needs medical care (financial reasons)	10640	3.6
Unmet medicine needs (financial reasons)	10813	3.6
Unmet mental care needs (financial reasons)	10953	3.7
Unmet dental care needs (financial reasons)	10631	3.6
Unmet social care needs (ADL) – 95.00% complete data (among non-proxy interviews and people aged 65 years and above)		
Age	0	0
Sex	0	0
Residence	3,776	4.2
Unmet social care needs	652	0.7
Unmet social care needs (IADL) – 94.17% complete data (among non-proxy interviews and people aged 65 years and above)		
Age	0	0
Sex	0	0
Residence	3,776	4.2
Unmet social care needs	1,396	1.6

Annex 3. Missing Data – SILC

Variable	Missing	
	Frequency	%
SILC – Countries with flag indicator for need of care – 82.16% complete data		
Age	8,781	2.1
Sex	0	0
Residence	22,515	5.4
Unmet medical care needs	42,674	10.2
Unmet medical care needs reason	42,779	10.2
Unmet dental care needs	41,402	9.9
Unmet dental care needs reason	41,484	9.9
SILC – Countries without flag indicator for need of care – 75.54% complete data		
Age	851	0.7
Sex	0	0
Residence	13,130	10.9
Unmet medical care needs	15,484	12.9
Unmet medical care needs reason	15,511	12.9
Unmet dental care needs	15,433	12.8
Unmet dental care needs reason	15,444	12.9

