

# Health Satellite Accounts 2010-2017

# HSA

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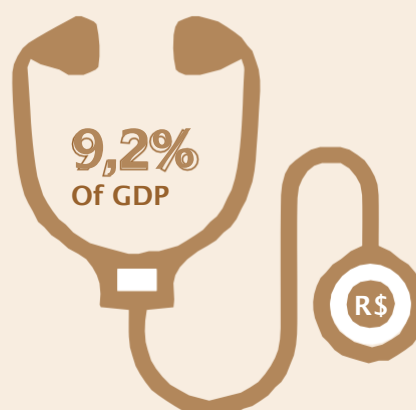
The Health Satellite Accounts (HSA) are an extension of the System of National Accounts (SNA). They widen the analytic power of the National Accounts for specific economic sectors, as is Healthcare. The Brazilian Health Satellite Accounts are the product of cooperation between the Ministry of Health (MS), the National Supplementary Health Agency (ANS), Oswaldo Cruz Foundation (FIOCRUZ), the Brazilian Institute of Geography and Statistics (IBGE) and the Institute for Applied Economic Research (IPEA).

Analyses of the healthcare sector usually focus on the consumption/expenditure dimension. However, as any economic sector, healthcare also generates income and employment. In addition to information on sectoral income and employment, the Health Satellite Accounts provide data on production, consumption and foreign trade of health goods and services.

Health Satellite Accounts data synthesized in this publication thus provides a comprehensive picture of the healthcare sector, describing supply and uses tables for 2010 – 2017. Shares of healthcare activities in the economy and their behavior along this timeframe are also described.

From an economic perspective, the healthcare sector can be analyzed (a) as expenditures on goods and health services (consumption perspective); (b) according to the share of healthcare activities in total value added for the economy (production perspective); (c) according to shares in the generation of income and jobs (income perspective)

## Final consumption expenditure of Health goods and services 2017



## HealthCare's Share in Economy 2017

9,6%  
Of remunerations



7,1%  
Of occupations



7,6%  
Of value added



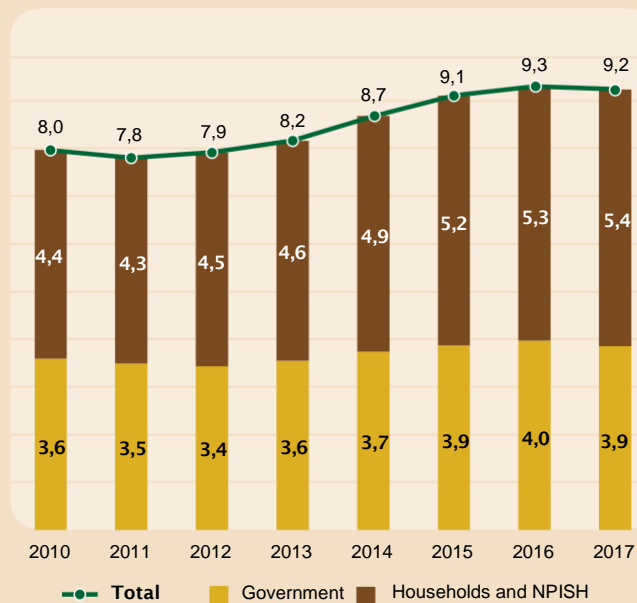
## FINAL CONSUMPTION OF GOODS AND HEALTH SERVICES

Information on final consumption of health goods and services allows the monitoring of total health expenditure and of the yearly consumption volume of health products by residents.

During cycles of retraction of the economy or low economic growth, the consumption of health goods and services tends to decrease less than that of other products in the economy. From 2010 to 2017, health expenditures as a share of GDP increased from 8.0% to 9.2%. This increase coincided with a period of low economic growth in Brazil. An increase in household and non-profit institution shares in total health expenditures was also apparent in the same period.

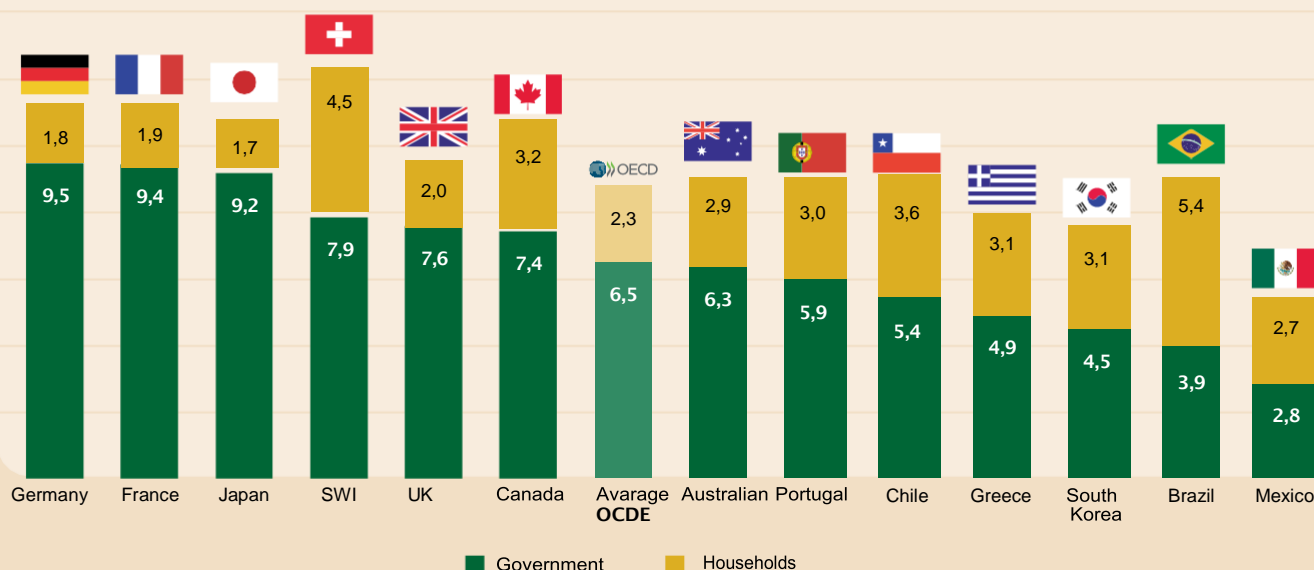
In 2017, the final consumption of health goods and services in Brazil amounted to R\$ 608.3 billion. Government consumption expenditure was R\$ 253.7 billion (3.9% of GDP) and households and nonprofit institution consumption expenditure was R\$ 354.6 billion (5.4% of GDP). Health expenditures as a share of GDP were close to OECD (Organization for Economic Co-operation and Development) levels, albeit with a lower government (public) share in expenditures.

**Final consumption expenditure of Health goods and services as a percentage of GDP by institutional sector, Brazil (%) 2010 - 2017**



Source: IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais.

**Health expenditure as a % of GDP, by government and household shares. participation. Brazil and Selected Countries (%) - 2017**



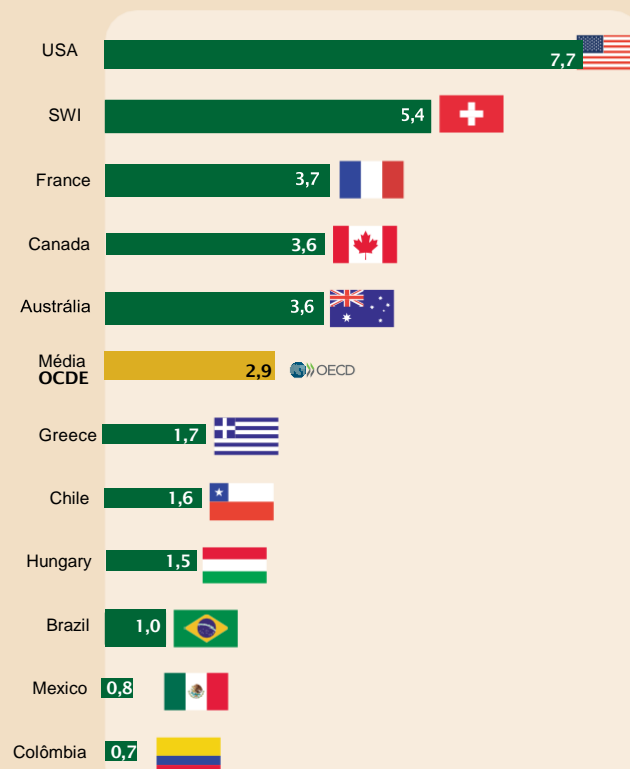
Source: 1. IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais. 2 System of national accounts 2008. Nova York: United Nations, 2009. 662 p. Prepared under the auspices of the United Nations - UN, European Commission - Eurostat, International Monetary Fund - IMF, Organization for Economic Cooperation and Development - OECD and World Bank. Available at: <https://unstats.un.org/unsd/nationalaccount/sna2008.asp>. Accessed in December. 2019.

Current health expenditures per capita is another relevant indicator. It depicts how much a country spends on health per person, bringing population size into the expenditure equation. In 2017, household and non-profit institutions' (private) health expenditure per capita was R\$ 1,714.6 while government health expenditure per capita was R\$ 1,226.8.

The analysis of health expenditure per capita using purchasing power parity (US\$ PPP) allows comparisons between Brazil's health consumption and that of other countries. The Figure below shows that Brazilian health expenditure per capita exceeds that of Latin American countries, such as Colombia and Mexico. On the other hand, it is 2.9 times lower than the OECD average. The Health Satellite Accounts also provide a more detailed description of government, households and NPISHs final consumption expenditures on health goods and services according to products. To this end, expenditures are consolidated by the institutional sectors financing them. Beneficiaries of health goods and services are always households. Households are, thus, the actual individual consumers of goods and services provided through expenditures for general government and other institutional sectors' final consumption.

In 2017, private healthcare services were 66.8% of total household expenditures on health. Household expenditures in HAS include all payments made through voluntary health insurance schemes, including payments by employers. Expenditures on pharmaceuticals was R\$ 103.5 billion (29.9% of total household expenditures). When doctors and hospitals buy instruments and devices to be used in the production of other goods or services, these are not classified as final consumption. Most of the use for "Medical and dental instruments and supplies" is gross fixed capital formation (investment). A blood pressure measuring device for household personal use, on the other hand, would be considered household final consumption.

Comparative scale of total expenditure on health per capita. US\$PPP. Brazil and selected countries - 2017



Source: 1. IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais. 2. System of national accounts 2008. Nova York: United Nations, 2009. 662 p. Prepared under the auspices of United Nations, UN, European Commission - Eurostat, International Monetary Fund - IMF, Organization for Economic Cooperation and Development - OECD e World Bank. Available at: <https://unstats.un.org/unsd/nationalaccount/sna2008.asp>. Accessed in December. 2019

## Final consumption by institutional sector according to product (million R\$)

Products	Final consumption , by institutional sector (1 000 000 R\$ at current prices)							
	2010	2011	2012	2013	2014	2015	2016	2017
<b>Households</b>								
<b>Total</b>	165.432	184.577	211.282	239.986	278.874	307.054	326.501	345.694
Pharmaceuticals for human use	62.071	66.064	72.718	79.022	88.509	92.517	99.927	103.469
Pharmaceutical preparations	119	130	144	160	172	174	197	206
Manufacture of medical and dental instruments and supplies	316	370	438	491	570	656	678	762
Other materials of medical and dental instruments and supplies	5.105	5.505	6.000	7.088	8.271	9.271	9.476	10.200
Private Healthcare	97.821	112.508	131.982	153.225	181.352	204.436	216.223	231.057
<b>Government</b>								
<b>Total</b>	139.710	152.625	165.047	189.403	215.458	231.447	248.492	253.699
Pharmaceuticals for human use	7.042	7.297	7.325	8.469	9.422	10.884	10.181	8.443
Public Healthcare	105.612	117.337	126.694	149.076	170.507	184.283	196.916	201.623
Private Healthcare	27.056	27.991	31.028	31.858	35.529	36.280	41.395	43.633
<b>NPIs serving households (NPISHs)</b>								
<b>Total</b>	4.301	4.552	4.615	5.998	7.175	7.583	8.191	8.886
Private Healthcare	4.301	4.552	4.615	5.998	7.175	7.583	8.191	8.886

Fonte: IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais.

Government has expenditures both on public healthcare (which includes services produced in public hospitals and public health facilities) and on private healthcare (services purchased from private healthcare providers). The latter amounted to 17.2% of government consumption health expenditure in 2017 (0.7% of GDP). The main change in final government consumption from 2010 to 2017 was an increase in expenditures on public healthcare, which grew from the equivalent to 2.7% of GDP to 3.1% of GDP in 2017. Pharmaceutical expenditures fell from 0.2% of GDP to 0.1% of GDP. Household consumption expenditures on pharmaceuticals remained stable (1.5% of the total GDP), while household expenditures on private health services (including health insurance) as a % of GDP increased from 2.5% to 3.5%.

When doctors and hospitals buy instruments and devices to be used in the production of other goods or services, these are not classified as final consumption. Most of the use for "Medical and dental instruments and supplies" is gross fixed capital formation (investment). A blood pressure measuring device for household personal use, on the other hand, would be considered household final consumption.

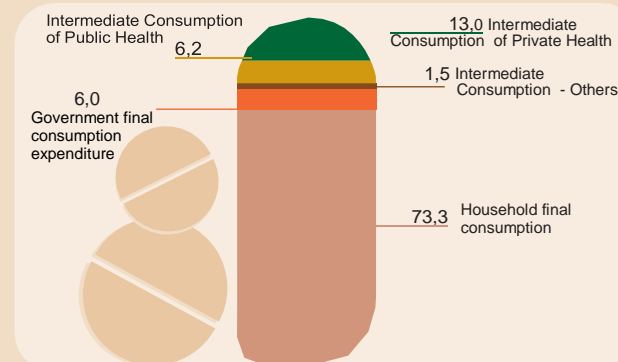
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Household consumption expenditures on pharmaceuticals remained stable (1.5% of the total GDP), while household expenditures on private health services (including health insurance) as a % of GDP increased from 2. 5% to 3.5%.

Non-profit institutions serving households are institutions such as NGOs and churches, that fit into SNA definition for this institutional sector. All non-profit consumer spending is on social services (such as in detox clinics and nursing homes).

## Consumption of pharmaceuticals for human use in Brazil (%)



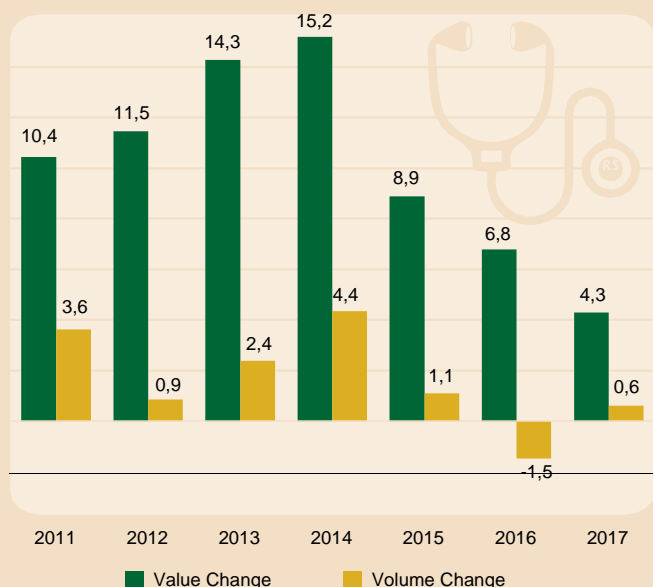
## Final Consumption, as a percentage of GDP by institutional sector, according to the products (%)

Products	Final Consumption, as a percentage of GDP by institutional sector, according to the products - Brazil - 2010-2017							
	2010	2011	2012	2013	2014	2015	2016	2017
<b>Households</b>								
<b>Total</b>	4,3	4,2	4,4	4,5	4,8	5,1	5,2	5,3
Pharmaceuticals for human use	1,6	1,5	1,5	1,5	1,5	1,5	1,6	1,6
Pharmaceutical preparations	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0
Manufacture of medical and dental instruments and supplies	0,0	0,0	0,0	0,0	0,0	0,0	0,0	0,0
Other materials of medical and dental instruments and supplies	0,1	0,1	0,1	0,1	0,1	0,2	0,2	0,2
Private Healthcare	2,5	2,6	2,7	2,9	3,1	3,4	3,4	3,5
<b>Government</b>								
<b>Total</b>	3,6	3,5	3,4	3,6	3,7	3,9	4,0	3,9
Pharmaceuticals for human use	0,2	0,2	0,2	0,2	0,2	0,2	0,2	0,1
Public Healthcare	2,7	2,7	2,6	2,8	3,0	3,1	3,1	3,1
Private Healthcare	0,7	0,6	0,6	0,6	0,6	0,6	0,7	0,7
<b>NPis serving households (NPISHs)</b>								
<b>Total</b>	0,1	0,1	0,1	0,1	0,1	0,1	0,1	0,1
Private Healthcare	0,1	0,1	0,1	0,1	0,1	0,1	0,1	0,1

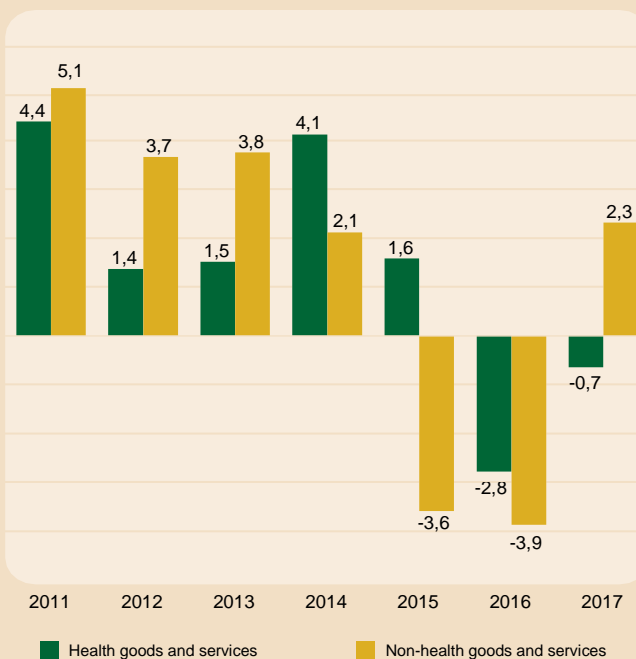
## Final Consumption: Price and Volume Variations

As an extension of the System of National Accounts (SNA), HSA follows the same methodology and is consistent with SNA's values for the economy. This allows us to analyse actual increases in consumption volumes. To measure actual changes in volumes, the effect of prices has to be discounted. Since 2015, despite increases in expenditures at current values, there were no substantial changes in volumes of health goods and services. In 2016, there was actually a decrease in consumption volume of health products (-1.5%).

**Evolution of change in value and volume of final consumption of health goods and services (%)**

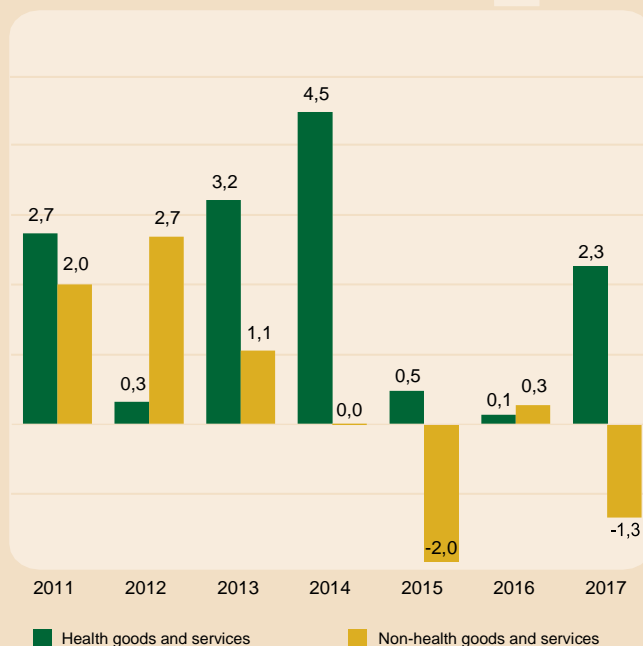


**Volume change in household consumption of health and non-health goods and services (%).**



Source: IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais.

**Volume change in government consumption of health and non-health goods and services. (%)**



Value increases outweigh volume increases along the whole series. In 2016 and 2017, the price index of expenditures of health goods and services increased 8.4% and 3.7%, evidencing the impact of price changes on expenditure growth.

Another comparison using volumes concerns the consumption of health goods and services and non-health goods and services (all other goods and services in the economy) by the institutional sector.

The volume of household final consumption for healthcare goods and services only exceeded that of non-health goods and services for the years 2014 and 2016. In other years, the opposite occurred. Regarding government, volumes in the consumption of health goods and services exceeded that of non-health products along the whole series, except for 2012 and 2016.

## HealthCare's Share in the Economy

Healthcare is a significant share of the Brazilian economy. This share can be summed up in healthcare's contribution to total value added, economic growth, income generation, and employment. Import and export information is also available.

### Gross Value Added (GVA)

Gross value added is a measure of income generation for each economic activity in a given period.

The share of gross value added for healthcare activities in the total economy has increased from 6.1% (R \$ 202.3 billion) in 2010 to 7.6% (R\$ 429,2 billion) in 2017. The highest increase was seen for Private Healthcare (2.1% of GVA, in 2010, to 3.0% in 2017).

On analysing factor shares in gross value added (capital and labor) according to individual healthcare activities, the activity retail sale of pharmaceuticals and medical goods had the lowest shares for labour (wages and salaries) in 2017 (52.1%).

Capital's contribution to production is expressed in gross operating surplus. It is calculated by subtracting compensation of employees and taxes and subsidies on production from total value-added. Manufacturing of medical and dental instruments had the highest gross operating surplus as a share of VA (66.8%) in 2017.

Gross operating surpluses for the public healthcare activity amount to the consumption of fixed capital (depreciation of assets) used in the production process. In 2017, capital consumption amounted to 4.8% of GVA of this activity, while salaries and wages were 76.3%.

Entrepreneurship is a significant share of private health care (23.0%) and is mainly represented by doctors in private practices.

### Healthcare Gross value added , by activities (million R\$)

Activities	Health Gross value added							
	2010	2011	2012	2013	2014	2015	2016	2017
Healthcare activities	202 333	230 570	267 441	308 604	351 985	375 323	408 049	429 243
Manufacture of basic pharmaceutical	18 659	18 639	20 091	20 716	23 916	21 283	24 753	28 908
Manufacture of medical and dental instruments and supplies	5 766	6 308	7 023	7 525	8 709	8 933	10 102	9 593
Retail of pharmaceuticals and medical goods	36 178	46 844	54 399	62 235	69 727	72 869	80 904	82 206
Private Healthcare	69 632	79 732	98 465	115 112	132 656	144 412	154 561	167 303
Public Healthcare	67 369	73 702	81 743	96 938	110 181	119 144	127 682	129 831
Public Healthcare - Education and Defense	4 729	5 345	5 720	6 078	6 796	8 682	10 047	11 402
Others (non-health))	3 100 507	3 489 891	3 826 818	4 245 156	4 620 749	4 780 278	5 011 773	5 240 523



## Gross Value Added Structure (%)

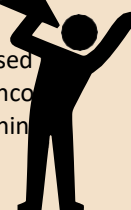
Operations	Gross Added Value Structure						
	Healthcare Activities						
	Manufacture of basic pharmaceutical products and pharmaceutical preparations	Manufacture of medical and dental instruments and supplies	Retail of pharmaceuticals and medical goods	Private Healthcare	Public Healthcare	Public Healthcare - Education and Defense	Others (non-health)
Percentage participation (%)	100,0	100,0	100,0	100,0	100,0	100,0	100,0
Remuneration	36,1	31,9	52,1	53,1	95,2	95,4	50,4
Wages							
Actual social contributions	8,6	6,4	11,0	8,2	13,6	14,4	9,0
Official Employers' social contributions /FGTS	8,1	6,2	10,8	8,0	13,6	14,1	8,7
Employers' social contributions to private insurance	0,4	0,2	0,2	0,2	0,0	0,3	0,4
Imputed social contributions	0,0	0,0	0,0	0,0	5,3	5,2	1,6
Gross operating surplus and Mixed Income	62,0	66,8	46,0	45,0	4,8	4,6	48,4
mixed income	0,0	0,00	0,1	23,0	0,0	0,0	9,7
Gross operating surplus	62,0	66,8	46,0	22,1	4,8	4,6	38,7
Taxes on production	2,0	1,3	1,9	1,9	0,0	0,0	1,6
Subsidies on products	(-) 0,1	0,0	(-) 0,1	(-) 0,1	0,0	0,0	(-) 0,4

Source: IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais.

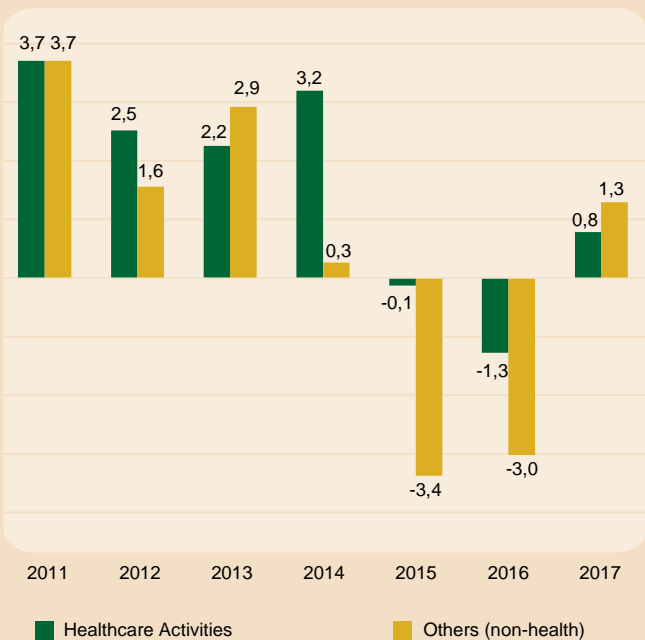
The analysis of volume growth, which discounts from value added the effects of price changes, is a good way to monitor the performance of an economic sector or activity. On comparing volume growth of healthcare activities with the rest of the economy, it is once again apparent that this particular set of activities declines less than other economic activities in periods of economic retraction. In 2015 and 2016, non-healthcare related activities declined 3.4% and 3.0% in real terms, whereas healthcare activities declined 0.1% and 1.3%. In 2017, growth for non-healthcare activities was 1.3% and for healthcare activities was 0.8%.

### Do you know what added value is?

The value added for each economic activity remunerates the factors of production (labor and capital). Entrepreneurs (self-employed workers) are remunerated for work and ownership of assets used in production (capital). Their income is called mixed income. Value added also includes fees and taxes pertaining to the activity, such as payroll taxes, and contributions on salaries, education, and payments to the S System. (Sesi, Sesc, Senai e Senac).



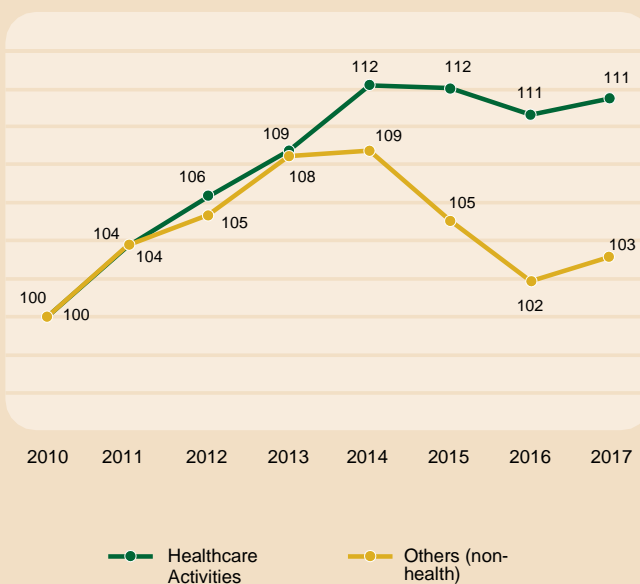
## Change in volume of gross value added of Healthcare activities (%)



Fonte: IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais.

## Change in volume accumulation of value added healthcare activities and non-health activities

(index-base 2010=100)



Fonte: IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais.

An alternative way to present this comparison is to use volume accumulation. Between 2010 and 2017, the cumulative increase in healthcare activities' volume was 11.5%. For the rest of the economy (non-health activities), the increase was 3.2%. Volume accumulation differences for healthcare and the rest of the economy become very evident from 2014 onwards.

## Import and export of health goods and services

Health product exports hold a low share in Brazilian trade balance, representing 0.7% of total products exported for the country in 2017.

Imports, however, are substantial. In 2017, imports of pharmaceutical active ingredients used in the production process of medicines represented 76.4% of their total supply. Imported human medicines were 24.1% of the total supply. Imports for Other materials of medical and dental instruments and supplies were responsible for 32.8% of the total supply.

## Employment , wages and salaries

Employment in health activities has grown over the average of the economy, from 5.3% of whole economy's jobs in 2010 to 7.1% in 2017.

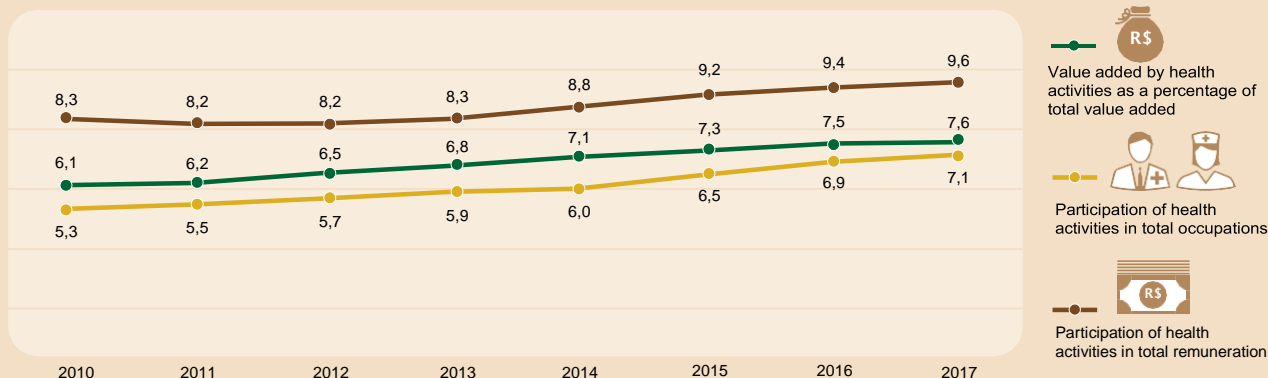
The concept of employment in SNA includes employees and self-employed. Employment is the set of tasks and duties performed by a person in a production unit. One person may have more than one job.



Wages and salaries in the healthcare sector are also above the economy's average. In 2017, they amounted to 9.6% of the wages and salaries in the whole economy. Among all healthcare activities, the ones with the highest number of jobs were Private Healthcare and Public Healthcare. From 2010 to 2017, these activities generated more employment than other health activities. They also among the activities with the highest growth in number of jobs- 46.2% (private healthcare) and 37.4% (public healthcare). However, public healthcare (education and defense) was the health-related activity with the highest growth in number of jobs between 2010 and 2017 (73.0%)



## Participation of Healthcare activities in the total VA, occupations and remuneration (%)



Source: IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais.

Average annual income of healthcare activities was R\$ 43.8 thousand in 2017. Between 2010 and 2017, there was a nominal growth of 51.3% in average income, while, for non-health activities, the increase was 72,5%. The exceptions were the

activities Manufacture of pharmaceuticals, Manufacture of medical and dental instruments and supplies and Retail sale of pharmaceutical and medical goods, which showed higher income growth than non-health activities. ■

## Occupations in Healthcare activities

Activities	Occupations in Healthcare Activities							
	2010	2011	2012	2013	2014	2015	2016	2017
Healthcare Activities	5 228 775	5 455 108	5 733 939	6 049 668	6 337 473	6 597 191	6 937 527	7 260 572
Manufacture of basic pharmaceutical products and pharmaceutical preparations	90 675	93.221	92 060	95 120	100 062	91 798	90 747	88 894
Manufacture of medical and dental instruments and supplies	59 979	62 514	70 011	66 993	66 700	68 458	65 481	68 995
Retail of pharmaceuticals and medical goods	1 027 451	1 060 688	1 112 543	1 169 287	1 222 467	1 204 022	1 217 528	1 267 122
Private Healthcare	2 294 668	2 451 934	2 617 872	2 688 997	2 968 721	3 082 956	3 224 272	3 353 906
Public Healthcare	1 562 737	1 585 717	1 645 234	1 839 563	1 780 378	1 903 462	2 050 964	2 147 269
Public Healthcare - Education and Defense	193 265	201 034	196 219	189 708	199 145	246 495	288 535	334 386
Others – Non-Health	92 887 443	94 105 049	95 226 329	96 487 730	99 135 205	95 357 885	93 424 867	94 356 445

Source: IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais.

<sup>3</sup> (wages and salaries + mixed income /total number of jobs)

## Healthcare activities' Average annual incomes (R\$)

Activities	Average annual income							
	2010	2011	2012	2013	2014	2015	2016	2017
Healthcare activities	28 954	30 930	33 216	36 286	39 337	41 825	43 080	43 820
Manufacture of basic pharmaceutical products and pharmaceutical preparations	64 693	71 969	79 687	83 873	93 812	112 704	119 706	117 544
Manufacture of medical and dental instruments and supplies	23 241	26 938	30 395	31 451	33 538	41 062	44 471	44 322
Retail of pharmaceuticals and medical goods	16 663	18 980	21 454	24 025	25 781	28 720	32 449	33 859
Private Healthcare	25 492	26 533	28 249	30 862	31 785	34 458	35 510	37 958
Public Healthcare	40 968	44 181	47 247	50 317	59 149	59 721	59 251	57 543
Public Healthcare - Education and Defense	23 263	25 289	27 729	30 531	32 574	33 611	33 178	32 522
Others (non-health)	19 353	21 695	23 932	26 397	27 791	30 365	32 458	33 379

Source: IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais.

## Indicators - Healthcare's share in Economy

(continua)

Indicators	2010	2011	2012	2013	2014	2015	2016	2017
<b>Final consumption expenditure of Health goods and services as a percentage of GDP (%)</b>								
Final consumption expenditure of Health goods and services as a percentage of GDP	8,0	7,8	7,9	8,2	8,7	9,1	9,3	9,2
Government Final consumption expenditure of Health goods and services as a percentage of GDP	3,6	3,5	3,4	3,6	3,7	3,9	4,0	3,9
Households and NPISHs Final consumption expenditure of Health goods and services as a percentage of GDP	4,4	4,3	4,5	4,6	4,9	5,2	5,3	5,4
<b>Relationship between health care expenditure and GDP (%)</b>								
Final consumption expenditure of Health services as a percentage of GDP	6,0	6,0	6,1	6,4	6,8	7,2	7,4	7,4
Final consumption expenditure of pharmaceuticals for human use as a percentage of GDP	1,8	1,7	1,7	1,6	1,7	1,7	1,8	1,7
Pharmaceutical's share on Final consumption expenditure of Health goods and services	22,4	21,5	21,0	20,1	19,6	19,0	18,9	18,4

## Indicators Healthcare's share in Economy

(continuação)

Indicators	2010	2011	2012	2013	2014	2015	2016	2017
<b>Relationship between health care expenditure and GDP (%)</b>								
Health service 's share on Final consumption expenditure of Health goods and services	75,9	76,8	77,3	78,1	78,7	79,2	79,3	79,8
Government's share on Final consumption expenditure of Health goods and services	45,1	44,7	43,3	43,5	43,0	42,4	42,6	41,7
Households and NPISHs's share on Final consumption expenditure of Health goods and services	54,9	55,3	56,7	56,5	57,0	57,6	57,4	58,3
<b>Total expenditure on health per capita according institutional sector (R\$ at current prices)</b>								
Government expenditure per capita on the final consumption of health goods and services	716,9	776,3	832,2	947,0	1 068,1	1 137,5	1 211,2	1 226,8
Households and NPISHs expenditure per capita on the final consumption of health goods and services	870,9	962,0	1 088,7	1 229,9	1 418,1	1 546,3	1 631,4	1 714,6
<b>Health expenditure contributions to total final consumption expenditure (%)</b>								
Health expenditure share of total government expenditure final consumption	18,9	18,7	18,6	18,9	19,5	19,6	19,5	19,2
Health expenditure share of total households and NPISH expenditure final consumption	7,3	7,2	7,3	7,5	7,8	8,2	8,3	8,3
<b>Relationship between health expenditure, income, and actual health consumption and other goods and services (%)</b>								
Households' final consumption expenditure of health goods and services as a percentage of household disposable income	6,6	6,5	6,7	6,8	7,2	7,4	7,4	7,3
Total expenditure on final consumption of health goods and services as a percentage of disposable income	8,2	8,0	8,1	8,3	8,8	9,3	9,5	9,4
Households' final consumption expenditure on health goods and services as a percentage of actual final consumption of health goods and services by families	53,5	54,0	55,5	55,1	55,6	56,2	56,0	56,8
Actual final consumption of health goods and services as a percentage of households' actual final consumption	11,8	11,5	11,5	11,7	12,2	12,5	12,7	12,6

## Indicators Healthcare's share in Economy

(conclusão)

Indicators	2010	2011	2012	2013	2014	2015	2016	2017
<b>Crescimento anual do consumo final de bens e serviços de saúde (variação de volume)</b>								
Final consumption expenditure of health goods and services per capita growth	...	2,7	(-) 0,0	1,5	3,5	0,2	(-) 2,3	(-) 0,2
Final consumption expenditure of health services per capita growth	...	3,2	(-) 0,6	1,2	2,6	0,6	(-) 1,6	0,9
Government Final consumption expenditure of health goods and services per capita growth	...	2,7	0,3	3,2	4,5	0,5	0,1	2,3
Households Final consumption expenditure of health goods and services per capita growth	...	4,4	1,4	1,5	4,1	1,6	(-) 2,8	(-) 0,7
<b>Indicators (%)</b>								
Participation of Healthcare activities in the total VA	6,1	6,2	6,5	6,8	7,1	7,3	7,5	7,6
Participation of Healthcare activities in the total occupations	5,3	5,5	5,7	5,9	6,0	6,5	6,9	7,1
Participation of Healthcare activities in the total remunerations	8,3	8,2	8,2	8,3	8,8	9,2	9,4	9,6
<b>References</b>								
Population (1 000) (1)	194 891	196 604	198 315	200 004	201 718	203 476	205 157	206 805
GDP (milhões R\$)	3 885 847	4 376 382	4 814 760	5 331 619	5 778 953	5 995 787	6 269 328	6 583 319
GDP growth (%)	7,5	4,0	1,9	3,0	0,5	(-) 3,5	(-) 3,3	1,3

Source: IBGE, Diretoria de Pesquisas, Coordenação de Contas Nacionais.

(1) Projeção da população para 1º de julho.