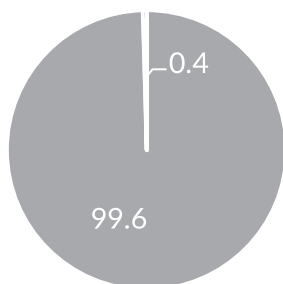


# Qatar

## Demographics

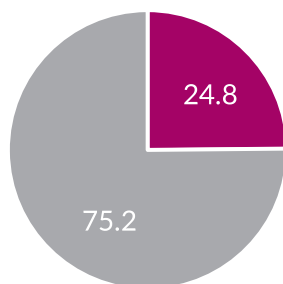
Total population (2020)	2 881 060
Life expectancy at birth (years) female/male (2019)	82/79
Under-5 mortality rate (per 1000 live births) (2019)	7
Gross domestic product per capita (current US\$) (2020)	50 805.5

Population as percentage of regional total, 2020



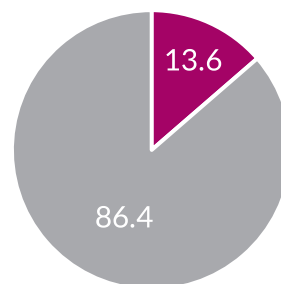
■ Region ■ Qatar

Percentage of female and male population, 2020



■ Female ■ Male

Population aged 0-14 of total population, 2020



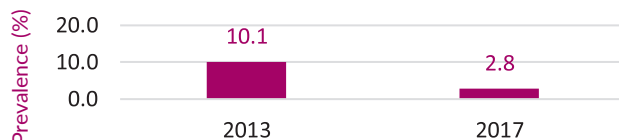
■ 0-14 ■ > 14

Source: The World Bank

## Child malnutrition

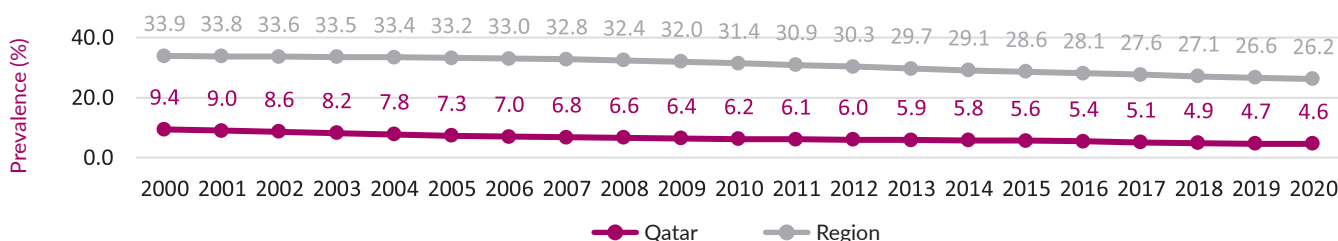
The prevalence of wasting in children under five in Qatar decreased from 10.1% in 2013 to 2.8% in 2017. The prevalence of stunting decreased from 9.4% to 4.6% over the past two decades, remaining significantly lower than the regional average. During the same period, the prevalence of overweight in children under five increased from 9.9% to 13.9%, remaining at a notably higher level than the regional average.

Wasting prevalence among children under 5 years of age

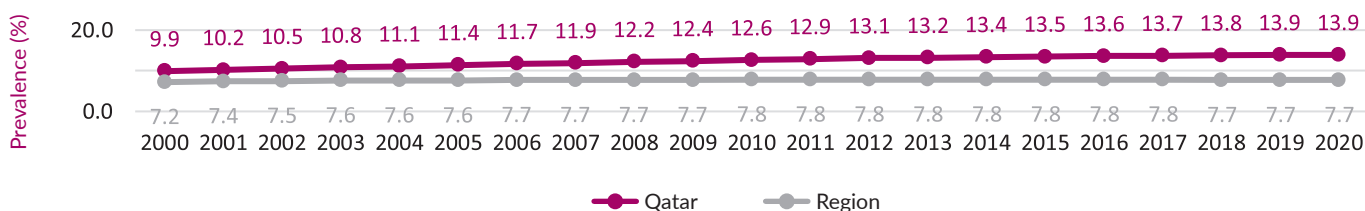


Source: The Eastern Mediterranean Regional Health Observatory.

Stunting prevalence among children under 5 years of age



Overweight prevalence among children under 5 years of age



Source: WHO Global Health Observatory.

**Note:** The UNICEF/WHO/WB joint child malnutrition estimates for stunting and overweight are modelled at logit (log-odds) scale using a penalized longitudinal mixed-model with a heterogeneous error term. The country modelled estimates are generated using the JME country dataset, which uses the collection of national data sources. Due to this method, estimates may differ from official estimates of Member States (i.e., the stunting prevalence from a household survey for a given country in a given year is not reported as the prevalence for that country in that year; rather, it feeds into the modelled estimates). The methodology is described here: <https://www.who.int/publications/i/item/9789240025257>. Wasting is defined as a percent weight-for-height that is two or more standard deviations below the median. Stunting is defined as a percent height-for-age that is two or more standard deviations below the median. Overweight is defined as a percent weight-for-height that is two or more standard deviations above the median.

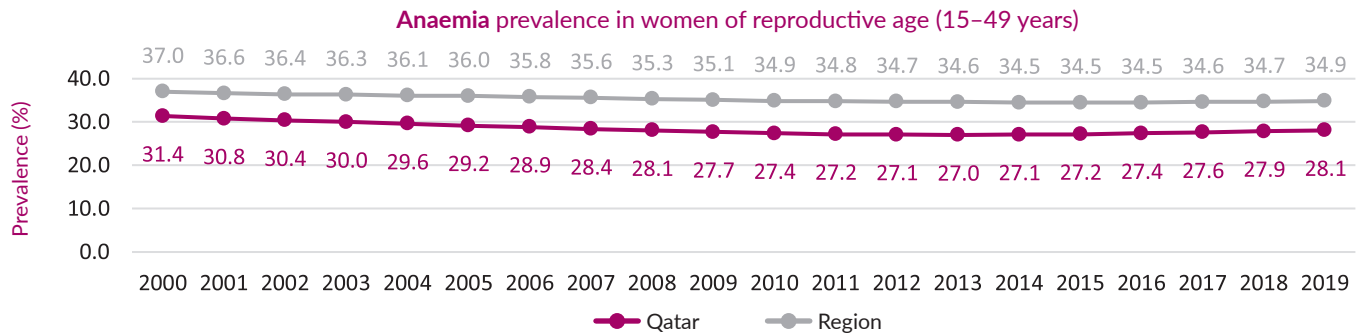
## Infant and young child feeding

The prevalence of early initiation of breastfeeding (within one hour of birth) in Qatar was 33.5% in 2012. The prevalence of exclusive breastfeeding among children under six months was 29.3%.

Sources: UNICEF.

## Anaemia in women of reproductive age

The prevalence of anaemia in women of reproductive age in Qatar decreased slightly from 31.4% to 28.1% between the years 2000 and 2019.

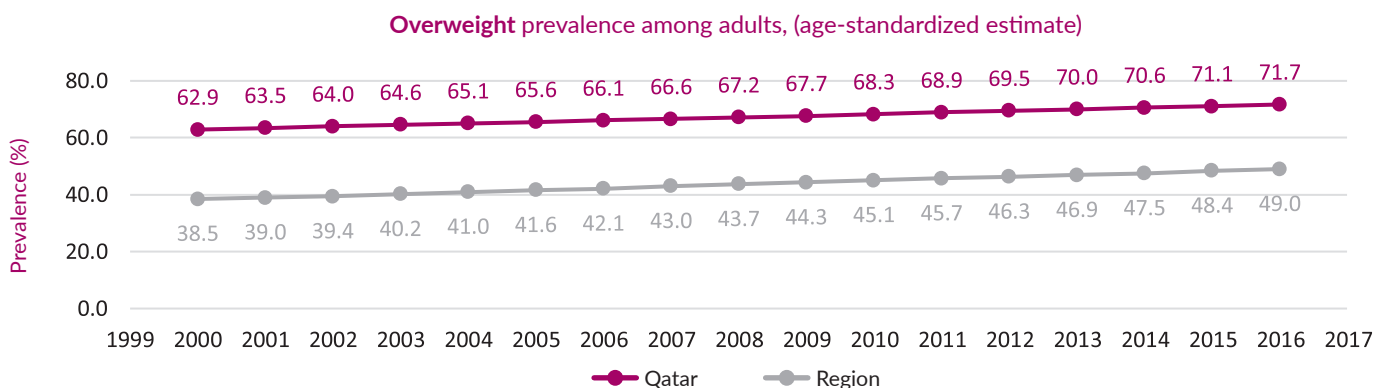


Source: WHO Global Health Observatory.

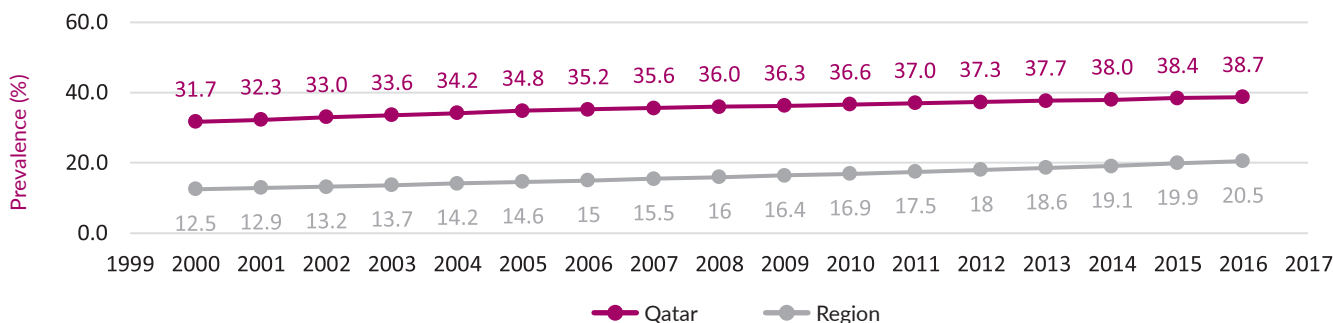
**Note:** The WHO global anaemia estimates are derived from a hierarchical Bayesian mixture model that uses all available data to make estimates for each country and year. In the model, estimates for each country are informed by data from that country itself, if available, and by data from other countries, especially those in the same region. Due to this method, the estimates may differ from official estimates of Member States. The methodology is described here: [https://cdn.who.int/media/docs/default-source/anaemia-in-women-and-children/hb-methods-for-gather.pdf?sfvrsn=da0fb5f\\_11](https://cdn.who.int/media/docs/default-source/anaemia-in-women-and-children/hb-methods-for-gather.pdf?sfvrsn=da0fb5f_11) and here <https://pubmed.ncbi.nlm.nih.gov/25103581/>.

## Overweight and obesity

A significant increase in the prevalence of overweight among adults in Qatar was recorded between the years 2000 and 2016 (from 62.9% to 71.7%). Also, the prevalence of overweight among children and adolescents aged 5–19 rose from 31.7% in 2000 to 38.7% in 2016.



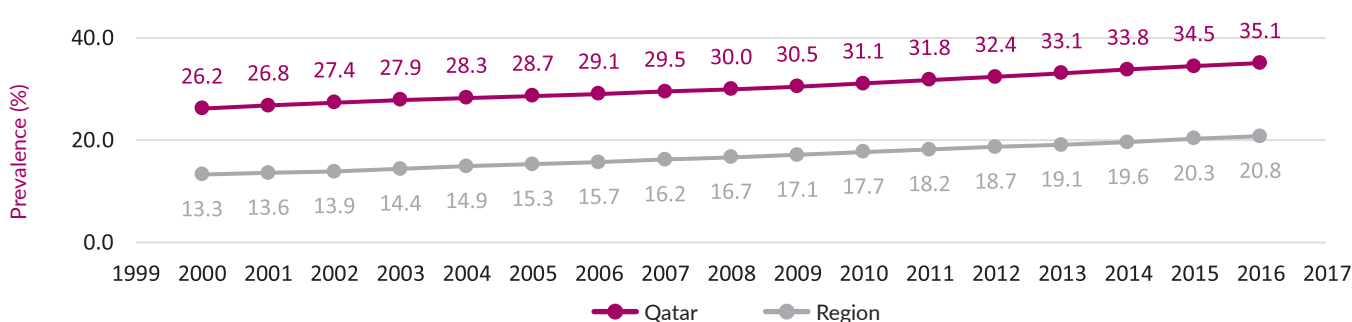
Overweight prevalence among children and adolescents (5–19), (crude estimate)



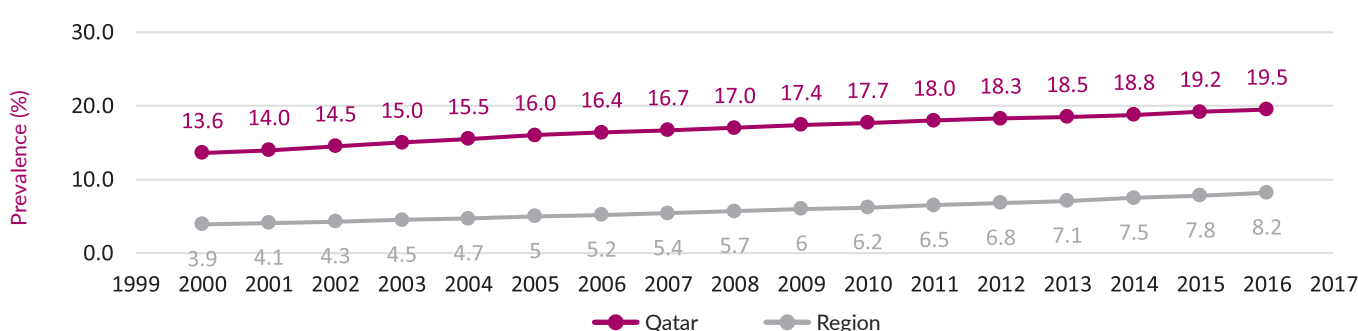
BMI = body mass index. (Overweight in adults is defined as a BMI of 25 or greater, and in children and adolescents as a BMI one or more standard deviations above the median. Obesity in adults is defined as a BMI of 30 or greater, and in children and adolescents as a BMI two or more standard deviations above the median.)

Obesity is the reported risk factor responsible for the greatest total number of disability-adjusted life years (DALYs) in Qatar in 2019.<sup>1</sup> The prevalence of obesity in Qatar increased from 26.2% to 35.1% between 2000 and 2016. Similarly, the prevalence of obesity among children and adolescents aged 5-19 in Qatar significantly increased between 2000 and 2016, from 13.6% to 19.5%.

Obesity prevalence among adults (age-standardized estimate)



Obesity prevalence among children and adolescents (5-19), (crude estimate)



Source: WHO Global Health Observatory.

**Note:** The WHO estimates for overweight and obesity are derived from a Bayesian hierarchical model, which uses NCD-RisC database of population-based data. The model has a hierarchical structure in which estimates for each country and year are informed by its own data, if available, and by data from other years in the same country and from other countries, especially those in the same region with data for similar time periods. Due to this method, the estimates may differ from official estimates of Member States. The methodology is described here: <https://pubmed.ncbi.nlm.nih.gov/29029897/>.

<sup>1</sup> Country profiles [website]. Seattle, WA: Institute for Health Metrics and Evaluation, University of Washington; 2021 (<https://www.healthdata.org/results/country-profiles>, accessed 11 July 2022).

## Micronutrient status

The iodine intake in Qatar is considered excessive, as the estimated median urinary iodine concentration among school children was recorded to be 341 µg/L in 2014.<sup>2</sup>

Source: WHO Micronutrients Database. Vitamin and Mineral Nutrition Information System.

## Nutrition policies and strategies

### Key national programmes

		Date
Development of national nutrition strategy or action plan <sup>a, b</sup>	✓	2017–2022
Plan of action for obesity prevention <sup>b</sup>	✓	2015
Strategy or plan of action on infant and young child feeding <sup>b</sup>	✓	Since 2014
Code of marketing of breast milk substitutes <sup>c, d</sup>	✗	
Child growth monitoring <sup>b</sup>	✓	2011–2016
School feeding programme <sup>a, b, e</sup>	✓	2018–2019

Policies	Policy to reduce salt/sodium consumption <sup>b, f</sup>	Tax on sugar sweetened beverages <sup>g, h</sup>	Policy to limit trans-fatty acid intake <sup>b, i</sup>	Policy to reduce the impact of marketing of food to children <sup>b, j</sup>	Policy on salt iodization <sup>b, k</sup>	Front-of-pack nutrition labelling for food	Wheat flour fortification <sup>b, l</sup>
	✓	✓	✓	✓	✓	✗	✓
	2011–2016	2019	2011–2016	2011–2016	Mandatory		Voluntary

✓ = Policy/programme implemented      ✗ = Policy/programme not implemented

<sup>a</sup> Policies in Qatar: In: Global database on the Implementation of Nutrition Action [website]. Geneva: World Health Organization; 2022 (<https://extranet.who.int/nutrition/gina/en/policies/1528>, accessed 28 July 2022).

<sup>b</sup> Programmes in Qatar: In: Global database on the Implementation of Nutrition Action [website]. Geneva: World Health Organization; 2022 (<https://extranet.who.int/nutrition/gina/en/programmes/1528>, accessed 28 July 2022).

<sup>c</sup> Al-Jawaldeh A, Sayed G. Implementation of the International Code of Marketing of Breastmilk Substitutes in the Eastern Mediterranean Region. East Mediterr Health J. 2018(1):25–32. doi:10.26719/2018.24.1.25.

<sup>d</sup> Marketing of breast milk substitutes: national implementation of the international code, status report 2020. Geneva: World Health Organization; 2020 (<https://www.who.int/publications/i/item/9789240006010>, accessed 6 June 2022).

<sup>e</sup> How-to guide for school canteen supervisors for the academic year 2018-2019. Doha: Health and Safety Department; 2018 (<https://www.edu.gov.qa/ar/Deputy/sharedservicesaffairs/healthandsafety-dept/Documents/FilesLibrary/2-GuidetoSchoolCafeteriaSupervisors.pdf>, accessed 29 July 2022) (in Arabic).

<sup>f</sup> Al-Jawaldeh A A, et al. Salt reduction initiatives in the Eastern Mediterranean Region and evaluation of progress towards the 2025 Global Target: A systematic review. Nutrients. 2021;13(8):2676. doi:10.3390/nu13082676.

<sup>g</sup> Al-Jawaldeh A and Megally R. Impact evaluation of soft drink taxes as part of nutrition policies in Gulf Cooperation Council countries: Bahrain, Kuwait, Oman, Qatar, Saudi Arabia and United Arab Emirates [version 2; peer review: 1 approved, 1 not approved]. F1000Research 2021, 9:1287 doi:10.12688/f1000research.27097.2.

<sup>h</sup> Al-Jawaldeh A, Hammerich A, Doggui R, Engesveen K, Lang K, McColl K. Implementation of WHO recommended policies and interventions on healthy diet in the countries of the Eastern Mediterranean Region: From policy to action. Nutrients. 2020;12(12):3700. doi:10.3390/nu12123700.

<sup>i</sup> Al-Jawaldeh A et al. A systematic review of trans fat reduction initiatives in the Eastern Mediterranean Region. Front Nutr. 2021;8:771492. doi:10.3389/fnut.2021.771492.

<sup>k</sup> Doggui R, Al-Jawaldeh H, Al-Jawaldeh A. Trend of iodine status in the Eastern Mediterranean Region and impact of the universal salt iodization programs: a narrative review. Biol Trace Elem Res. 2020; 198, 390–402. doi.org/10.1007/s12011-020-02083-1.

<sup>l</sup> Al-Jawaldeh AE. The regional assessment of the implementation of wheat flour fortification in the Eastern Mediterranean Region. Int J Sci Res Manag. 2019; 7(03), 28–37. doi:10.18535/ijrm/v6i3.ft01.

<sup>2</sup> Global Scorecard of Iodine Nutrition 2014–2015, Ottawa: Iodine Global Network; 2015 ([https://www.ign.org/cm\\_data/Scorecard\\_2015\\_August\\_26\\_new\\_intake.pdf](https://www.ign.org/cm_data/Scorecard_2015_August_26_new_intake.pdf), accessed 6 July 2022).

## Success stories

### Sustainability considerations in the Qatar dietary guidelines

The Qatar dietary guidelines, a part of the National Health Strategy and Nutrition and Physical Activity Plan published in 2016, include a recommendation to “eat healthy while protecting the environment”. Specific advice is to emphasize a plant-based diet (including vegetables, fruit, whole grain cereals, legumes, nuts and seedings), reduce leftovers and waste, consume foods produced locally and regionally, choose fresh, homemade foods and conserve water in food preparation. The guidelines include some explanatory facts on sustainability issues related to food production and preparation and some key tips for households.

Ministry of Health Website: <https://www.moph.gov.qa/english/Pages/default.aspx>

WHO-EM/NUT/304/E