

## **SDG 3 Summary**

Number of Targets	Number of Indicators
13	28

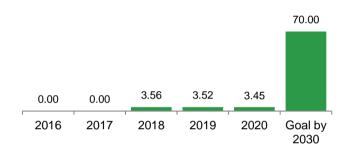
Indicator Status	
Available	27
Unavailable	1
NA	0
Related to Organizations' Account	0
Total	28

# SDG 3: Ensure healthy lives and promote well-being for all at all ages

Target 3.1: By 2030, reduce the global maternal mortality ratio to less than 70 per 100.000 live births

#### 3-1-1 Maternal mortality ratio.

Figure (3.1): Maternal mortality ratio per 100,000 live births (2016-2020)

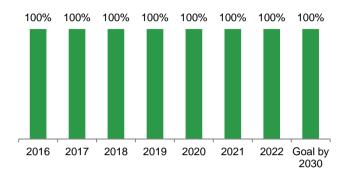


Maternal mortality ratio per 100,000 live births by mother's Table (3.1) nationality, (2016-2020) Goal by **Nationality** 2019 2016 2017 2018 2020 2030 Qataris 0.0 0.0 0.0 0.0 0.0 70.0 Non-Qataris 4.93 4.78 0.0 0.0 4.56 70.0 Total 0.0 0.0 3.56 3.52 3.45 70.0

Source: Ministry of Public Health and PSA calculations, Births and Deaths Bulletin.

#### 3-1-2 Proportion of births attended by skilled health personnel.

Figure (3.2): Proportion of births attended by skilled health personnel (2016-2022)



Target 3.2: By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births

#### 3-2-1 Under-five mortality rate

Figure (3.3): Infant mortality rate (deaths per 1,000 live births) (2016-2021)

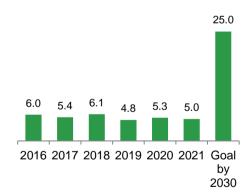
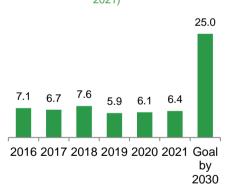


Figure (3.4): Under-five mortality rate (deaths per 1,000 live births) (2016-2021)



(a) Newborn mortality rate (less than 12 months) (per 1,000 live births) by Table (3.2)

nationality and sex
(b) Under-five mortality rate (per 1,000 live births) by nationality and sex (2016-

Sub- indicator	Nationality	Sex	2016	2017	2018	2019	2020	2021	Goal by 2030
		Males	7	7.1	6.3	4.5	6.2	7.9	25.0
	Qataris	Females	6.4	3.9	7.8	3.0	4.8	5.1	25.0
(a) Newborn		Total	6.7	5.5	7.0	3.7	5.6	6.5	25.0
mortality rate (less		Males	5.6	5.3	5.7	4.6	5.4	4.5	25.0
than 12	Non-Qataris	Females	5.8	5.4	5.9	5.8	5.0	4.2	25.0
months) per 1,000 live		Total	5.7	5.4	5.8	5.2	5.2	4.4	25.0
births		Males	6.0	5.8	5.9	4.6	5.6	5.5	25.0
	Total	Females	6.0	5.0	6.4	5.1	4.9	4.5	25.0
		Total	6.0	5.4	6.1	4.8	5.3	5.0	25.0
	Qataris	Males	7.5	8.3	8.4	5.8	7.0	10.1	25.0
		Females	6.9	5.2	7.8	3.8	5.1	6.1	25.0
(b) under 5		Total	7.2	6.8	8.1	4.8	6.1	8.2	25.0
years		Males	7.1	6.8	7.5	5.7	6.6	5.8	25.0
mortality rate per	Non-Qataris	Females	7.0	6.5	7.3	7.0	5.5	5.6	25.0
1,000 live		Total	7.0	6.6	7.4	6.3	6.1	5.7	25.0
births		Males	7.2	7.2	7.8	5.7	6.7	7.1	25.0
	Total	Females	7.0	6.1	7.4	6.1	5.4	5.7	25.0
		Total	7.1	6.7	7.6	5.9	6.1	6.4	25.0
Gender Parity than 12 month	Index for newborns)	1.00	0.86	1.08	1.11	0.88	0.82	1.00	
Gender Parity years of age	Index for children	under 5	0.97	0.85	0.95	1.07	0.81	0.80	1.00

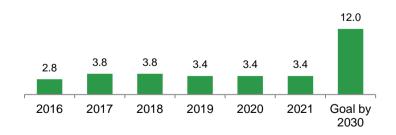
Source: Ministry of Public Health and PSA calculations, Births and Deaths Bulletin.

(c) Number of newborn deaths (less than 12 months) by nationality and sex
(d) Number of under 5 years deaths by nationality and sex 2016 - 2021)

Sub- indicator	Nationality	Sex	2016	2017	2018	2019	2020	2021
	•	Males	28	29	25	17	22	32
	Qataris	Females	25	15	30	11	17	19
		Total	53	44	55	28	39	51
(c) Number of newborn deaths (less		Males	54	54	58	50	61	43
	Non-Qataris	Females	54	53	59	59	53	38
than 12 months)		Total	108	107	117	109	114	81
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Total	Males	82	83	83	67	83	75
		Females	79	68	89	70	70	57
		Total	161	151	172	137	153	132
		Males	30	34	33	22	25	41
	Qataris	Females	27	20	30	14	18	23
		Total	57	54	63	36	43	64
(d) Number of		Males	68	69	77	61	74	55
under 5 years	Non-Qataris	Females	65	63	73	71	59	50
deaths		Total	133	132	150	132	133	105
		Males	98	103	110	83	99	96
	Total	Females	92	83	103	85	77	73
		Total	190	186	213	168	176	169

Source: Ministry of Public Health and Planning and Statistics Authority, Births and Deaths Bulletin

Figure (3.5): Neonatal mortality rate (deaths per 1,000 live births) (2016-2020)



#### 3-2-2 Neonatal mortality rate

(a) Neonatal mortality rate (0-28 days) (per 1,000 live births) by nationality and sex of the newborn (b) Number of neonatal deaths (0-28 days) by nationality and sex (2016-2021)

Sub- indicator	Nationality	Sex	2016	2017	2018	2019	2020	2021	Goal by 2030
		Males	4.0	5.9	4.5	3.7	4.5	6.2	12.0
	Qataris	Females	3.8	2.6	3.8	1.9	4.3	4.0	12.0
(a) Neonatal		Total	3.9	4.3	4.2	2.8	4.4	5.1	12.0
mortality		Males	2.6	3.8	3.5	3.3	2.8	3.1	12.0
rate ( 0-28 days) (per	Non-Qataris	Females	3.1	3.5	3.8	3.9	3.4	2.7	12.0
1,000 live		Total	2.8	3.7	3.6	3.6	3.1	2.9	12.0
births)	Total	Males	2.6	4.4	3.8	3.4	3.2	4.0	12.0
		Females	3.1	3.2	3.8	3.4	3.6	3.1	12.0
		Total	2.8	3.8	3.8	3.4	3.4	3.6	12.0
		Males	16	24	18	14	16	25	-
	Qataris	Females	15	10	15	7	15	15	-
		Total	31	34	33	21	31	40	-
(b) Number		Males	25	39	36	36	31	30	-
of neonatal deaths (0-28	Non-Qataris	Females	28	34	38	40	36	24	-
days)		Total	53	73	74	76	67	54	-
		Males	41	63	54	50	47	55	-
	Total	Females	43	44	53	47	51	39	-
		Total	84	107	107	97	98	94	-

Source: Ministry of Public Health and PSA calculations, Births and Deaths Bulletin

# Target 3.3 :By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases

### 3-3-1 Number of new HIV infections per 1,000 uninfected population by sex, age and key populations

Table (3.5) Number of new HIV infections per 1,000 uninfected population by nationality, sex and age group (2016-2021)

Descriptio	n	2016	2017	2018	2019	2020	2021	Goal by 2030
	Males	0.01	0.01	0.02	0.02	0.00	0.00	0.0
Sex	Females	0.00	0.00	0.01	0.01	0.03	0.04	0.0
	Total	0.01	0.01	0.01	0.02	0.07	0.10	0.0
Notionality	Qatari	0.02	0.03	0.05	0.05			0.0
Nationality	Non-Qataris	0.01	0.01	0.01	0.02			0.0
	Under 15 years	0.00	0.00	(-)	0.00			0.0
Age Group	15-24 years	0.01	0.00	0.01	0.01			0.0
_	25 years and above	0.01	0.01	0.02	0.02			0.0
Gender Parit	Gender Parity Index		0.00	0.50	0.50			1.00

...: Unavailable

Source: Ministry of Public Health and PSA calculations

#### 3.3.2 Tuberculosis incidence per 100,000 population

Figure (3.6): Tuberculosis incidence per 100,000 population (2016-2021)

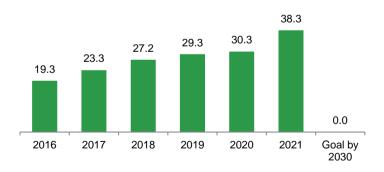


Table (3.6) Tuberculosis incidence per 100,000 population by nationality, sex and age group (2016-2021)

Description		2016	2017	2018	2019	2020	2021	Goal by 2030
	Males	21.2	23.6	27.2	31.8			0.0
Sex	Females	13.7	22.4	27.2	22.3	•••		0.0
To	Total	19.3	23.3	27.2	29.3	30.3	38.3	0.0
	Qatari		7	3.6	7	4.9	8.2	0.0
Nationality	Non-Qataris		25.3	30.2	32.1	33.6	42.4	0.0
	Under 15 years	1.7	0	0.8	0			0.0
Age group	15–24 years	23.1	30.2	35.2	30.3			0.0
	25 years and above	21.9	26.4	30.9	34.8			0.0
Gender Parity Index		0.21	0.31	0.35	0.25			

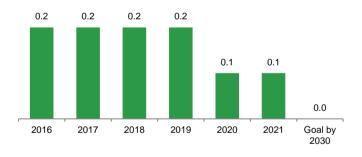
...: Unavailable

Note: Data has changed from source

Source: Ministry of Public Health and PSA calculations

#### 3.3.3 Malaria incidence per 1,000 population

Figure (3.7): Malaria incidence per 1,000 population (2016-2021)



Malaria incidence per 1,000 population by nationality, sex and Table (3.7) age group (2016-2021) Goal **Description** 2016 2017 2018 2019 2020 2021 by 2030 Males 0.2 0.1 0.1 0.1 0.0 0.0 0.0 Sex Females 0.1 0.2 0.2 0.2 0.1 0.1 0.0 Total 0.2 0.2 0.2 0.1 0.2 0.1 0.0 Qatari 0.0 0.0 0.0 0.0 0.0 0.0 0.0 Nationality Non-Qataris 0.2 0.18 0.19 0.17 0.06 0.10 0.0 Under 15 0.0 0.1 0.1 0.0 0.0 0.0 0.0 years 15-24 0.3 0.2 0.3 0.3 0.1 0.1 0.0 Age Group years 25 years 0.2 0.2 0.2 0.2 0.1 0.1 0.0 and above

Source: Ministry of Public Health and PSA calculations

0.50

Gender Parity Index

#### 3.3.4 Hepatitis B incidences per 100,000 population

Figure (3.8): Hepatitis B incidence per 100,000 population (2016-2019)

0.13

0.16

0.25

0.18

0.15

1.00

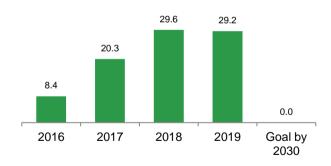


Table (3.8) Hepatitis B incidence per 100,000 population by nationality, sex and age group (2016-2019)

Charac	cteristics	2016	2017	2018	2019	Goal by 2030
	Males	7.7	20.3	27.3	30.3	0.0
Sex	Females	10.6	20.3	33.3	26.0	0.0
	Total	8.4	20.3	29.6	29.2	0.0
No. of the	Qataris	2.4	11.0	19.1	30.1	0.0
Nationality	Non-Qataris	9.2	21.5	29.2	30.1	0.0
	Under 15 years	0.0	1.3	1.8	1.5	0.0
Age Group	15-24 years	7.7	15.1	15.4	25.9	0.0
	25 years and above	10.2	24.9	35.2	35.6	0.0
Gender Parity Index		1.38	1.00	1.22	0.86	1.00

Source: Ministry of Public Health and PSA calculations

### 3-3-5 Number of people requiring interventions against neglected tropical diseases

Figure (3.9): Number of people requiring interventions against neglected tropical diseases (2016-2021)

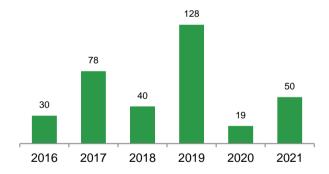


Table (3.9) Number of people requiring interventions against neglected tropical diseases by nationality, sex and age group (2016-2021)

Characteristics		2016	2017	2018	2019	2020	2021	Goal by 2030
	Males	28	68	34	95	16		0
Sex	Females	2	10	6	33	3		0
	Total	30	78	40	128	19	50	0
Nationality	Qataris	1	1	0	1	0		0
ivalionality	Non-Qataris	29	77	40	127	19		0
	Under 15 years	0	8	1		2		0
Age Group	15 – 24 years	10	13	4		0		0
	25 years and above	20	57	35		3		0
Gender Parity Index		0.07	0.15	0.18	0.35	0.19		1.00

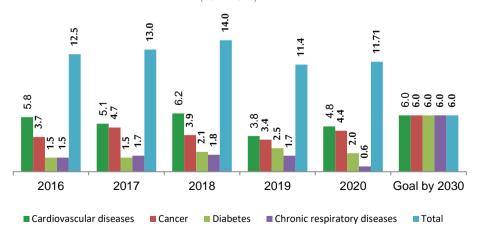
...: Unavailable

Source: Ministry of Public Health

Target 3.4: By 2030, reduce by one third premature mortality from noncommunicable diseases through prevention and treatment and promote mental health and well-being

### 3-4-1 Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory diseases

Figure (3.10): Mortality rate of Qataris due to cardiovascular diseases, cancer, diabetes mellitus and chronic respiratory diseases (probability, in percentage) (2016-2020)



(a) Qatari mortality rate, due to cardiovascular diseases, cancer, diabetes and chronic respiratory diseases (the risk of death converted to %) between the ages of 30 and 70 years, by sex and disease (b) Number of deaths of Qataris from cardiovascular diseases, cancer, diabetes and chronic respiratory diseases between the ages of 30 and 70 years by sex and disease (2016-2020)

Sub- indicator	Disease	Sex	2016	2017	2018	2019	2020
		Males	8.6	6.9	8.2	6	7.68
	Cardiovascular diseases	Females	3.21	3.5	4.4	1.9	2.37
	aioodooo	Total	5.8	5.1	6.2	3.8	4.82
(a) Oatari		Males	4.2	4.4	4.6	3.8	4.13
(a) Qatari mortality rate	Cancer	Females	3.21	5	3.4	3.1	4.5
due to		Total	3.7	4.7	3.9	3.4	4.36
selected diseases (risk of death		Males	2.2	2.5	3.6	2.3	2.8
,	Diabetes	Females	1	0.7	0.9	2.7	1.26
converted to		Total	1.5	1.5	2.1	2.5	1.97
%) for the age	Chronic	Males	1.8	1.7	2	1.6	0.7
group (30-70)	respiratory	Females	1.2	1.2	1.6	0.7	0.51
	diseases	Total	1.5	1.7	1.8	1.7	0.56
	Total	Males	16.8	15.5	18.4	13.7	15.31
		Females	8.6	10.4	10.3	8.4	8.64
		Total	12.5	13	14	11.4	11.71
	Cardiovascular diseases	Males	59	55	70	49	67
		Females	23	55	39	18	22
	alcoacco	Total	82	110	109	67	89
		Males	29	13	40	34	9
	Cancer	Females	25	4	35	27	4
(b) Number of		Total	54	17	75	61	13
deaths of Qataris due to		Males	11	19	21	17	22
selected	Diabetes	Females	6	3	6	22	12
diseases for the age group		Total	17	22	27	39	34
(30-70)	Chronic	Males	14	32	16	15	34
	respiratory	Females	9	38	13	4	49
	diseases	Total	23	70	29	19	83
		Males	113	119	147	115	132
	Total	Females	63	100	93	71	87
		Total	176	219	240	186	219
Gender Parity In	ndex		0.56	0.84	0.63	0.62	0.66

Source: Ministry of Public Health and PSA calculations

#### 3-4-2 Suicide mortality rate

Figure (3.11): Suicide mortality rate per 100,000 population by sex (2016-2021)

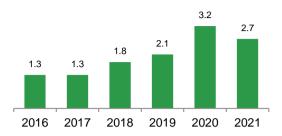


Figure (3.12): Number of suicides by properties (2020 and 2022)

Figure (3.13): Number of suicides by properties (2020 and 2021)

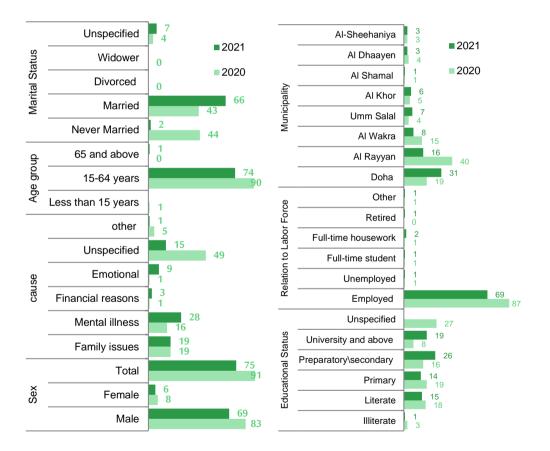


Table (3.11)	(a) Suicio (b) Numb	de mortality rate (p per of suicide deatl	er 100,00 hs by cha	00 people aracteris	e) by cha tics (2016	racteristi 6-2021)	cs	
Sub-indicator	Sex	Characteristics	2016	2017	2018	2019	2020	2021
(a) Suicide	Males		1.6	1.6	2.3	2.6	4.1	3.5
mortality rate per 100,000	Females		0.3	0.4	0.1	1.0	1.0	0.8
population by sex	Total		1.3	1.3	1.8	2.1	3.2	2.7
Gender Parity Index			0.19	0.27	0.06	0.37	0.24	0.22
(b) Number of	Males		32	33	48	53	83	69
suicide deaths by	Females		2	3	1	7	8	6
sex	Total		34	36	49	60	91	75
		Family issues	7	8	10	3	16	18
		Mental illness	3	4	1	3	15	24
	Males	Financial reasons	1	1	5	4	1	3
		Emotional	0	1	3	0	1	9
		Not specified	21	19	27	40	45	14
		Other	0	0	2	3	5	1
		Family issues	0	0	0	2	3	1
Number of deaths	Females	Mental illness	0	0	1	1	1	4
resulting from		Financial reasons	0	0	0	1	0	0
suicide by sex and cause of suicide		Emotional	0	1	0	0	0	0
Total		Not specified	1	2	0	1	4	1
		Other	1	0	0	2	0	0
		Family issues	7	8	10	5	19	19
		Mental illness	3	4	2	4	16	28
		Financial reasons	1	1	5	5	1	3
	Total	Emotional	0	2	3	0	1	9
		Not specified	22	21	27	41	49	15
		Other	1	0	2	5	5	1
		Less than 15 years	0	0	0	0	1	0
	Males	15 – 64	32	33	48	53	82	68
		65+	0	0	0	0	0	1
Number of deaths		Less than 15 years	0	0	0	1	0	0
due to suicide by	Females	16 – 64	2	3	1	6	8	6
sex and age group		65+	0	0	0	0	0	0
•		Less than 15 years	0	0	0	1	1	0
	Total	15 – 64	34	36	49	59	90	74
		65+	0	0	0	0	0	1
		Never been married	12	16	20	24	42	2
Number of deaths due to suicide by		Married	20	17	28	29	38	60
sex and marital	Males	Divorced	0	0	0	0	0	0
status		Widowed  Not Specified	0	0	0	0	3	7
		Not opecified	U	U	U	U	3	1

Table (3.11)

(a) Suicide mortality rate (per 100,000 people) by characteristics (b) Number of suicide deaths by characteristics (2016-2021)

Sub-indicator	Sex	Characteristics	2016	2017	2018	2019	2020	2021
	Females	Never been married	1	2	1	2	2	0
		Married	1	1	0	5	5	6
		Divorced	0	0	0	0	0	0
		Widow	0	0	0	0	0	0
		Not Specified	0	0	0	0	1	0
	Total	Never been married	13	18	21	26	44	2
		Married	21	18	28	34	43	66
		Divorced	0	0	0	0	0	0
		Widow	0	0	0	0	0	0
		Not Specified	0	0	0	0	4	7
		Illiterate	2	0	3	2	3	1
	Males	Literate	0	0	0	0	18	15
	iviales	Primary	7	2	6	6	19	14
		Preparatory and secondary	10	9	15	17	14	24
		University and above	10	13	13	12	8	15
		Not Specified	3	9	11	16	21	0
	Females	Illiterate	0	0	0	0	0	0
		Literate	0	0	0	0	0	0
Number of deaths due to suicide by		Primary	0	0	0	1	0	0
sex and educational status		Preparatory and secondary	2	2	1	3	2	2
cadoational status		University and above	0	0	0	1	0	4
		Not Specified	0	1	0	2	6	0
		Illiterate	2	0	3	2	3	1
		Literate	0	0	0	0	18	15
	Total	Primary	7	2	6	7	19	14
	. 010.	Preparatory and secondary	12	11	16	20	16	26
		University and above	10	13	13	13	8	19
		Not Specified	3	10	11	18	27	0
		Employed	32	33	48	53	80	66
		Unemployed	0	0	0	0	1	1
		Full-time student	0	0	0	0	1	1
	Males	Full-time housework	0	0	0	0	0	0
Nicosalo a constituido de la contra		Retired	0	0	0	0	0	1
Number of deaths due to suicide by		Other	0	0	0	0	1	0
sex and relation to		Employed	2	3	1	6	7	3
labor force		Unemployed	0	0	0	0	0	0
		Full-time student	0	0	0	1	0	0
	Females	Full-time housework	0	0	0	0	1	2
		Retired	0	0	0	0	0	0
		Other	0	0	0	0	0	1
(16)								

Table (3.11) (a) Suicide mortality rate (per 100,000 people) by characteristics (b) Number of suicide deaths by characteristics (2016-2021)

	(3) 1101111	of turnor of survive deaths by strategic follow (2010 2021)								
Sub-indicator	Sex	Characteristics	2016	2017	2018	2019	2020	2021		
		Employed	34	36	49	59	87	69		
		Unemployed	0	0	0	0	1	1		
	Total	Full-time student	0	0	0	1	1	1		
	Total	Full-time housework	0	0	0	0	1	2		
		Retired	0	0	0	0	0	1		
		Other	0	0	0	0	1	1		
		Doha	4	5	8	18	14	27		
		Al Rayyan	3	8	18	20	38	15		
		Al Wakrah	5	8	3	8	14	8		
	Males	Umm Salal	4	0	3	1	4	7		
	iviales	Al Khor	2	2	3	2	5	5		
		Al Shamal	7	5	9	0	1	1		
		Al Dhaayen	4	0	0	2	4	3		
		Al Shihaniya	3	5	4	2	3	3		
		Doha	1	3	1	5	5	4		
		Al Rayyan	0	0	0	1	2	1		
Nicosia and death a		Al Wakrah	1	0	0	0	1	0		
Number of deaths due to suicide by		Umm Salal	0	0	0	0	0	0		
sex and	Females	Al Khor	0	0	0	0	0	1		
municipality		Al Shamal	0	0	0	0	0	0		
		Al Dhaayen	0	0	0	1	0	0		
		Al Shihaniya	0	0	0	0	0	0		
		Doha	5	8	9	23	19	31		
		Al Rayyan	3	8	18	21	40	16		
		Al Wakrah	6	8	3	8	15	8		
		Umm Salal	4	0	3	1	4	7		
	Total	Al Khor	2	2	3	2	5	6		
		Al Shamal	7	5	9	0	1	1		
		Al Dhaayen	4	0	0	3	4	3		
		Al Shihaniya	3	5	4	2	3	3		
	<i></i>	<del>-</del>			•					

Source: Ministry of Interior and PSA calculations

### Target 3.5: Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol

3.5.1 Coverage of treatment interventions (pharmacological, psychosocial and rehabilitation and aftercare services) for substance use disorders.

**Coverage of treatment interventions for substance use disorders** Table (3.12) (2016-2022)Goal by 2020 2022 **Health Services** 2016 2017 2018 2019 2021 2030 Pharmaceutical 100% 100% 100% 100% 100% 100% 100% 100% Services Psychological 100% %100 100% 100% 100% 100% 100% 100% Services Rehabilitation and 100% 100% 100% 100% 100% 100% 100% 100% aftercare services Total 100% 100% %100 100% 100% 100% 100% 100%

Source: Ministry of Public Health

### 3.5.2 Alcohol per capita consumption (aged 15 years and older) within a calendar year in litres of pure alcohol

Table (3.13)		Alcohol per capita consumption (aged 15 years and older) in litres of pure alcohol by sex (liters per capita) (2016-2022)								
Sex	2016	2017	2018	2019	2020	2021	2022	Goal by 2030		
Males	0.0	0.0	0.0	0.0	0.0	0.0	0.0	Reduce		
Females	0.0	0.0	0.0	0.0	0.0	0.0	0.0	Reduce		
Total	0.0	0.0	0.0	0.0	0.0	0.0	0.0	Reduce		
Gender Parity Index	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.00		

Source: PSA estimates

### Target 3.6: By 2020, halve the number of global deaths and injuries from road traffic accidents

#### 3-6-1 Death rates due to road traffic injuries

Figure (3.14): Death rate due to road traffic injuries per 100,000 people (2016 -2020)

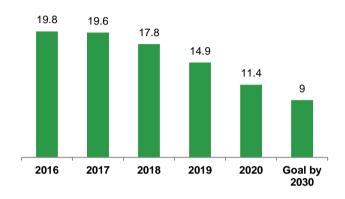


Table (3.14)

(a) Death rate due to road traffic injuries per 100,000 population, by nationality, sex and age group

(b) Number of road traffic injuries by nationality, sex and age group (2016-2020)

Sub-indicator	Nationality	Characteristics	2016	2017	2018	2019	2020
		Males	36.0	37.1	33.0	29.0	20.8
	Qataris	Females	4.0	2.6	3.2	1.2	2.4
		Total	19.8	19.6	17.8	14.9	11.4
		Males	8.7	7.6	7.0	5.8	6
(a) Death rate	Non-Qataris	Females	1.2	1.3	1.3	2.1	1.2
due to road		Total	7.1	6.3	5.7	4.9	4.8
traffic injuries per 100,000		Males	10.7	9.8	8.9	7.5	7.2
population	Total	Females	1.9	1.6	1.7	1.9	1.5
		Total	8.5	7.7	7.1	6.0	5.5
		Under 15 years	3.4	2.4	2.9	3.3	2.5
	Total by age groups	15–24 years	16.2	12.5	16.9	12.2	10.3
	groupo	25 years and above	8.0	7.8	6.2	5.6	5.5
		Males	52	55	50	45	16
	Qataris	Females	6	4	5	2	10
(b) Number of road traffic		Total	58	59	55	47	26
injuries		Males	159	145	133	110	112
	Non-Qataris	Females	6	7	7	12	8
		Total	165	152	138	122	120

Table (3.14)

(a) Death rate due to road traffic injuries per 100,000 population, by nationality, sex and age group

(b) Number of road traffic injuries by nationality, sex and age group (2016-2020)

Sub-indicator	Nationality	Characteristics	2016	2017	2018	2019	2020
		Males	211	200	183	155	128
	Total	Females	12	11	12	14	18
		Total	223	211	195	169	146
		Under 15 years	26	32	41	29	24
	Total by age group	15–24 years	59	47	59	41	30
			151	155	125	115	115
Gender Parity Inde	0.18	0.16	0.196	0.25	0.21		

Source: Ministry of Public Health and PSA calculations, Births and Deaths Bulletin.

Target 3.7: By 2030, ensure universal access to sexual and reproductive healthcare services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes

### 3-7-1 Proportion of women of reproductive age (15-49 years) who have their need for family planning satisfied with modern methods

Table (3.15)

Proportion of women of reproductive age (15-49 years) who have their need for family planning satisfied with modern methods by nationality, age group, educational status and contraception used (2012/2013)

		Percenta	ge of contracepti	ve use	Proportion of	
Charact	teristics	Spacing	Childbearing Reduction	Total	need satisfied for contraceptives	
Nationality	Qataris	22.9	17.2	40.0	75.0	
Nationality	Non-Qataris	19.4	18.3	37.4	75.6	
	15-24	23	2.9	25.9	60.4	
	25-29	28.2	9.0	36.9	69.2	
Ago Croup	30-34	28.8	14.9	43.3	75.0	
Age Group	35-39	18.8	21.2	40.1	75.6	
	40-44	12.3	31.3	42.9	84.7	
	45-49	4.3	23.1	27.4	86.2	

Table (3.15)

Proportion of women of reproductive age (15-49 years) who have their need for family planning satisfied with modern methods by nationality, age group, educational status and contraception used (2012/2013)

	Characteristics		ge of contracepti	Proportion of	
Characteristics		Spacing	Childbearing Reduction	Total	need satisfied for contraceptives
	Illiterate	15.2	12.3	27.5	70.1
	Primary	11.6	22.1	33.8	75.8
Educational Status	Preparatory	14.1	19.6	33.7	72.3
Claras	Secondary	20.8	18.1	38.7	75.0
	University and above	21.3	18.0	39.0	76.1
Total		20.3	18.0	38.0	75.4

Source: Multi-indicator Cluster Survey, Planning and Statistics Authority

### 3-7-2 Adolescent birth rate (aged 10-14 years; aged 15-19 years) per 1,000 women in that age group

Figure (3.15): Adolescent birth rate per 1,000 women (2016-2020)

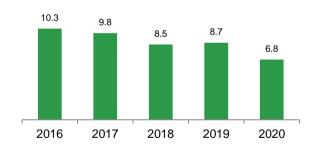


Table (3.16)	Adolescent birth rate (aged 10-14 years; aged 15-19 years) per 1,000 women by nationality and age group (2016-2020)										
Nationality	Age Group	2016	2017	2018	2019	2020	Goal by 2030				
Qataris	10-14 years	0.0	0.0	0.0	0.0	0	0.0				
Qalaiis	15-19 years	5.7	4.9	3.4	2.8	2.6	0.0				
Non-Qataris	10-14 years	0.0	0.0	0.0	0.0	0	0.0				
11011 Quitaris	15-19 years	13.4	13.0	11.8	12.5	9	0.0				
Total	10-14 years	0.0	0.0	0.0	0.0	0	0.0				
Total	15-19 years	10.3	9.8	8.5	8.7	6.8	0.0				

Source: Ministry of Public Health, PSA calculations and Births and Deaths Bulletin.

Target 3.8: Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all

#### 3.8.1 Coverage of essential health services

Table (3.17) Proportion of target population covered by essential health services (2016-2021)

Essential	Essential Health Services		2016	2017	2018	2019	2020	2021
1. Family planning	Satisfied demand for FP (%)	74.5%*						
2.Pregnancy and childbirth care	Women between 15 and 49 years of age who have a live birth and received antenatal care four or more times (%)	84.5%*						
3. Immunization of children	Less than a year who have received a triple vaccine (PDT3)	92.7%	98.2 %	97.1 %	98.00 %	98.0 %	89.0 %	98.0 %
4. Pediatric treatment	Children under 5 years of age suspected of having pneumonia in the two weeks preceding the survey and were transferred to a health facility. (%)							
5. Tuberculosis	TB cases successfully counted and treatedβ (%)	69**						
treatment	Tuberculosis prevalence per 100,000 population		19.3	23.3	27.2	29.3	30.3	38.3
6. HIV	Percentage (%) of infected people currently receiving antiretroviral treatment							
	Number of new HIV infections per 1,000 uninfected population		0.01	0.01	0.01	0.02	0.07	0.10
7. Malaria	Percentage (%) of population in endemic areas who sleep under a mosquito net	NA	NA	NA	NA	NA	NA	NA
8. Water and sanitation	Percentage (%) of households who use improved sanitation facilities	100%	100%	100%	100%	100%	100%	100%
9. Hypertension	Age-specific rate of non- high blood pressure (systolic blood pressure less than 140 mm Hg or diastolic blood pressure less than 90 mm Hg) among adults aged 18 years and older)							
10. Diabetes	Prevalence of diabetes for those aged 25 years and older							
11. Tobacco control	Standard prevalence rate for those aged 15 years and older (who have not smoked tobacco in the last 30 days).	80.6%**						

Table (3.17) Proportion of target population covered by essential health services (2016-2021)

Essential	Health Services	Value	2016	2017	2018	2019	2020	2021
12. Hospitalization	Per capita household with a maximum threshold of 18 per 10,000 population	75.8	56.1	52	57.5	62.2		
	Physician	2.5	2.7	2.4	2.5	2.7	2.7	3.0
	Psychiatrist							
13. Health	Surgeon							
sector labor force per 1,000	Dentist	0.6	0.8	0.6	0.6	0.7	0.7	0.8
population	Nurse	5.8	6.5	6.6	7.5	8.1	7.7	8.6
	Pharmacist	1.0	1.1	0.8	0.9	1	1	1.2
	Worker in allied health professions	2.3	3.4	3.1	3.1	3.3	3.3	3.8
	C1—Legislation and Funding		100	100	87	93	93	70
	C2—IHR coordination functions and national entities involved		100	100	80	100	100	87
	C3—Events of animal origin and human-animal interaction		80	75	100	100	100	100
	C4—Food Safety		84	82	100	100	80	100
	C5—Laboratories		92	100	100	100	100	100
	C6—Monitoring		57	57	100	100	100	100
	C7—Human Resources		81		100	100	80	100
14. Health Security	C8—National Medical Emergency Framework		66	96	100	100	80	100
- Coounty	C9—Medical Service Delivery		75	61	100	100	100	100
	C10—Risk Communication		73	100	80	100	100	100
	C11—Entry Points		56	73	50	80	80	87
	C12 —Chemical Events		46	46	60	80	80	80
	C13—Radiation Emergency	•••	95	97	80	100	100	100
	Total		1005	987	1137	1253	1193	1224
	Average IHR implementation capacity and preparedness for health emergencies	83	76	76	87	96	92	94

<sup>\*:</sup> Planning and Statistics Authority - Multi-indicator Cluster Survey 2012

Source: Ministry of Public Health – Public Works Authority

<sup>\*\*:</sup> Ministry of Public Health 2015

<sup>:</sup> Ministry of Public Health 2012

<sup>...:</sup> Unavailable.

### 3.8.2 Proportion of population with large household expenditures on health as a share of total household expenditure or income

Table (3.18)

Proportion of population with large household expenditures on health as a share of total household expenditure or income (2017/2018)

Sub-indicator

2017/2018

(a) Proportion of population with large household expenditure on health (more than 10%) as a share of total household expenditure or income

(b) Proportion of population with large household expenditures on health (more than 25%) as a share

0.1

Source: PSA calculations – Household Expenditure and Income Survey

Target 3.9: By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination

#### 3-9-1 Mortality rate attributed to household and ambient air pollution

Data is not available for this indicator

of total household expenditure or income

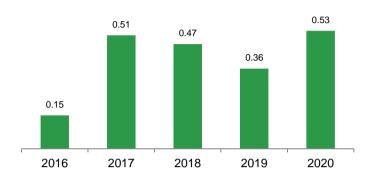
3-9-2 Mortality rate attributed to unsafe water, unsafe sanitation and lack of hygiene (exposure to unsafe Water, Sanitation and Hygiene for All (WASH) services)

Table (3.19)	-	Mortality rate attributable to unsafe water, unsafe sanitation and lack of hygiene per 100,000 population by cause of death (2016–2022)								
Cause of Death	2016	2017	2018	2019	2020	2021	2022			
Unsafe water	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Unsafe sanitation	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Lack of hygiene	0.0	0.0	0.0	0.0	0.0	0.0	0.0			
Total	0.0	0.0	0.0	0.0	0.0	0.0	0.0			

Source: Ministry of Public Health

#### 3-9-3 Mortality rate attributed to unintentional poisoning

Figure (3.16): Mortality rate attributed to unintentional poisoning per 100,000 population (2016-2020)



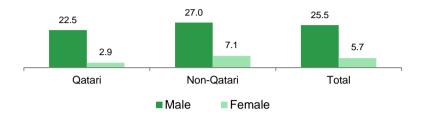
Mortality rate attributed to unintentional poisoning per 100,000 population **Table (3.20)** by nationality, sex and age group (2016-2020) Goal 2016 Characteristics **Nationality** 2017 2018 2019 2020 by 2030 Males 1.38 0.67 0.66 0.64 1.26 Reduce **Qataris Females** 0.0 0.65 0.0 0.0 Reduce Total 0.68 0.66 0.32 0.32 0.62 Reduce Males 0.05 0.47 0.53 0.31 0.27 Reduce Non-Qataris **Females** 0.20 0.36 Reduce 0.57 0.52 1.09 Total 0.09 0.50 0.49 Reduce 0.36 0.48 Males 0.15 0.49 0.54 0.34 0.35 Reduce Total Females 0.59 0.16 0.28 0.41 0.99 Reduce Total 0.15 0.51 0.47 0.36 0.53 Reduce Under 15 years 0.00 0.27 0.26 0.0 0 Reduce Age Group 15-24 years 0.28 0.27 0.29 0.3 0 Reduce 25 years and above 0.16 0.61 0.54 0.44 0.72 Reduce Gender Parity Index 1.07 1.20 0.52 1.21 2.83 1.00

Source: Ministry of Public Health – PSA calculations, Birth and Death Bulletin.

### Target 3.a: Strengthen the implementation of the WHO Framework Convention on Tobacco Control in all countries, as appropriate

### 3.a.1 Age-standardized prevalence of current tobacco use among persons aged 15 years and older

Figure (3.17): Age-standardized prevalence of current tobacco use among persons aged 15 years and above by sex and nationality (2012)



Age-standardized prevalence of current tobacco use among persons aged 15 years and older by nationality, sex and age group (2012-2013)

Character	istics	Age Group	Unit	2012	2013
	Males	3	Ratio	22.5	
Qataris	Females	-	Ratio	2.9	
Qalans	Total	-		·	10.5
		-	Ratio		10.5
	Males	15 years and	Ratio	27	•••
Non-Qataris	Females	- above	Ratio	7.1	•••
	Total	7	Ratio		12.9
	Males	7	Ratio	25.5	20.2
Total	Females	-	Ratio	5.7	3.1
	Total		Ratio	•••	12.1
		15 - 19	Ratio	8.1	
		20 - 24	Ratio	16.1	
		25 - 29	Ratio	29.6	
	Males	30 - 34	Ratio	29.4	
		35 - 39	Ratio	28.7	
		40 - 44	Ratio	30.4	
Ago Group		45 - 49	Ratio	28.2	
Age Group		15 – 19	Ratio	2.1	
		20 – 24	Ratio	3.4	
		25 – 29	Ratio	4.4	
	Females	30 – 34	Ratio	6.0	
		35 – 39	Ratio	7.4	
		40 – 44	Ratio	6.3	
		45 - 49	Ratio	7.0	
Gender Parity Index	for Qataris	0.13			
Gender Parity Index	for non-Qataris			0.26	

Source: Ministry of Public Health and Multi-Indicator Cluster Survey, Planning and Statistics Authority

Target 3.b: Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use to the full the provisions in the Agreement on Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health, and, in particular, provide access to medicines for all.

### 3.b.1 Proportion of the target population covered by all vaccines included in their national programme



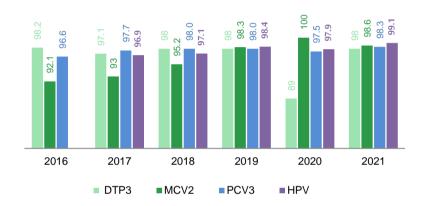


Table (3.22) Proportion of the target population covered by all vaccines included in their national programme (2016-2021)

Sub-indicator	2016	2017	2018	2019	2020	2021
(a) Proportion of target population receiving 3 doses of diphtheria, tetanus and pertussis (DTP3)	98.2	97.1	98.0	98.0	89.0	98.0
(b) Proportion of target population with access to affordable medicines and vaccines on a sustainable basis, human papillomavirus (HPV)		96.9	97.1	98.4	97.9	99.1
(c) Proportion of target population receiving the second dose of the measles-containing vaccine (MCV2)	92.1	93.0	95.2	98.3	100	98.6
(d) Proportion of target population who can receive the third dose of pneumococcus (PCV3)	96.6	97.7	98.0	98.0	97.5	98.3

...: Unavailable

Source: Ministry of Public Health

### 3.b.2 Total net official development assistance to medical research and basic health sectors

Table (3.23)	Value of development assistance for SDG 3 (2016-2020)								
Unit	2016	2017	2018	2019	2020				
QR	167,993,492	588,111,436	179,035,833	167,512,523	574,503,324				
US\$	46,152,058	161,569,076	49,185,668	46,019,924	157,830,584				

Source: Ministry of Foreign Affairs

### 3.b.3 Proportion of health facilities that have a core set of relevant essential medicines available and affordable on a sustainable basis

Table (3.24)	Proportion of health facilities that have a core set of relevant essential medicines available and affordable on a sustainable basis (2016-2022)							
Indicator	2016	2017	2018	2019	2020	2020	2021	
Proportion of health facilities that have a core set of relevant essential medicines available and affordable on a sustainable basis (%)	100%	100%	100%	100%	100%	100%	100%	

Source: Ministry of Public Health

Target 3.c: Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States

#### 3.c.1 Health worker density and distribution

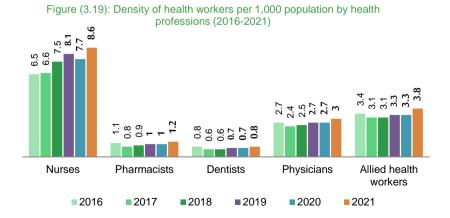


Table (3.25)	(a) Health worker per 1,000 population by health profession (2016-2021)							
Health Profession	2016	2017	2018	2019	2020	2021		
Nurse	6.5	6.6	7.5	8.1	7.7	8.6		
Pharmacist	1.1	0.8	0.9	1.0	1	1.2		
Dentist	0.8	0.6	0.6	0.7	0.7	0.8		
Physician	2.7	2.4	2.5	2.7	2.7	3		
Worker in allied health professions	3.4	3.1	3.1	3.3	3.3	3.8		

Source: Ministry of Public Health and PSA calculations, Annual Statistical Abstract (Chapter of Health Service Statistics).

Target 3.d: Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks

### 3.d.1 International Health Regulations (IHR) capacity and health emergency preparedness

Figure (3.20): Ability to implement IHR and readiness to face health emergencies (2016-2021)

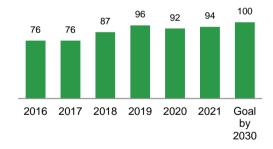
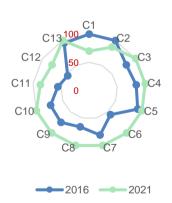


Figure (3.21): Web of ability to implement IHR and readiness to face health emergencies by sub-indicators (2016 and 2021)



(a) Average IHR capacity and health emergency preparedness
(b) IHR capacity by type of IHR (2016-2021)

Sub-indicator	2016	2017	2018	2019	2020	2021	Goal by 2030
C1 — Legislation and funding (%)	100	100	87	93	93	70	100
C2 — IHR coordination functions and national entities involved (%)	100	100	80	100	100	87	100
C3 — Events of animal-origin and human-animal interaction (%)	80	75	100	100	100	100	100
C4 — Food safety (%)	84	82	100	100	80	100	100
C5 — Laboratories (%)	92	100	100	100	100	100	100
C6 — Monitoring (%)	57	57	100	100	100	100	100
C7 —Human resources (%)	81		100	100	80	100	100
C8 —National medical emergency framework (%)	66	96	100	100	80	100	100
C9 —Medical service delivery (%)	75	61	100	100	100	100	100
C10 —Risk communication (%)	73	100	80	100	100	100	100
C11 —Entry points (%)	56	73	50	80	80	87	100
C12 —Chemical events (%)	46	46	60	80	80	80	100
C13 —Radiological emergency (%)	95	97	80	100	100	100	100
Total	1005	987	1137	1253	1193	1224	-
Average IHR implementation capacity and preparedness for health emergencies (%)	76	76	87	96	92	94	100

Source: Ministry of Public Health

#### 3.d.2 Percentage of bloodstream infections attributed to selected antimicrobials

45.8% 44.9% 44.9% 42.6% 41.4% 40.3% 34.5% 32.3% 32.0% 31.4% 29.3% 23.0% 2016 2017 2018 2019 2020 2021

Figure (3.21): Percentage of bloodstream infections due to selected antimicrobial-resistant organisms (2016-2021)

- (a) Percentage of bloodstream infections due to Escherichia coli resistant to thirdgeneration cephalosporins (eg, ESBL- Escherichia coli) among care-seeking patients for whom a blood sample was taken and tested
- (b) Percentage of bloodstream infections due to methicillin-resistant Staphylococcus aureus (MRSA) among care-seeking patients for whom a blood sample was taken and tested

Table (3.27)	Percentage of bloodstream infections attributed to selected antimicrobials (2016-2021)							
Sub-indicator	2016	2017	2018	2019	2020	2021		
(a) Percentage of bloodstream infection attributed to third-generation cephalosporin-resistant E. coli (e.g., ESBL-E. coli) among patients seeking care whose blood sample is taken and tested (%)	45.8%	44.9%	41.4%	44.9%	40.3%	42.6%		
(b) Percentage of bloodstream infection attributed to methicillinresistant Staphylococcus aureus (MRSA) among patients seeking care whose blood sample is taken and tested (%)	29.3%	23.0%	34.5%	32.3%	32.0%	31.4%		

Source: Ministry of Public Health