UNITED ARAB EMIRATES
MINISTRY OF HEALTH & PREVENTION

SUSTAINABLE
DEVELOPMENT
GOALS

MONITORING SDG3
IN UAE, 2022

Ministry of Health and Prevention,
Public Health Sector

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Forward

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The Sustainable Development Goals came as a major milestone in the global developmental agenda. SDGs aim to enable a decent life for all and at the same time preserve the natural basis of the planet for longer term. They address economical, ecological and social aspects and solutions to global challenges such as extreme poverty, environmental degradation as well as injustice and discrimination.

Because United Arab Emirates believes in the values of SDGs, it has been actively involved in the **SDGs agenda from the start in 2015**. Since then, the government of UAE has spared no effort to bring about current and future roadmaps that accelerated our steps toward achieving SDGs.

The wise direction of **H.H Mohammed bin Zayed Al Nahyan,** President of the United Arab Emirates and the leadership **H.H Shaikh Mohammed bin Rashid Al Maktoum**, the vice president, prime minister of the United Arab Emirates and the ruler of Dubai have had significant roles in calling for a whole- of-governmental approach to accomplish the SDGs, which will be discussed thoroughly in this report. As decision makers in the health sector, **HE Abdul Rahman Mohammed Al Oweis,** Minister of Health and Prevention, **HE Dr Mohammad Salim Al Olama,** Undersecretary for Health and myself would like to emphasize that we would not have been here without our country's governmental tremendous support and directions.

The main aim of this report is to fulfil documentation purposes, monitor UAE's progress in the health domain, address challenges for each target, and plan future actions according to the evidence-based approach.

The following report represents **the first official health SDGs report in UAE** that provides the reader with detailed information and guidance related to SDG3.

Dr. Hussain A.R. Al Rand
Undersecretary of Public Health Sector of Ministry of Health and Prevention

Ministry of Health and Prevention

This report represents the 1st report on health **Sustainable Development Goals (SDG3)** and its targets in the region. It includes analysis of the current situation, trends, progress, achievements, implemented interventions and the way forward.

This project has benefited from many publications, global international and national platforms including: WHO reports related to **Monitoring Health for SDGs (2016-2022),** reports of UAE National Committee of SDGs, The Official Portal of the UAE Government, and other national ministries.

We are thankful to **H.E Dr. Hussain Abdul Rahman Al Rand,** the Undersecretary of Public Health Sector, Ministry of Health and Prevention for his continuous support, guidance and supervision that were provided to us through the preparation of this report.

The Health SDGs Team is grateful for the tremendous support offered by the Directors and programme managers and other staff from the different departments of the Ministry. Without their contributions and valuable inputs this report could not have been published.

Health SDGs Team

Dr. Haifa H. N. Madi
Public Health Expert and Advisor

Mrs. Asma A.R. Al Obeidli
Technical Staff

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Why This Report?

This UAE SDGs health report introduces the phases of developing SDGs (from MDGs to SDGs), highlights the alignment between UAE's national agenda to the global agenda of SDGs, and integrates the SDGs within the work of Ministry of Health and Prevention.

By publishing this report, we are illustrating:

- MOHAP and other governmental ministries **effort** to accomplish SDGs related to health including:
    1. Policies
    2. Strategies
    3. National plans
    4. Programs and initiatives

- Trends in SDGs health indicators in UAE
- Challenges/ areas for improvements
- Recommendations and future actions

Health SDGs Highlights

- The negotiation process on the SDGs was first carried out in an Open Working Group of the UN General Assembly. United Arab Emirates took a seat representing the Asia Pacific and the Arab Groups. UAE has had a significant role as it contributed on issues such as energy, education, global partnership, health, water and women's empowerment.

- UAE has the lowest ratio of maternal mortality (per 100,000) in the Middle East with 3% according to Monitoring Health for SDGs 2022.

- Skill birth attendance proportion has been between 99-100% in the last for half a decade, which resulted in improving SDGs related indicator, such as: maternal mortality rate.

- UAE has the highest UHC (3.8) at 78% among countries of the Eastern Mediterranean Region

- UAE succeeded to maintain its rate to less than 0.1 to in target 3.9.2 that is related mortality rate attributed to exposure to unsafe WASH services (per 100 000 population) according to the report monitoring health SDGs published in 2022.

- UAE accomplished excellent result in achieving indicators related to 3.2 with rate of 7% for under-five mortality rate (per 1000 live births) and 4% for neonatal mortality rate(per 1000 live births) according to Monitoring Health for SDGs 2022.

Abbreviation List

AIDS	Acquired Immunodeficiency Syndrome
CRVS	Civil Registration and Vital Statistics
C-section	Cesarean Delivery
CLIX	Climate Innovations Exchange Initiative
COP 26	Conference of the Parties
CVDs	Cardiovascular Diseases
DOTs	Directly Observed Therapy Short Course
DTP3	3rd Dose of Diphtheria and Tetanus Toxoids and Pertussis-Containing Vaccine
HBsAg	Hepatitis B Surface Antigen
Hep	Hepatitis
HIV	Human Immunodeficiency Virus
HPV	Human Papillomavirus
IHR	International Health Regulations
ISH	Isolated Systolic Hypertension
MCH	Maternal and Child Health
MCV	2nd Dose of Measles Vaccine
MDGs	Millennium Development Goals
MOHAP	Ministry of Health and Prevention
NCDs	Non-communicable diseases
MOE	Ministry of Energy
MOI	Ministry of Interior
NKPIs	National Key Performance Indicators
NRC	National Rehabilitation Center

PCV3	Pneumococcal Conjugate Vaccines
PHCs	Primary Healthcare Clinics
PLWH	People Living With HIV/AIDS
PMO	Prime Minister›s Office
RDF	Refuse Derived Fuel
RMNCH	Reproductive, Maternal, Newborn, Child and Adolescent Health
SDGs	Sustainable Development Goals
SDH	Synchronous Digital Hierarchy
TB	Tuberculosis
UAE	United Arab Emirates
UHC	Universal Health Coverage
UN	United Nation
VCT	Voluntary Counseling and Testing
WASH	Water, Sanitation & Hygiene
WHO	World Health Organization
WIPO	World Intellectual Property Organization
WTO	The World Trade Organization

Introduction

The SDGs followed the Millennium Development Goals (MDGs), which were established as an international effort in 2000 to end in 2015 using measurable, universally-agreed objectives. For the 15 years, the MDGs drove progress in critical areas: to reduce poverty, improve access to water and sanitation, reduce child mortality and improve maternal health. Moreover, it kick-started a global movement for free primary education, inspiring countries to invest in their future generations. Most significantly, the MDGs made huge steps in combatting HIV/AIDS and other treatable diseases, such as: malaria and tuberculosis. Moreover, they contributed to a significant decrease in maternal and under-5 mortality.

The Millennium Development Goals (MDGs)

- 8 goals with measurable targets and clear deadlines for improving the lives of the world's poorest people.

- The goals were interconnected tackling issues more commonly associated with each other.

From MDGs to SDGs

- MDGs covered specific areas, which showed the necessity to address other high burden diseases and more developmental domains.

- The framework for measuring achievements of MDGs provided the foundation for measuring achievement of SDGs.
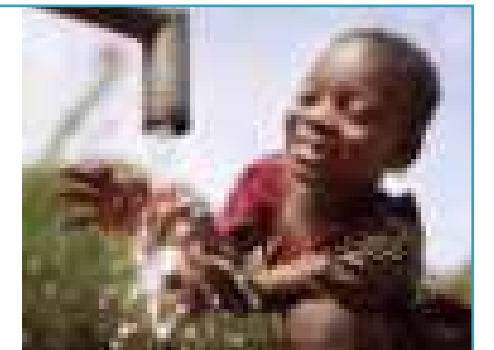
Sustainable Development Goals (SDGs)

- The 17 Goals were built on the successes of MDGs while including new areas, such as climate change, economic inequality, innovation, sustainable consumption, peace and justice, among other priorities. Each of these goals has sub-targets that are related to specific indicators.

The 17 Sustainable Development Goals (SDGs) and their targets were developed by UN with the participation of countries and civil societies as a guiding tool for the global developmental agenda. Moreover, the set of the **17 goals** delineate the level of interdependency of an individual goal between the rest of the **16 goals.** In order to make these goals achievable, the UN and partners have come up with average of **10 targets** for each goal that resulted in **169 targets** and **232 SDGs** indicators. To successfully implement the SDGs at country level, strong collaboration and whole of government approach is needed. Figure 1 blow represents **2030 Agend**a **for sustainable development,** adopted by UN Member States in 2015 to achieve a more sustainable future for all.

SDGs agenda recognizes that ending poverty and other deprivations must go hand-in-hand with strategies that improve health and education, reduce inequality, and spur economic growth – all while tackling climate change and working to preserve our oceans and forests.

Figure 1 represents the 17 Sustainable Development Goals

The 5 P's

SDGs provide a shared blueprint for peace and prosperity for people and the planet, now and into the future. At its heart are the 17 Sustainable Development Goals (SDGs), which are an urgent call for action by all countries - developed and developing in a global partnership.

Figure 2 represents the 5 p's domains that are related to the 17 goals.

People

- The first five goals of SDGs are designed to provide appropriate targets for meeting a fundamental requirement reaching all people around the world.
- **Goal 1 and Goal 2** address the most basic sustenance (no poverty & no hunger)
- **Goal 3 and Goal 4** assert the access to fundamental goals of health, wellbeing and education
- **Goal 5** mostly focus on one of the key social issues associated with empowering girls and women around the world (including equal opportunity of jobs, food and education)

Planet

- **The goals 6,12,13, 14 and 15** present the challenges that our planet is facing around the world
- The significance of these goals comes from saving our planet and our future dependence on transforming the approaches to responding to climate crises
- **Goal 6** focuses on management, sanitation and access to clean and safe water for all people
- **Goal 12** related to appropriate and proportionate consumption for ensuring sustainable development
- **Goals 13, 14 and 15** directly address the significant efforts for protecting our planet

Prosperity

- This pillar highlight that all SDGs does not discard the importance of economic development.
- Economic development is essential for peace and prosperity, which is basic condition for all people.
- **Goal 7** provides targets for international community to accomplish sustainable balance of energy utilization and attenuate the negative impact of energy over-utilization.
- **Goals 5, 8, 9, 10 and 11** highlight fairness and justice system in public and private communities and national entities through lines of gender (related to Goal 5).

Peace

- **Goal 16:** Peace is a main domain in the development of 2030 agenda, which is related to conflicts, terrorism and other difficulties that threaten peace world wild.
- **Goal 17** represent the Partnerships for all goals that considered as an important factor of all the 17 goals.
- Although SDGs were agreed upon by all member of UN, achieving the SDGs involve all entities in international community.

SDGS & UAE Vision 2021

UAE Vision 2021 was launched by **H.H. Sheikh Mohammed bin Rashid Al Maktoum,** Vice-President and Prime Minister of the UAE and Ruler of Dubai, at the closing of a Cabinet meeting in 2010. The Vision targets to make United Arab Emirates among the best countries in the world by the Golden Jubilee of the Union. In order to translate the Vision into reality, its pillars have been mapped into six national priorities, which represent the key government actions in the coming years namely: **education system, sustainable environment and infrastructure, cohesive society and preserved identity, safe public and fair judiciary, competitive knowledge economy and world-class healthcare.**

Therefore, to ensure a comprehensive and efficient execution of the National Agenda 2021, all of the 52 National Key Performance Indicators (NKPIs) of the 6 pillars were assigned to specific federal ministries according to their mandate to work to achieve the targets, and are regularly monitored and evaluated by PMO. Ministry of Health & Prevention is the lead entity for the 11 NKPIs pertaining to the national priority of **"World-class Healthcare".**

UAE Role in Developing Sustainable Development Goals

The negotiation process on the SDGs was first carried out in an Open Working Group of the UN General Assembly. United Arab Emirates took a seat representing the Asia Pacific and the Arab Groups. UAE has had a significant role as it contributed on issues such as energy, education, global partnership, health, water and women's empowerment.

United in Prosperity

- Sustainable Environment
- World-Class Healthcare
- First-Rate Education System
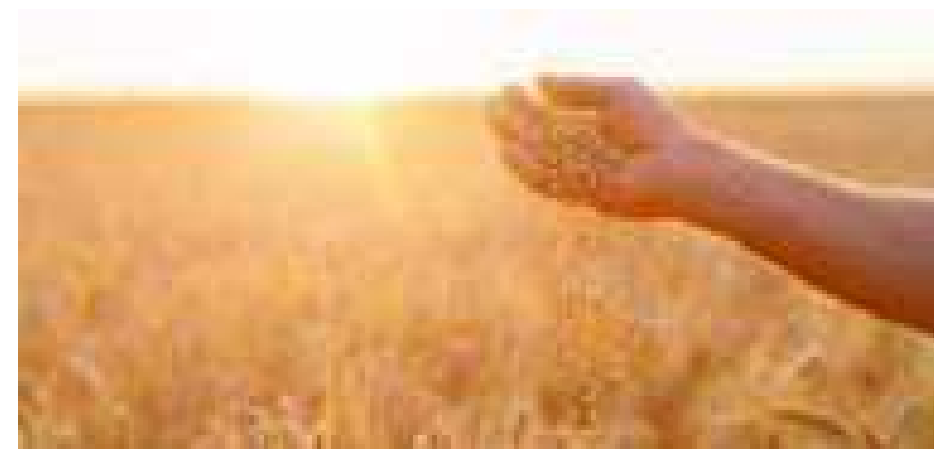
United in Knowledge

- Competitive Knowledge Economy

United in Destiny

- Safe Public and Fair Judiciary

United in Responsibility

- Cohesive Society and Preserved Identity

Figure 3 represents the main four domains of the UAE Vision 2021

Alignment of the UAE National Agenda 2021 to the SDGs

The domains and principles of sustainable development agenda 2030 is assigned as the heart of the UAE Vision 2021 and its national plans, which proves the commitment of UAE toward the global agenda of SDGs. As a matter of fact, UAE ministers from different governmental ministries acknowledge that **the six pillars of the UAEs National Agenda, the monitoring & reporting progress using accurate data and sound research & analysis are crucial requirements for monitoring the country's progress in achieving the SDGs.**

There are significant intersections between the UAE National Agenda, which consists of **6 national priorities**, 52 NKPIs and 365 sub-NKPIs with the 17 goals, 169 targets and approximately 230 indicators of the SDGs.

Figure 4 shows mapping of the SDGs to the 6 domains of the national agenda. This was undertaken by a whole of government approach represented by the UAE National Committee on SDGs.

Source: United Arab Emirates and the 2030 Agenda for Sustainable Development, 2018

UAE Efforts to Adopt and Achieve the SDGS

1. Formulating a National Committee for SDGs

In January 2017, the UAE's National Committee on SDGs was formed by decree of the UAE Cabinet. Her Excellency Reem bint Ebrahim al Hashimy, Minister of State for International Cooperation, chairs the National Committee. The FCSC serves as the Secretariat of the Committee. The Ministry of Cabinet Affairs, the Ministry of Foreign Affairs and International Cooperation, and 13 other federal level government organizations are also members and are responsible for the national implementation of the SDGs, monitoring and reporting of progress towards targets, and stakeholder engagement.
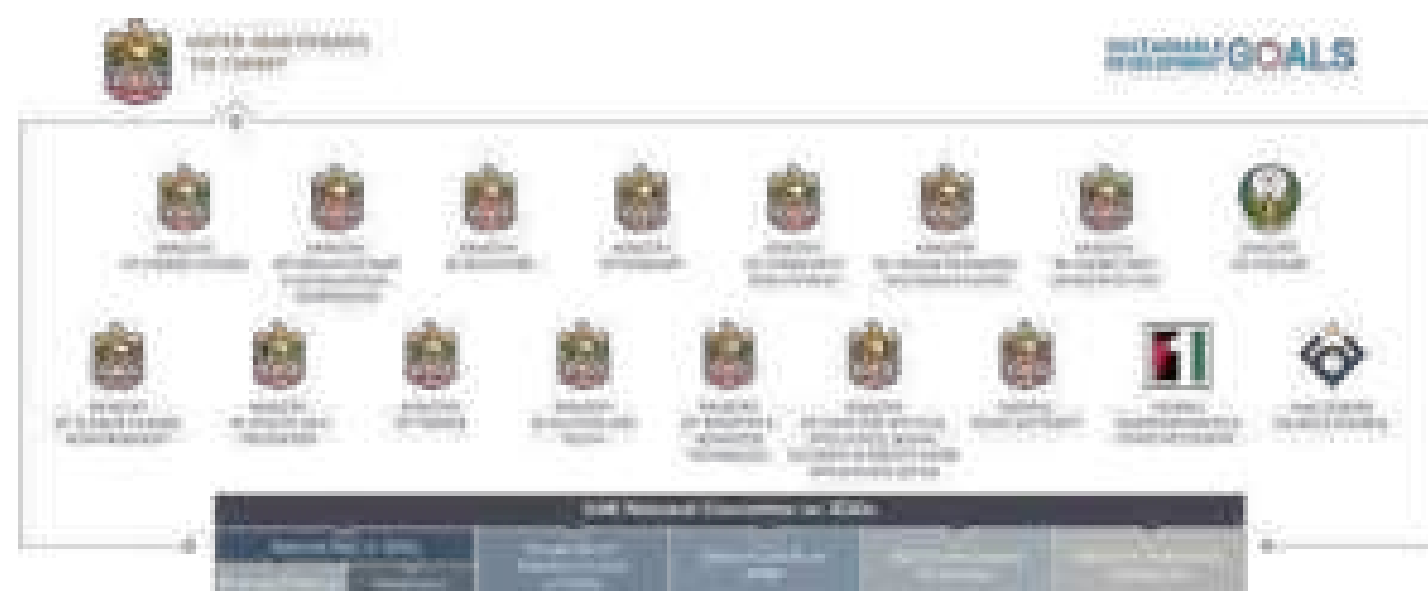
Figure 5 represent the 17 governmental entities that form the National Committee of SDGs in UAE

Figure 6 shows the national UAE Logo for the SDGs was developed that shows the existing linkage between the SDGs and the importance of a whole of government approach to the SDGs

2. SDGs' Data Hub for Monitoring

SDG 17, Partnerships for the Goals, is at the centre of the success of the SDGs. Therefore, global and local partnerships are key pillars to achieving the SDGs. However, the SDGs will not succeed without significant public awareness. To address the challenge, the FCSC established a multi partnership engagement with the private- and public sectors, and the UAE society. A partnership with Esri Global Inc., the world leader in developing geographic information systems (GIS) solutions, addresses the SDGs through the UAE SDGs Data Hub26 (the HUB) that connects the multiple partners addressed across the public-private sector and UAE society. The HUB, integrated with the UN Open

3. Alignment of the National Agenda, 2021 with Health-related SDGs

UAE's Vision 2021 "World-Class Healthcare" in UAE was aligned with SDG3 and other related SDGs that emphasizes the importance of efforts for health-related interventions and ongoing work to achieve their targets. Both of these agendas confirm the essentiality of disease prevention and a strong structure of healthcare system, which is able to improve the health status of the population and respond efficiently to epidemics or health risks.

The UAE aims to develop one of the best healthcare systems worldwide, and the National Agenda highlights a group of ambitious targets and indicators (KPIs) to be achieved in which many of these KPIs are strongly associated to the SDG3 and other health related SDGs and targets.

The following report shows that SDGs have been integrated in all the work of the MOHAP and in particular in the national multi-sectoral plans, such as: the national plan for noncommunicable diseases, national plan for communicable diseases, national plan for maternal and child health, national plan and many others.

National Working Group on Health SDGs in UAE

In alignment with the national committee of SDGs, the Ministry of Health and Prevention issued a **MINISTERIAL DECISION** to formulate a national working group from various health entities to cover SDG3 targets and health related targets in other SDGs. The working group is in-charge for developing a framework and governance mechanism to align health-related SDG targets and indicators within their strategic plans of governmental and private organizations. Moreover, it provides guidance on policy and service delivery, and links with national statistics systems to monitor SDGs.

The following is the mandate of health working group of the SDGs:

Mandate:

- Development of a comprehensive mechanism and a framework to integrate the health-related sustainable development goals into all National health plans.
- The formulation of joint sub-task forces, depending on the technical disciplines of the approved objectives, to work on the implementation of tasks in the framework and the mechanism within the specified timeframe.
- Work to provide data, analyze the current level of goals and indicators of the country and develop appropriate interventions and programs to promote and advance these indicators.
- Follow-up the implementation of the framework periodically in coordination with all stakeholders at the national level.
- Coordination with relevant federal, local and international agencies to ensure the implementation of action plans.
- Preparing analytical reports on achievements, results of national indicators, implementation of the plan activities and constraints facing the implementation periodically.

4. SDG3 and other Related Health Targets Wheel

Figure 7 highlights that although Goal 3 is related to health, most of the sustainable development goals are related to health and are considered among the social determinants of health, such as education, poverty, gender equality, clean water and sanitation, sustainable energy and safer cities and others.

It illustrates the work assigned to MOHAP and other government sectors to achieve SDG3 and other health related SDGs.
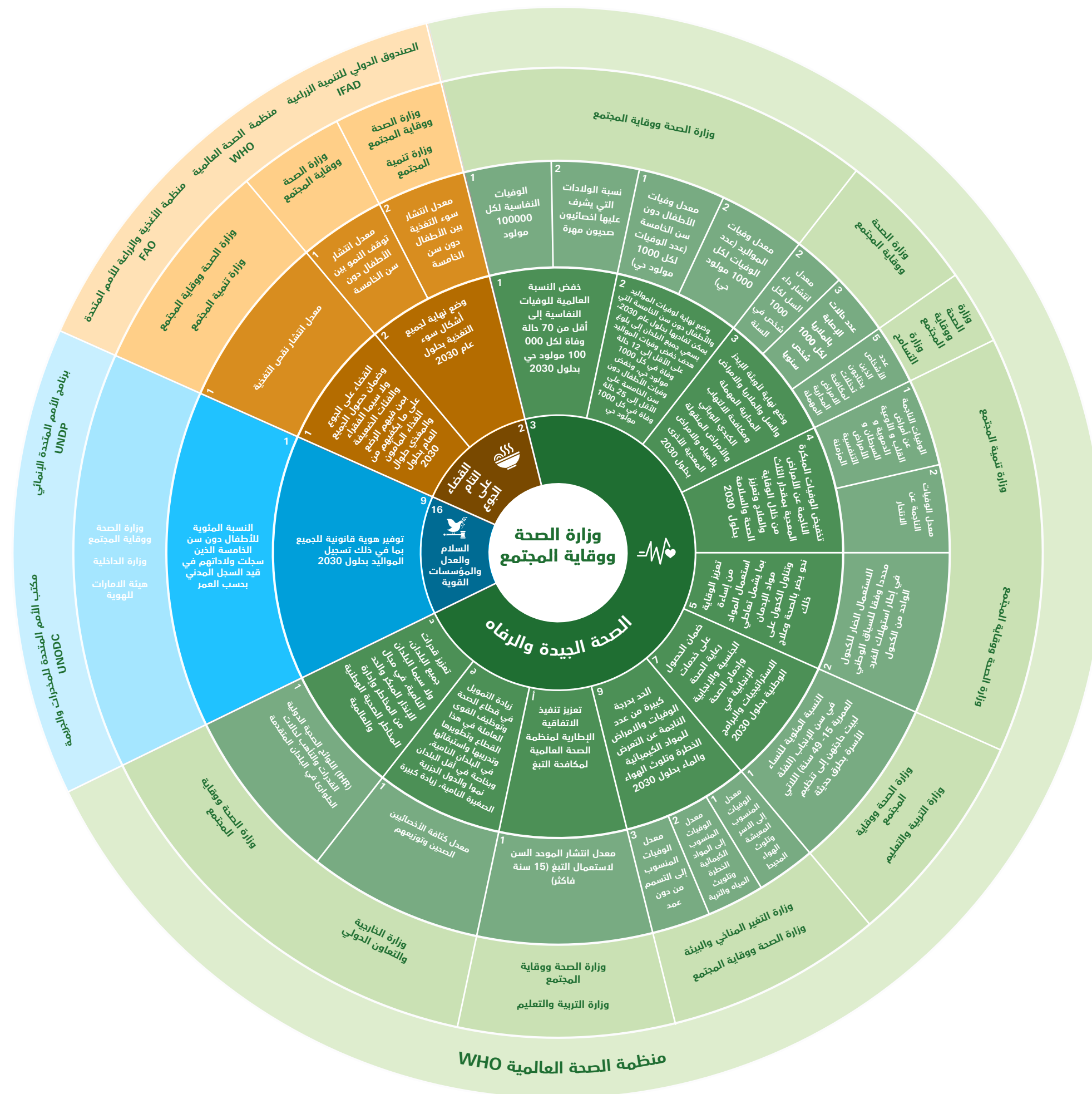
Goal 3: Good Health and well-being

Sustainable Development Goals (SDGs) placed health as one of crucial goals in its agenda. The health goal (SDG3) has a comprehensive definition to health: "Ensure healthy lives and promote well-being for all at all ages". The SDG declaration states that to achieve the overall health goal, we must achieve universal health coverage (UHC) and enhance quality of health care to ensure that "No one is left behind". Accordingly, UHC is placed at the center of SDG3.

SDG3 includes 13 targets and 15 indicators that cover all major health priorities, such as: maternal, new-born and child health, reproductive health, infectious diseases, non-communicable diseases (NCDs), mental health, road traffic injuries, UHC, environmental health consequences, and health system strengthening, and emergencies. Many other SDGs include health related targets, such as nutrition, water sanitation, air quality, violence, education and poverty.

Categories of Goal 3 Targets
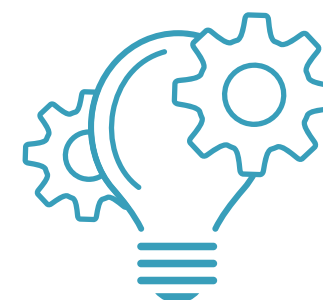
4 Targets linked to unfinished MDG

4 Targets address NCDs

4 Targets "means of Implementation"

1 Target represent UHC

Figure 8 above illustrates the 4 main domains that categorizes the targets of Goal 3

Health-Related Targets in the UAE

GOAL 3. Ensure healthy lives promote well-being for all at all ages.

According to UN SDGs index 2022, UAE is doing very well in the majority of the indicators. However, there is still room for improvements. It is worth noting that some of the values referred to **Figure 9** below has further improved, such as; under 5 mortality rates to (6.6 per 1000 livebirths) and UHC index to (78%), which will have positive implication on the forthcoming SDGs index.

Source: https://dashboards.sdgindex.org/static/profiles/pdfs/SDR-2022-united-arab-emirates.pdf

SDG 3 - Good Health & Well-Being

Indicator	Value	Year		
Maternal Mortality Rate (Per 100,000 Live Births)	3	2017	●	↑
Neonatal Mortality Rate (Per 1,000 Live Births)	3.6	2020	●	↑
Mortality Rate, Under-5 (Per 1,000 Live Births)	6.6	2020	●	↑
Incidence of Tuberculosis (Per 100,000 Population)	0.8	2020	●	↑
New HIV Infections (Per 1,000 Uninfected Population)	0.1	2020	●	↑
Age-Standardized death-rate due to cardiovascular disease, cancer, diabetes, or chronic respiratory disease in adults aged 30-70 years (%)	18.5	2019	●	↑
Age-Standardized death-rate attributable to household air pollution and ambient air pollution (Per 100,000 Population)	55	2016	●	●
Traffic Deaths (Per 100,000 Population)	8.9	2019	●	↑
LIfe Expectacy at Birth (Years)	76.1	2019	●	↗
Adolescent Fertility Rate (Births per 1,000 females aged 15-19)	3.8	2018	●	↑
Births attended by skilled health personnel (%)	99.9	2015	●	●
Survivig infants who received 2 WHO-recommended vaccines (%)	90	2020	●	↑
Universal Health Coverage (UHC) index of service coverage (worst 0-100 best)	78	2019	●	→
Subjective Well-being (average ladder score, worst 0-10 best)	6.7	2021	●	↑

Progress in Achieving SDG3 Targets

3.1 By 2030, reduce the global maternal mortality ratio to less than **70 per 100,000 live births.**

TARGET 3.1

3.1.1 Maternal mortality ratio

3.1.2 Proportion of births attended by skilled health personnel

Progress and trends in the UAE

Maternal Mortality Ratio
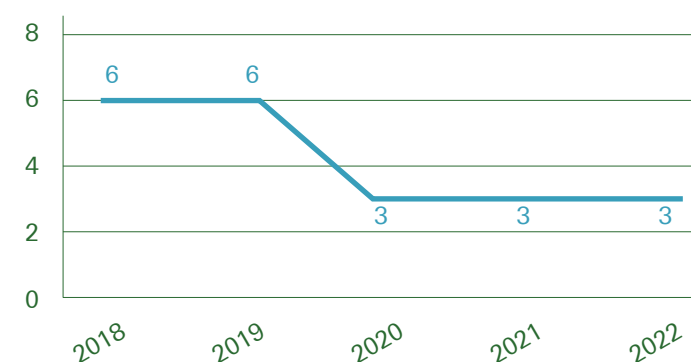
The value of Maternal Mortality Ratio improved from 6 in 2015 to 3 per 100,000 livebirths in 2022

THIS SDG IS ACHIEVED

Sources: SDGs health report 2018, 2019, 2020, 2021,2022

Births Attended By Skilled Health Personnel
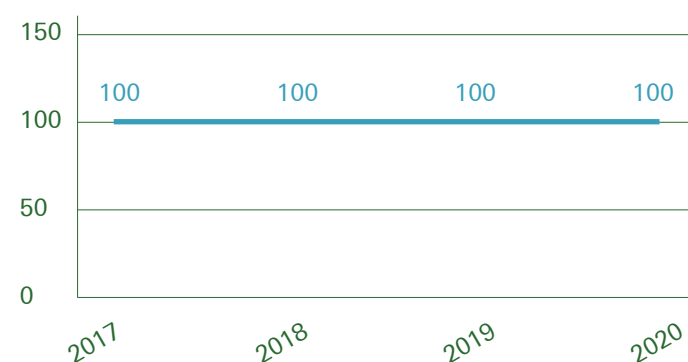
The value of Births Attended by Skilled Health Personnel is 100% since 2015

THIS SDG IS ACHIEVED

Links: https://data.unicef.org/topic/maternal-health/delivery-care/
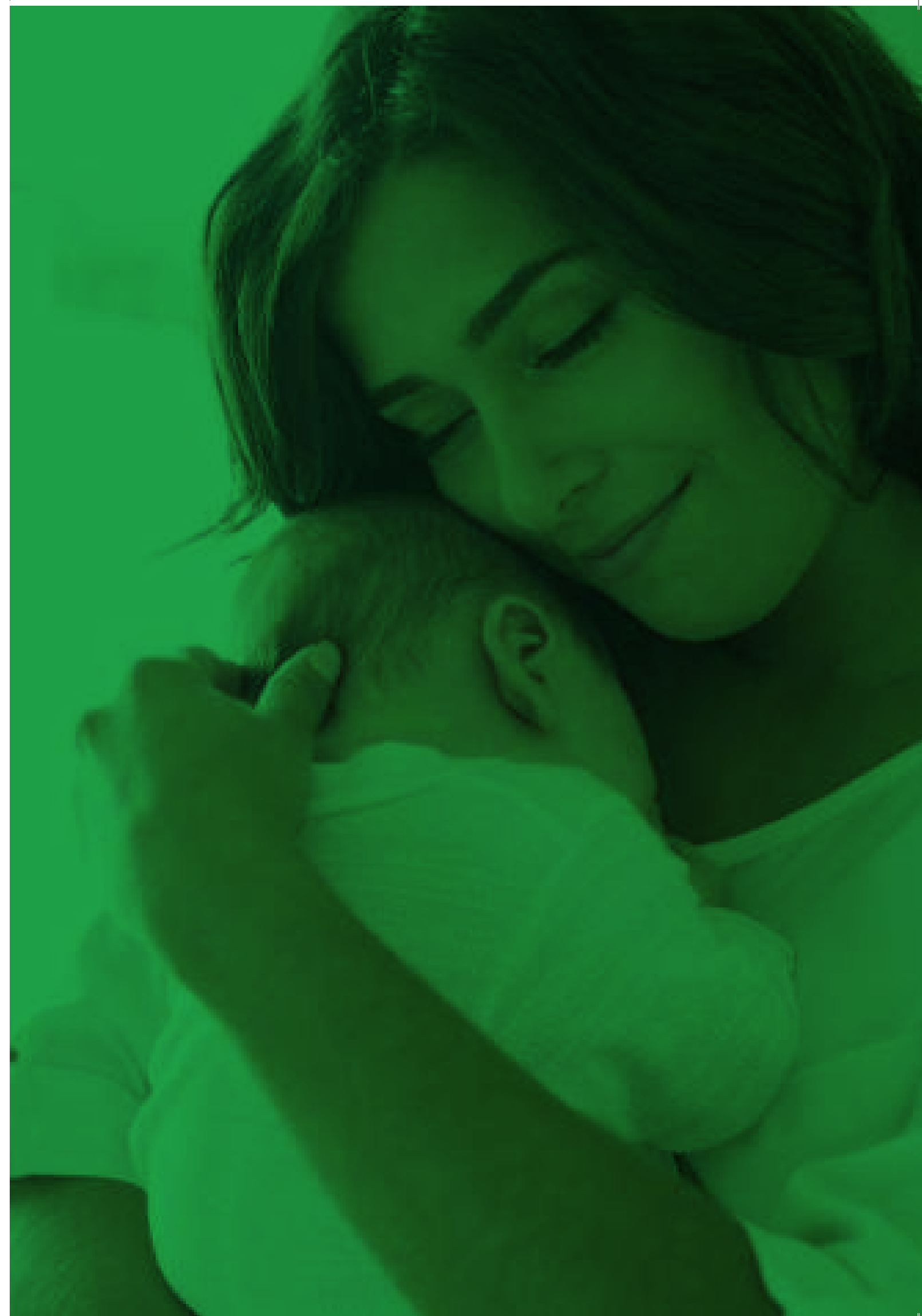
3.2 By 2030, end preventable deaths of new-born and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as **12 per 1,000 live births** and under-5 mortality to at least as low as **25 per 1,000 live births**

TARGET 3.2

5+

3.2.1 Under-five mortality rate

3.2.2 Neonatal mortality rate

Progress and trends in the UAE

Under 5 Mortality
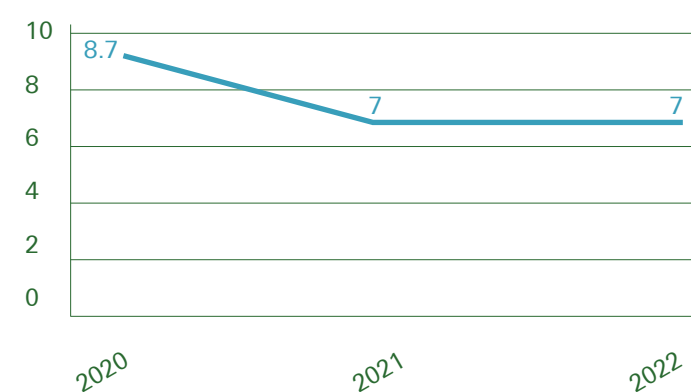
Under 5 mortality has been decreasing since 2010 reaching 7 in 2019 according to monitoring health **SDGs 2022.**

THIS SDG IS ACHIEVED

Source: monitoring health for SDGs 2016, 2017, 2018, 2019, 2020, 2021, 2022

Neonatal Mortality Rate
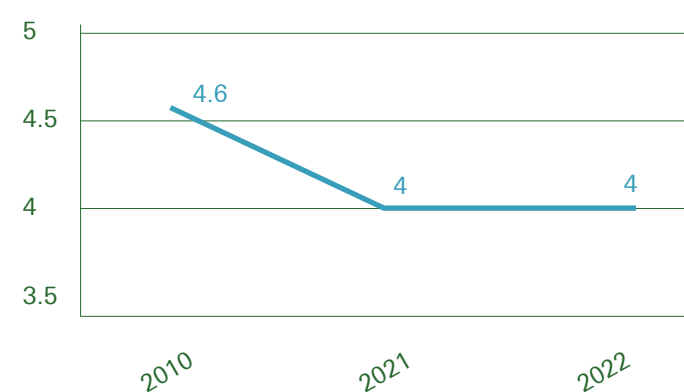
Neonatal mortality has been gradually improving **reaching 4 in 2020** according to monitoring health **SDGs 2022**.

THIS SDG IS ACHIEVED

% of Children that Recieved Exclusive Breastfeeding in the first 6 months
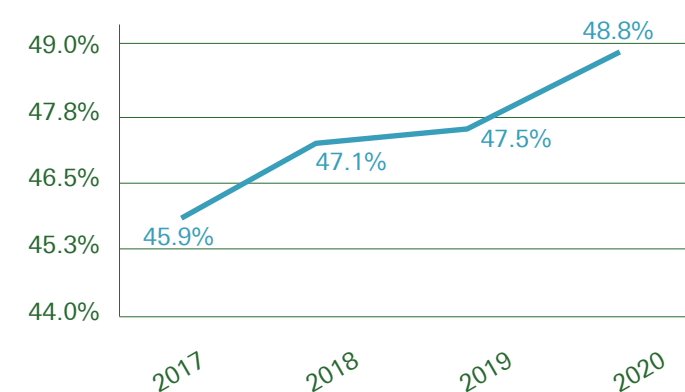
% of exclusive breast feeding has been increasing gradually in accordance with data received from public institutions nationally. However, in accordance with National Health Survey exclusive **breastfeeding rate is 59.7%.** The difference is due to not reporting the numbers from private institutions in northern emirates.

THIS SDG IS ACHIEVED

Source: Annual MCH reports on exclusive BF for children under 6 months

Surviving infants who received 2 WHO-recommended vaccines
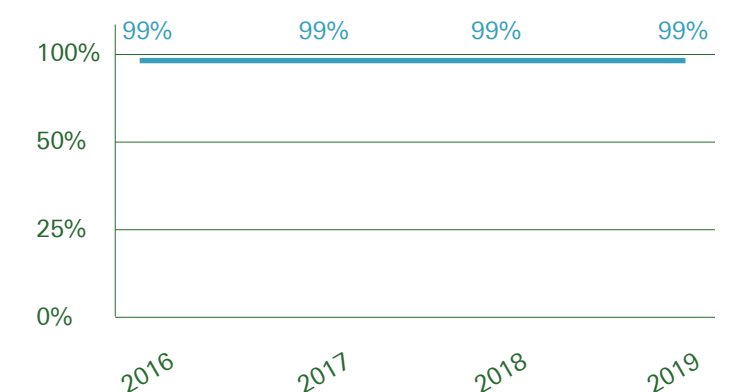
Estimated national routine immunization coverage of infants, expressed as the percentage of surviving infants under the age of **12 months** who received two WHO-recommended vaccines **(3rd dose of DTP and 1st dose of measles).**

THIS SDG IS ACHIEVED

Link: https://www.who.int/immunization/monitoring_surveillance/data/are.pdf

Challenges for Targets 3.1 & 3.2

3.1.1 Maternal mortality ratio
3.1.2 Proportion of births attended by skilled health personnel
3.2.1 Under-five mortality rate
3.2.2 Neonatal mortality rate

- UAE has achieved very good levels in some indicators, which might be challenging for further improvement, such as: maternal mortality ratio and infant mortality

- Unforeseen circumstances might slow the achievement of the SDGs e.g. Covid 19 pandemic

- As all SDGs are interlinked with each other's, some indicators require full commitments and cooperation of other governmental ministries and entities in the country to be achieved

MOHAP Initiatives/Strategies that Promote Targets 3.1 & 3.2

Domain	**3.1.1** Maternal mortality ratio **3.1.2** Proportion of births attended by skilled health personnel	**3.2.1** Under-five mortality rate **3.2.2** Neonatal mortality rate
Ministerial Decree(s)		• Federal Law No. (18) of 2009 Concerning the Regulation of Births and Deaths Registration • Cabinet Decision No. 21 of April 2018 on regulating the marketing of products related to infant and young child feeding.
Strategic plans / Initiatives/ Programs	• National MCH strategic plan • Developing maternal and perinatal death surveillance and response system to eliminate preventable maternal and perinatal mortality by obtaining and strategically using information to guide public health actions and monitoring their impact. • Preconception care program, which ensures that all women of reproductive age considering pregnancy are provided with needed care to ensure favorable outcome of pregnancy for mothers and children. • Establishment of E-clinics for low risk pregnant women in the 1st and 2nd trimesters, during Covid 19 pandemic, to provide health assistance, advices and follow up appointments. • Literacy kits for "Mother and child Health" targeting preconception, pregnancy and child health care. • The National Plan for the Promotion of Women's Mental Health, which emanates from the National Mental Health Policy, and its implementation plan. • Training doctors and concerned staffs on how to complete the maternal death surveillance and response forms.	• National MCH strategic plan • Neonatal Screening Policy and Procedures • Child assessment during well child visit Policy • National Preconception Care (PPC) Program in UAE Policy • Breastfeeding and BFHI policy During Emergency (COVID 19) Policy • Neonatal screening program • Reproductive health program • Baby friendly initiative • Breastfeeding program • Code on regulating the marketing of products related to infant and young child feeding.

↳ **Way Forward** (Evidence based Interventions)

- Improved access to comprehensive sexual, reproductive, maternal and new-born health care (RMNCH)
- Improved access to quality of sexual, reproductive, maternal and new-born health information and services address all causes of maternal mortality, reproductive and maternal morbidities, and related disabilities
- Improved health systems to respond to the needs and priorities of women and girls
- Number of health care services provide quality care by skilled birth attendance
- Proxy indicators to measure the indicator in shorter terms:
- Data to be disaggregated according to: (place of residence, socioeconomic)
- To collect the following indicators from routine data:
  - » C-section rate
  - » Percentage of complicated cases that timely managed and treated from complications at birth
  - » Percentage of Anemia among women of reproductive age
  - » Percentage of Anemia among pregnant women

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.

TARGET 3.3

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

3.3.2   Tuberculosis incidence per 1,000 population

Progress and trends in the UAE

TB Incidence per 100,000 population

The graph shows that the incidence of Tb has decreased from 1.6 in 2015 to 1.0 in 2020.

THIS SDG IS ACHIEVED

Sources: SDGs health report 2017, 2018, 2019, 2020, 2021,2022

Challenges for Targets 3.1 & 3.2

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

3.3.2   Tuberculosis incidence per 1,000 population

- All new HIV cases diagnosed in UAE are obligated to be reported by law immediately to the health authorities and periodically to the national program in MOHAP

- The main obstacle is the number of segregated populations by age, sex and key populations that documenting, reporting and improving the indicator of HIV in the country level.

- Lack of behavioral surveys to identify the real key population and put relevant interventions

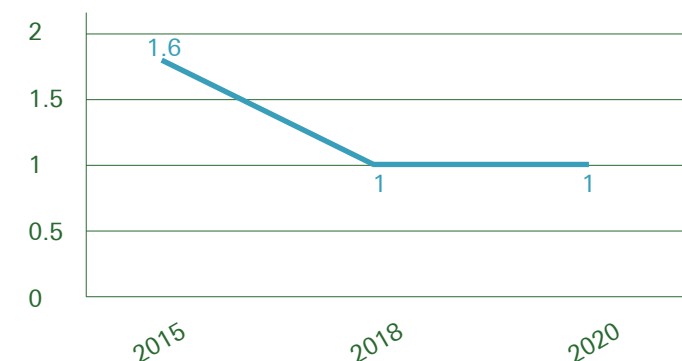# MOHAP Initiatives/Strategies that Promote Targets 3.3.1 & 3.3.2

Domain	**3.3.1** Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations	**3.3.2** Tuberculosis incidence per 1,000 population
Ministerial Decree(s)	• Federal Law No. (14) of 2014 on the Control of Communicable Diseases • Cabinet Decision No. (29) for the year 2010 regarding the system of preventing the society from HIV and protecting the rights of PLWH	• Federal Law No. (14) of 2014 on the Control of Communicable Diseases and the Council of Ministers
Strategic plans / Initiatives/ Programs	• Communicable disease policy • Using the new electronic epidemiological investigation system for communicable diseases • Establishment of VCT clinics • HIV screening channels e.g. all donated blood units	• Implement END TB strategy • Using the new electronic epidemiological investigation system for communicable diseases • Follow the implementation of DOTS clinics to ensure access and comprehensive health coverage

↳ **Way Forward** (Evidence based Interventions)

• Update policies and supportive systems

• Intensified research and innovation approaches for HIV and TB.

TARGET 3.3

3.3.3 Malaria incidence per 1,000 population: **UAE is malaria free country**

3.3.4 Hepatitis B incidence per 100,000 population

Hepatitis B values in the UAE

Preventive Approach

Infants receiving 3 doses of Hep B vaccine (%)   **94% in 2015**

Screening Approach

Hepatitis B surface antigen (HBsAg) Prevalence among children under 5 years (%)   **0.08% in 2015 to 0.02% in 2019**

Sources: SDGs health report 2017, 2018, 2019, 2020, 2021,2022

MOHAP Initiatives/Strategies that Promote Targets 3.3.3 & 3.3.4

Domain	3.3.3 Malaria incidence per 1,000 population	3.3.4 Hepatitis B incidence per 100,000 population
Ministerial Decree(s)	• Federal Law No. (14) of 2014 on the Control of Communicable Diseases • Ministerial Decree No. (752/2002) for establishment the National Malaria Control Program	• Federal Law No. (14) of 2014 on the Control of Communicable Diseases and • Executive Regulations of the Federal Law • Ministerial Decree No. (1966) of 1997 Concerning the National Program for the Prevention of Hepatitis B Virus • No. 7 of 2008 Concerning the Medical Examination Scheme for Expatriates to the country
Strategic plans / Initiatives/ Programs	• Communicable diseases policy • Continue to support the malaria vector control program • Using the electronic epidemiological investigation system for communicable diseases • Integrated vector borne management and rename the center to National Center for Malaria and Vector Control	• Global end hepatitis plan • Using the electronic epidemiological investigation system for communicable diseases • Update the national hepatitis program to include all types

↳ **Way Forward** (Evidence based Interventions)

• UHC: develop essential health services package for infectious diseases

• Develop national indicators for Rate of effective treatment

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

TARGET 3.4

3.4.1 Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease

3.4.2 Suicide mortality rate

Progress and trends in the UAE

3.4.1 Probability of dying from any of cardiovascular disease, cancer, diabetes, chronic respiratory diseases between age 30 and exact age 70 (%)

3.4.2 Suicide mortality rate (per 100 000 population)

	2010	2015	2016	2019
	18.1	17	16.8	18.5

	2015	2016	2019
	2.9	2.8	6.4
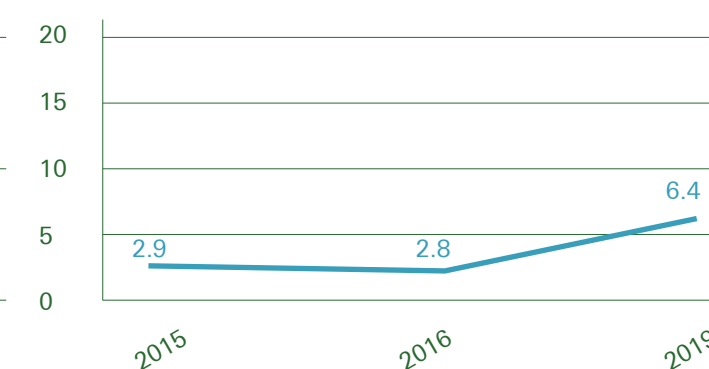
CHALLENGES REMAIN

CHALLENGES REMAIN

Sources: SDGs health report 2017, 2018, 2019, 2020, 2021,2022 & **https://**dashboards.sdgindex.org/profiles/united-arab-emirates

Facts related to 3.4 trends

In UAE's effort to improve reporting "cause of deaths", **the percentage of unknown causes of death has decreased dramatically from 22% - 5%**. This improvement was reflected in slight increase in known causes, such as: premature mortality from CVD's, suicide mortality rate and others. Therefore, this increase does not reflect actual increase in mortality, but rather than improved reporting of cause of death.

Challenges for Targets 3.4.1 and 3.4.2

- Rise in obesity, physical inactivity and unhealthy diets constitute a huge challenge in the UAE.

- No/ weak linkage between coronial and police systems that result in missing data related to suicide deaths in death registration system

- The delay of determining cause of death related to suicide due to the cultural stigma, social and legal considerations.

- No systematic research and studies are conducted related to this target, especially that SDG health report of 2019 indicates that is much higher in males compared with females (3.7:0.7).

Major differences between males & female

The individual's gender has a range of biological, behavioral, social and economic consequences for health. Sex-disaggregated statistics are required for many of the health and health-related SDG indicators. **Major variations between men and women may occur in mortality, causes of death, morbidity, coverage of interventions, risk factors and determinants.**

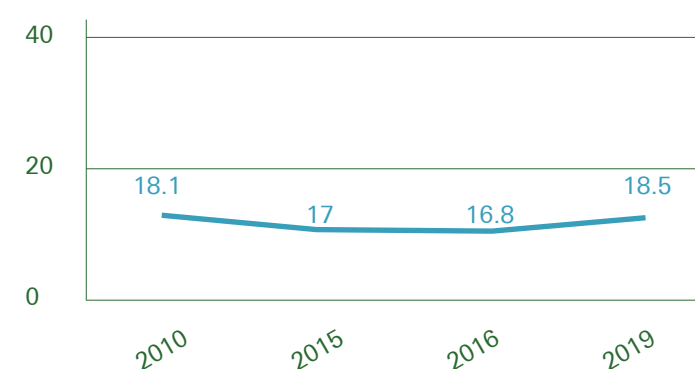# MOHAP Initiatives/Strategies that Promote Targets 3.4.1 and 3.4.2

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| Domain	**3.4.1** Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease	**3.4.2** Suicide mortality rate
Ministerial Decree(s)	• Federal Law No. (15) for the year 2009 concerning Tobacco Control and its implementing regulations • Federal Law No. (18) for the year 2009 regarding the regulation of registration of births and deaths. • Ministerial Decree No. (44) for the year 2011 regarding the executive regulations of Federal Law No. 18 of 2009 regarding the regulation of registration of births and deaths.	• Federal law on mental health
Strategic plans / Initiatives/ Programs	• National Cancer Control Plan • National plan to combat cardiovascular diseases • National Plan for the Prevention and Control of NCDs, 2017-2021 • UAE National Vision 2021 related to diabetes • UAE National Vision 2021 related to obesity • UAE National Vision 2021 related to tobacco • UAE National Vision 2021 related to cardiovascular diseases • UAE National Vision 2021 related to cancer • National Vision 2021 related to No. of physicians to 1000 population • National Vision 2021 related to No. of nurses to 1000 population • **For further NCDs and risk factors initiatives and programs, please check the table in the next page**	• National Mental Health Policy • Child and adolescent care program • School mental health • Integrate mental health with primary health care • Updating and linking birth and death service programs

NCDs Initiatives and Programs

CARDIOVASCULAR DISEASES	CANCER	OBESITY
• Health awareness on CVD and associated risk factors • Developing a national strategy to reduce mortality from cardiovascular disease • National cardiovascular disease registry • Application of cardiovascular risk assessment tool (WHO/ ISH/CVD risk assessment tool)	• health awareness on cancer early detection, cancer gulf week, HPV vaccine • Developing a national strategy to reduce cancer mortalityEarly detection of: (breast, colon, cervical cancer) • Population based National cancer screening policy (framework 2020-2023) • National cancer registry • Travel health clinics	• National program to combat childhood obesity • Childhood Obesity Framework. • Health Heroes application which aims to provide children with new information that heightens their awareness on the importance of adopting a healthy lifestyle. • The electronic (Motaba'a) system for monitoring obesity in children at the level of all state schools (the first system regionally)
DIABETES	**NCDS & RISK FACTORS INTERVENTIONS**	**TOBACCO**
• Early detection of diabetic retinopathy • Diabetes Response Program • National Register of Diabetes Diseases • Travel health clinics • Diabetes prevention program (increase community awareness on Diabetes and prediabetes, early detection and intervention for prediabetic patients)	• National Plan for the Prevention and Control of NCDS 2017-2021 • Program to integrate cost-effective NCDs interventions • "Makom" initiative for promoting healthy lifestyle in the community targeting risk factors including healthy diet, physical activity, obesity and tobacco use. • (E-etmenan Service) Initiative for Universal Periodic examination of non-communicable Diseases • The Global Health Survey of School Students 13-17 years old published in 2017 on the state of physical and mental health and behavior.	• Activating the application of the law and the tobacco control regulation • Strengthening smoking cessation services • Mass Media Campaigns • Increase the number of clinics to quit smoking • Application of selective tax on tobacco products • Applying best practices in standard packaging of tobacco products • Cooperate with the municipalities and encourage them to follow the commitment and good application of smoke-free places • Capacity building of health care providers • Smoking cessation clinic

↳ Way Forward (Evidence based Interventions) 3.4.1

• Data disaggregation by: sex, age, residency, economic status, and other social determinants of health

• Development and implementation of strong national plans that emphasize the prevention of key NCD risk factors and treatment access for all

• NCD mortality rate

• To continue monitoring the following NCD tracers in accordance with the national plan:

  » a. Hypertension treatment coverage

  » b. Cervical cancer screening

  » c. Prevalence of raised blood pressure/ high salt intake

  » d. Prevalence of raised blood glucose

  » e. Tobacco (non-use)

  » f. Prevalence of alcohol consumption

  » g. Prevalence of physical inactivity/ obesity

  » h. Prevalence of high cholesterol

  » i. HPV vaccine coverage

  » j. Prevalence of CVD risk above 30% who received early medical intervention

↳ Way Forward (Evidence based Interventions) 3.4.2

• Comprehensive multispectral suicide-prevention strategy that includes the early identification and effective Management of suicidal behaviors

• Follow-up and community-based support for those who attempt suicide

• Collect data on a core set of mental health indicators to provide reliable information on the extent of service Coverage for mental disorders including

  » Substance abuse rate (e.g. alcohol)

  » Suicide mortality rate

  » Suicide attempt rate

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

TARGET 3.5

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

3.5.2 Harmful use of alcohol, defined according to the national context as alcohol per capita consumption (aged 15 years and older) within a calendar year in liters of pure alcohol

Proposed Interventions to maintain reliable data for target 3.5.1

- Strengthen public health response, such as: health measures to prevent drug use and reduce vulnerability and risks

- Ensuring access to controlled medicines for medical and scientific purposes and appropriate monitoring and evaluation procedures.

- Case management and substance abuse treatment that include:

    » a. Defined types of data required for evaluation of case management

    » b. The methods and approaches that are followed to collect the data

    » c. The manner in which data are utilized among different stakeholders.

    » d. Structured feedback loops should be established to ensure that the gathered data are returned to various stakeholders in some meaningful way so that they have an impact on shaping future program development (and future data needs).

3.5.2 Harmful use of alcohol, defined according to the national context as alcohol per capita consumption (aged 15 years and older) within a calendar year in liters of pure alcohol

There is no official database developed specifically for alcohol consumption that include the age groups, gender and its health consequences in the UAE. The presence of database would provide a regular and valid collections and recordings of alcohol consumption in the country.

Sources: https://store.samhsa.gov/sites/default/files/d7/priv/sma15-4215.pdf, World Health Statistics 2016, monitoring health for the SDGs

MOHAP Initiatives/Strategies that Promote Target 3.5.2

- Federal Law No. (30) of 2021 regarding combating narcotics and psychotropic substances

- Cabinet Resolution No. (21) for the year 2019 amending some tables attached to Federal Law No. (14) of 1995 regarding combating narcotics and psychotropic substances

- Ministerial Resolution No. (379) of 2019 regarding the unified electronic platform for prescribing and dispensing narcotic drugs, as well as controlled and semi-controlled medicines.

- Ministerial Resolution No. (677) of 2019 regarding the procedures and controls for accompanying narcotic drugs or surveillance with travellers when entering or leaving the country

- Ministerial Resolution No. (253) of 2020 regarding the rules and regulations for prescribing and dispensing some controlled medicines

- Ministerial Resolution No. (382) of 2020 regarding the inclusion of drugs in the electronic platform for narcotic drugs and monitoring them

- Ministerial Resolution No. (49) of 2021 regarding the list of semi-controlled medical materials and products

- Mental health policy

- Federal law number 13 for the year 2020 on public health

- Ministerial Decision No. (888) for the year 2016 regarding the regulations and rules for prescription and dispensing of narcotic drugs and controlled and semi-controlled medicines.

- Formulating National Committee for Treatment, Rehabilitation and Social Integration related to formation of the Anti-Narcotics Council. It aims to develop a plan to provide treatment and rehabilitation service for drug addicts and psychotropic substances in coordination with partners Through a set of strategic priorities

- Development of the Maudsley Health Al Amal Addiction strategy that aims to:

  - a.   Improving mental health and addiction outcomes
  - b.   Developing community opioid substitute treatment programme
  - c.   Segregated residential detox and recovery
  - d.   Delivering psychologically sound day recovery program
  - e.   Integrated approach to complex issues like dual diagnosis, Hep C, COPD etc.
  - f.   Harm minimization and use of technology

- Development of overall Policy Framework in schools for prevention from drugs and substances use. All phases of the project were fulfilled.

- Development of National Rehabilitation Center (NRC) that provides the best treatment services to patients while getting on with their normal lives, their work and activities in 2010.

- Development of Khalifa Rehabilitation Compound that provides its services to all segments of Emirati society using state-of-the-art equipment and medical tools.

- NRC agreement with WHO that involves experts and specialists in order to adopt International Classification of Addiction and Co-occurring Diseases ICD 11 as a prelude to its adoption and to be put before the UN General Assembly in 2017 for ratification.

- Development a National Surveillance System for addiction and drugs in collaboration with partners and stakeholders.

- During the pandemic of Covid 19 the following initiatives were accomplished:

  - Development of a 24-hour hotline that targets people in distress and frontliners
  - Development of a network of mental health clinics (Al Amal Satellite Community Mental Health E- Clinics in PHCs), which aims to provide comprehensive psychological services close to patient's residence.
  - Launching virtual mental health sessions to provide therapeutic services and psychological counseling to patients, without the need to visit the hospitals.
  - Medications Delivery to patient's home according to specific procedures that ensure safety and privacy.

↳ Way Forward (Evidence based Interventions)

- A draft federal law on mental health.
- Public health-oriented pricing policies
- Restricting the availability of alcoholic beverages
- Comprehensive restrictions or bans on alcohol advertising and marketing
- Anti-drink-driving policies and effective health services responses.
- International activities regarding the production and dissemination of knowledge and tends of alcohol consumption

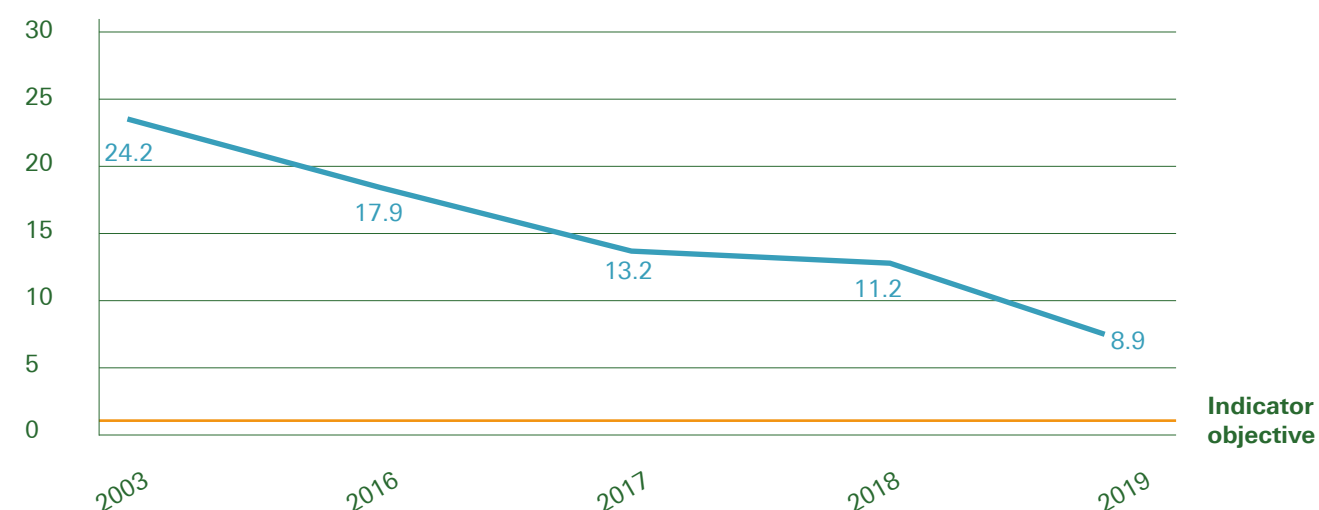## 3.6 By 2020, halve the number of global deaths and injuries from road traffic accident

TARGET 3.6

3.6.1   Death rate due to road traffic injuries

Progress and trends in the UAE

Road traffic mortality rate
(per 100,000 population)

UAE has succeeded in decreasing the deaths from road traffic accidents moving forward to achieve the long-term objective of 3.2 deaths. This decrease was achieved through the initiatives from National Committee of Road Safety and triangulations of reported data.

MOHAP Initiatives/Strategies that Promote Targets 3.6.1

Domain	MOHAP Initiatives/Strategies that Promote 3.6.1
Ministerial Decree (s)	• Federal Law on Accident Assistance • Federal traffic law came into effect on 1 July 2017. The new regulations aim to further protect the lives of road users and reduce traffic casualties. • Ministerial Resolution No. 178 of 2017 regarding traffic control rules, the resolution covers many safety and control aspects
Strategic plans /Initiatives/Programs	• National strategy for road safety with measurable targets to reduce the number of people killed and /or seriously injured in a road traffic crash including targets for evidence-based interventions implementations. • There are many cost-effective mandatory policies that are implemented by Ministry of Interior (MOI) to reduce traffic deaths, such as:

1. Mandatory seat belts for all

2. Imposing penalties for reckless driving such as: fines, black points, and vehicle bans

3. Imposing penalties for driving under the influence the alcohol and drugs

A robust surveillance system to monitor deaths and injuries from road traffic accidences with clear definitions. The collected data is disaggregated by gender, age groups and road users. The data is triangulated between MOI data, hospitals data and civil registration data.

• Implementation of penalties demerit point system in the country.

• An audit system in place for new and existing roads infrastructures.

• A systematic programme in the country to target high risk locations on existing roads in order to upgrade and take the necessary measures.

• Presence of central traffic control system 'SCOOT' which is installed with sensors that aims to monitor the volume of vehicles at signals to improve traffic flow at main junctions

• In order to reduce injuries and deaths among pedestrians and cyclists, a system for safe crossings and separation from vehicular traffic is in place.

• National policies and supporting investment in public transport to increase the percentage of urban population that have convenient access to public transport is in place, such: metro rail, formal buses and minibuses.

• A formal, government-ratified certification pathway for prehospital providers is in place including a pathway for medics, technicians, nurses or others to be specifically certified as pre-hospital providers.

• There is a unified single emergency care services access number (999) with total country coverage.

3.7 By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programs

TARGET 3.7

3.7.1 Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods 67.2%, which is based on National Health Survey, 2018

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

Data Gaps in 3.7.1

There are differences in the precise definition and/or method of calculation for this indicator.

Domain	MOHAP Initiatives/Strategies that Promote 3.7.1
Ministerial Decree (s)	• Federal law no. (7) year2019 on concerning medically assisted reproduction. • Cabinet resolution no. (64) of 2020 concerning implementing "Federal law no.(7) year 2019 concerning medically assisted reproduction"
Strategic plans /Initiatives/Programs	• National Plan for the Promotion of Women's Mental Health • Maternal and child heath national strategic plan. • Postnatal care program. • Preconception care program • Premarital examination and counseling. • Preparation and implementation of the National Plan for Motherhood and Childhood by the Higher Committee for Motherhood and Childhood

↳ **Way Forward** (Evidence based Interventions) 3.7.1

• UHC: RMNCH Family planning coverage

• Improving education levels of mothers

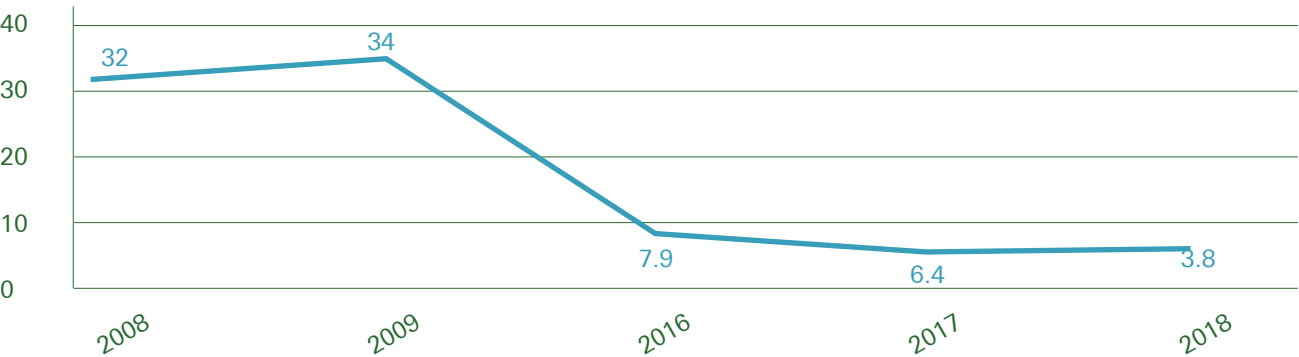• Data disaggregation according to age + socioeconomic and others.

TARGET 3.7

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

Progress and trends in the UAE

Adolescent fertility rate

UAE has improved gradually in target 3.7.2 in the last 10 years reaching to the value 3.8 per 1000 adolescent women in 2018, closing to the long-term objective of 2.5.

THIS SDG IS ACHIEVED

Sources: https://dashboards.sdgindex.org/profiles/united-arab-emirates

Domain	Federal Ministries Initiatives/Strategies that Promote 3.7.2
Ministerial Decree(s)	• Federal Law No. 28 issued by the Ministry of Justice on 19/11/2005 Regarding personal status (age for marriage only for individuals 18 and above)
Strategic plans /Initiatives/Pro-grams	• Dealing with domestic violence in primary health care centers • Care of children and adolescents • National MCH plan • "Health Education School Guideline" that educate school students on issues related to puberty and reproductive health

↳ Way Forward (Evidence based Interventions) 3.7.1

- HC: RMNCH Family planning coverage
- Ensuring access to sexual and reproductive health information and services by all who need them, including adolescents
- Interventions for improving the health of adolescent girls
- Improving education levels of mothers
- Data disaggregation (age + socioeconomic) combined with CRVS systems
- Adolescent birth rate (per 1000 women aged 15–19 years)

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

TARGET 3.8

3.8.1 Coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, new-born and child health, infectious diseases, non-communicable diseases and service capacity and access, among the general and the most disadvantaged population)

3.8.2 Financial Coverage: Percentage of people covered by health insurance public or a private health system

Progress and trends in the UAE

3.8.1 UHC Service Coverage Index
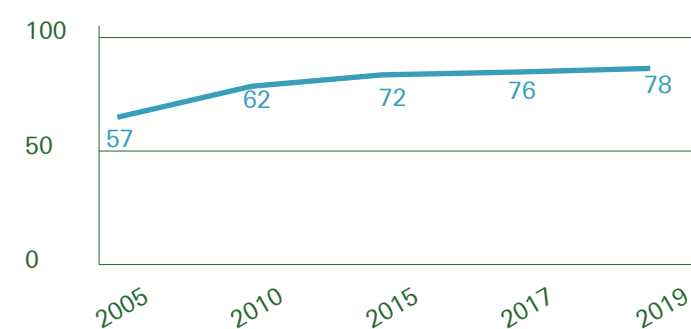
The data show that UAE is improving gradually in UHC service coverage index reaching 78 in 2019 according to the report of monitoring health for SDGs in 2022.

| CHALLENGES REMAIN |

3.8.2 Number of people covered by health insurance or a public health system per 1,000 population

Emirati **> 100%**

Non-Emirati **> 86.1%**

It is worth mentioning that MOHAP has a system to monitor the coverage of service indicators as indicated above. Furthermore, a national health account was conducted for the 1st time in UAE and the report was published in 2020

Challenges for Target 3

• Further data suggestion by social determinant of health is needed

MOHAP & Other Federal Ministries Initiatives/Strategies that Promote Target 3.8

Figure 10 indicates the geographical distribution of healthcare facilities for the northern emirates in 2018 (from Dubai to Fujairah), resulting in:

The time needed to have health access ❯ 20 minutes Value
Specifications ❯ 1 facility for 2500 population

- Conducting a study by Ministry of Energy (MOE) and Infrastructure & Ministry of Health and Prevention that study locations, sizes, ages and status of health facilities are considered through the compilation of available data from the relevant authorities considering the levels of access to a range of health facilities:

| Hospitals | Primary Healthcare Centers | Dental Facilities | Preventative Medicine Centers | Ambulance Facilities |

- Establishment of new DOTS clinics in remote and crowded areas to ensure access to TB treatment health in order to limit its spread to other areas.

- The National Health Account, which is the first national health account to monitor expenditures on health at the country level (conducted 2018)

- All Emiratis enjoy free health care services from federal health entities in all the 7 emirates

- As for the non-Emiratis: the extent of coverage for employers and their dependents is determined by the employee's salary, designation etc. The insurance coverage for non-Emiratis (86.1%), the extent of coverage and type of policy/scheme would determine the cost of your medical services.

  » a. In the emirate of Abu Dhabi, employers and sponsors are responsible for the providing health insurance coverage for their employees and their families (1spouse and 3 children under 18 years).

  » b. In the emirate of Dubai, employers are required to provide health insurance coverage for their employees. Sponsors are required to get insurance cover for their resident dependents.

  » c. There are several insurance companies in the UAE. Many also provide Islamic insurance (takaful).

⤷ **Way Forward** (Evidence based Interventions)

- Monitoring of UHC indicators needs to be embedded within health systems performance assessment frameworks that link changes in coverage to potential drivers of progress caused by changes in inputs, structures and processes. These should include:
  - » a. Structural elements related to investments in health
  - » b. Process elements such as health system reforms (such as changes in provider payment mechanisms) designed to improve health service quality and utilization
  - » c. Determinants of health. All available data need to be disaggregated by SDH
- It is essential to assess changes in non-health-system social determinants of health (such as educational attainment and poverty rates) as such changes also have great influence on service coverage and health outcomes.
- In order to have a full access to data related to UHC service coverage index (3.8.1) these indicators should be measured:

| **Reproductive, maternal, newborn and child health**	• Family planning • Antenatal care 4+ visits • Child immunization DTP3 • Care seeking for suspected pneumonia
Infectious diseases	• Tuberculosis effective treatment • HIV treatment with ART • Insecticide treated nets for malaria • Water and sanitation
Noncommunicable diseases	• Normal blood pressure • Mean fasting Plasma Glucose • Tobacco nonsmoking
Service capacity and access	• Hospital bed density • Health worker density • IHR core

- In order to have a full access to data related to (3.8.2) these indicators should be measured regularly:
  - » a. Catastrophic health expenditure indicator
  - » b. Impoverishing indicator
  - » c. Population with household expenditures on health >10% of total household expenditure or incomes (%)
  - » d. Population with household expenditures on health >25% of total household expenditure or incomes (%)
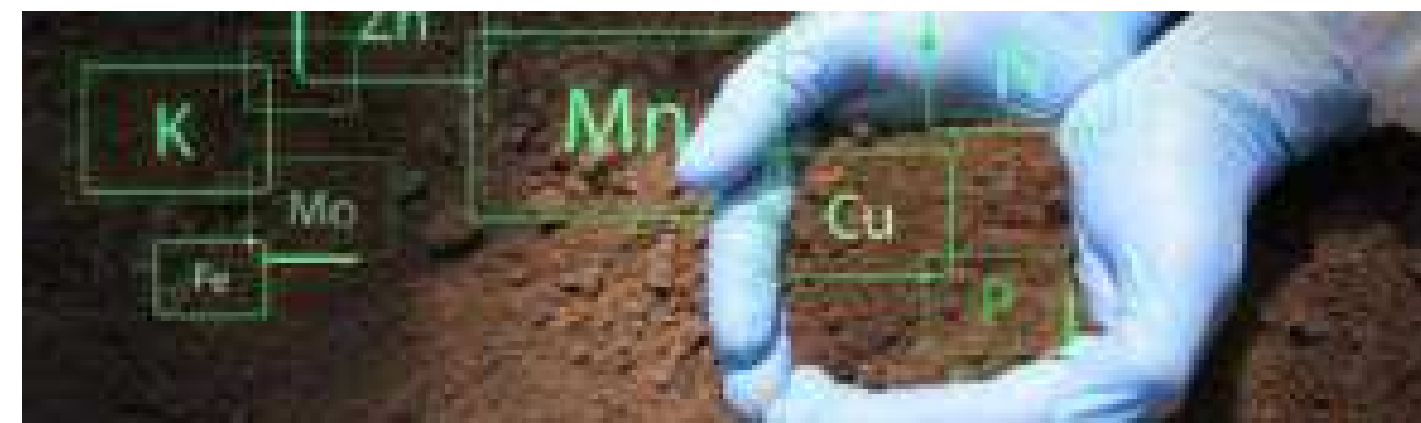
3.9 By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination.
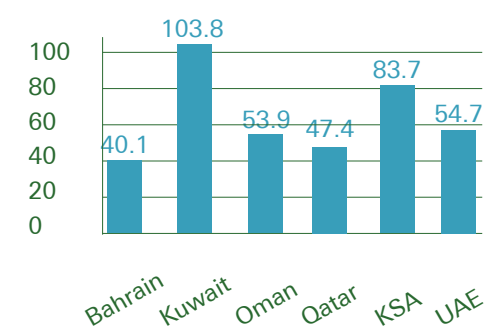
TARGET 3.9

3.9.1 Mortality rate attributed to household and ambient air pollution

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)

3.9.3 Mortality rate attributed to unintentional poisoning

Progress and trends in the UAE (comparable estimates)

3.9.1 Mortality rate attributed to household & ambient air pollution (per 100 000 population)

3.9.2 Mortality rate attributed to exposure to unsafe WASH services (per 100 000 population)

3.9.3 Mortality rate attributed to unintentional poisoning (per 100 000 population)

	Bahrain	Kuwait	Oman	Qatar	KSA	UAE
Value	40.1	103.8	53.9	47.4	83.7	54.7

	2012	2016
Value	0	0

	2015	2016	2019
Value	0.3	0.3	0.4

This graph shows bench marking of the mortality attributed to air pollution in GCC countries according to the report of monitoring health SDGs published in 2021.
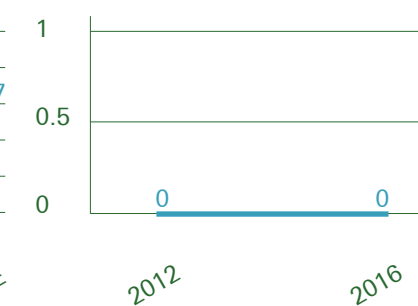
UAE succeeded to maintain its rate to less than 0.1 to this indicator according to the report monitoring health SDGs published in 2022

Regarding mortality due to unintentional poisoning, UAE had a rate of 0.3 in the last 10 years according to the report monitoring health SDGs published in 2021

CHALLENGES REMAIN

THIS SDG IS ACHIEVED

THIS SDG IS ACHIEVED

Sources: SDGs health report 2017, 2018, 2019, 2020, 2021

Domain	Federal Ministries Initiatives/Strategies that Promote Target 3.9.1
Federal Laws & Ministerial Decree (s)	• Ministerial Decree. (98) of 2019 on using refuse derived fuel (RDF) produced from waste treatment procedures in cement plants by Ministry of Climate Change and Environment • Federal Law No. 24 Issued on 17/10/1999 on the protection and development of the environment.

Strategic plans /Initiatives/Pro-grams	• UAE national climate change framework for action on climate change and health 2019-2021
	• UAE commitment towards COP 26 health program
	• National Plan for the Prevention of Communicable Diseases by Ministry of Health and Prevention
	• National Policy for Reducing Transport Sector's Emissions
	• National Climate Change Adaptation Program
	• Climate Innovations Exchange (CLIX) Initiative
	• Ministry of Climate Change and Environment cooperates with its partners in (public/ private) sector, adopt initiatives to overcome the challenges related to 3.9.1, such as:
	  » a. The transition to a green economy
	  » b. Increasing the use of clean energy in different fields
	  » c. The sustainability of the transport sector
	  » d. The development of an air quality control network
	  » e. The reliance on intelligent technologies and solutions in monitoring types of pollutants
	• UAE Energy Strategy 2050
	• National Climate Change Plan of the UAE 2017-2050

↳ **Way Forward** (Evidence based Interventions) 3.9

• Clean household energy indicator
• Ambient air pollution indicators

TARGET 3.a

3.a   Age-standardized prevalence of tobacco smoking among persons 15 years and older (%)

Progress and trends in the UAE (comparable estimates)

3.a Age-standardized prevalence of tobacco smoking among persons 15 years and older (%)

The data shows that there was a decline in this indicator. Note: there was a challenge reporting a trend for 3.a due to variations in reporting targeted group (this trend reflects both genders). (the report was published in 2021)

CHALLENGES REMAIN

Sources: SDGs health report 2017, 2018, 2019, 2020, 2021, 2022

Domain	MOHAP Initiatives/Strategies that Promote Target 3.a
Federal Laws & Ministerial Decree (s)	• National UAE Vision 2021 related to tobacco • Federal Law No. (15) for the year 2009 concerning tobacco control and its implementing regulations • And its by law that had been issued by the cabinet decree No. 24 for year 2013.
Strategic plans /Initiatives/ Programs	• Development and implementation of strategic plan for tobacco control as a part of central plan of ministry of health. • Working with partners for proper and effective implementation of different articles of law and by law • Raising public awareness through mass and social media campaigns • Expanding cessation services through a network of clinics in PHC • Building capacity for PHC physicians to provide effective cessation services • Enhance organizations' capacity for tobacco control like other ministries and municipalities on implementation of the law and by law. • Working with Federal Tax Authority to reduce the demand on tobacco products by applying excise taxes on all tobacco products • Applying best practices in standard packaging of tobacco products • Promoting smoke free work places and banning all types of advertisement and promotion of tobacco products

↳ Way Forward (Evidence based Interventions)

- Data disaggregation (sex, age, socioeconomic)
- Raising taxes on tobacco
- Banning smoking in public places
- Use of pictorial health warnings
- Bans on tobacco advertising
- Controlling the illicit trade in tobacco products
- Identifying alternative crops to tobacco farming
- Preventing sales to and by minors
- Collecting and sharing data on tobacco use and prevention efforts.

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.

TARGET 3.b

3.b.1 Proportion of the population with access to affordable medicines and vaccines on sustainable basis

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

Progress and trends in the UAE (comparable estimates)

3.b.1 includes DTP3, MCV2 & PCV3 by the Nationally Recommended Age

Legend: DTP3, MCV2, PCV3 (years 2015–2019)

3.b indicator reflects the coverages of three main immunizations: DTP3, MCV2 & PCV3

THIS SDG IS ACHIEVED

Sources: SDGs health report 2017, 2018, 2019, 2020, 2021

Domain	MOHAP Initiatives/Strategies that Promote Target 3.b.1
Federal Laws & Ministerial Decree(s)	• Ministerial Decree No. (28) of 2018 regarding the registration of innovative and rare medicines • Federal Law No. 14 of 2014 Concerning the Control of Communicable Diseases • Decision of the Cabinet No. (33) for the year 2016 in the Executive Regulation of Federal Law No. 14 of 2014 on the Control of Communicable Diseases
Strategic plans /Initiatives/ Programs **Immunization:**	• National Policy on vaccinations, 2020 • COVID 19 National Vaccination Plan • Participating in researches and clinical trials to develop COVID 19 vaccines • Continuation of routine vaccination services during COVID 19 pandemic and developing creative tools to reach the target groups such as drive through vaccination • Developing and updating vaccination programs according to international standards and best practices • Tateem app: it is an children immunization management and reminder app • Reporting harmful medicines in which individuals can report any harmful medicine to MOHAP through its hotline 80011111. • Developing an electronic system for public health called SPHERE that will include the registry data for immunization records of the population and AEFI notifications as well as to provide dashboards for immunization indicators
Medicines for communicable and non-communicable diseases:	• The UAE RADR Scheme is vital in helping the MOHAP monitor the safety of all healthcare products in the UAE to ensure they are acceptably safe for patients and those that use them. Reports can be made for all medicines including vaccines, blood factors and immunoglobulins, herbal medicines and homeopathic remedies available on the UAE market. • Studies were conducted to assess the availability of essential medicines and NCDs medicines in all health facilities showed that the availability is 100%.

↳ **Way Forward** (Evidence based Interventions)

- UHC tracer (services accesses) to affordable medicines and vaccines
- Promoting the exchange of information and looking at greater convergence and harmonization of systems
- Promotion collaboration with key partners (such as WTO and WIPO) to support Member States in the areas of intellectual property management
- Innovation and access to medical products by increasing transparency on the patenting of essential medicines and addressing patent barriers to access.
- Supporting the strategy of a multisectoral and all health approach.
- Investing in the researches that support the development and identifications of gaps.

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

Domain	MOHAP Initiatives/Strategies that Promote Target 3.b.2
Federal Laws & Ministerial Decree(s)	• UAE Cabinet Decree for the establishment of National Center Research. • Ministerial Degree No. (250) in May 2020 on the same issue.
Achievements related to target	• Establishment of national center for health research. • Development of national health research strategy including development of unified policies and regulations. • Identification of health research priorities. • Development of national guidelines and procedures for human health research ethics approval. • Publishing in 2020, a bibliometric study of research outputs as a measure of health research activity, quality and international engagement from 2014 to 2018. • More than 2200 health studies were published in the research bank. • More than 74 total health surveys and health studies conducted between 2019 and 2021 for decision making and strategic planning. • Reporting on more than 400 health indicators regionally and internationally. • According to WHO score analysis for UAE, UAE got the highest score in the Eastern Mediterranean Region in terms of governance, availability, validity, quality and utilization for decision making.

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

TARGET 3.c

3.c.1 Health worker density and distribution (Doctors, Nurses, Dentists,Pharmacists)

Progress and trends in the UAE

Year/ Indicator	Density of physicians (per 10 000 population)	Density of nursing & Midwifery personnel (per 10 000 Population)	Density of dentistry personnel (per 10 000 population)	Density of Pharmacists (per 10 000 population)
2019	26.0	59.0	6.6	8.8
2020	26.7	59.0	6.9	8.8

Sources: SDGs health report 2020, 2021

Domain	Federal Ministries Initiatives/Strategies that Promote 3.c
Legislations (Federal Laws, Cabinet Decisions and Ministerial Resolutions)	• Human Resources Legislation: Decree by Federal Law No. (11) of the year 2008, Concerning Human Resources in the Federal Government and its amendments Federal Decree - Law No. (47) of 2021 regarding unified labor rules for work in the United Arab Emirates Decree by Federal Law No. (33) of 2021, on the regulating of labor relations Legislation related to Human resources in the Health sector • Federal Laws: Federal Law No. (5) of 2019 On the Regulation of the Practice of the Human Medicine Profession Federal Decree - Law No (4) of 2016 regarding medical liability Federal Law No. (8) of Year 2019 On Medical Products, the Profession of Pharmacy and Pharmaceutical Facilities Federal Law No. (5) of 1984 regarding the practice of some medical professions by non-physicians and pharmacists.
Cabinet Decisions:	• Cabinet Decision No. 9 of 2017 about training graduates of the Faculty of Medicine and medical professions who are not doctors and pharmacists • Cabinet Decision No. (67) for the year 2020 regarding the executive regulations Federal Law No. (5) of 2019 regulating the practice of the profession of human medicine • Cabinet Decision No. (90) of 2021 regarding the executive regulations of Federal Law No. (8) of 2019 regarding medical products, the pharmacy profession and pharmaceutical facilities • Cabinet Decision No. (20) of 2017 on the adoption of standards for the licensing of health professionals at the UAE level
Ministerial Resolutions:	• Ministerial Resolution No. (1318) of 2017 amending some unified standards for licensing health professions at the state level • Ministerial Resolution No. (288) of 2020 regarding the amendment of the unified standards for licensing health professions • Ministerial Resolution (230) for the year 2020 regarding allowing health professionals to transfer to work for any health authority • Resolution No. (40) of 2019 regarding the executive regulations for a decree-law on medical liability. • Ministerial Resolution No. (14) of 2021 regarding the adoption of the Patient Rights and Duties Charter. • Ministerial Resolution No. (488) for the year 2018 on the adoption of conditions and controls for the training of graduates of medical colleges and medical professions from non-citizens in health facilities • Ministerial Resolution No (1448) of 2020 On Adoption of Code of Ethics and Professional Conduct for Health Professional • Ministerial Resolution No. (142) for the year 2018 concerning the definition of medical professions and related professions
Strategic plans /Initiatives/ Programs	• Establish a health account for the workforce • Promoting nursing profession

⤷ **Way Forward** (Evidence based Interventions) 3.c

• Accelerate progress towards UHC and the SDGs by ensuring adequate and equitable distribution of national health workers within strengthened health systems.

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

TARGET 3.d

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

Progress and trends in the UAE

3.d Average of 13 International Health Regulations core capacity scorest

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Sources: SDGs health report 2017, 2018, 2019, 2020, 2021

Domain	Federal Ministries Initiatives/Strategies that Promote 3.d
Federal & Ministerial Decree(s)	• Ministerial Resolution No. (326) for the year 2015 to form the National Committee for the implementation of the provisions of the International Health Regulations and the control of health pandemics • Federal Law No. (14) of 2014 concerning communicable diseases control. • Federal Law No (13) of 2020 concerning Public Health • Ministerial decision of the Pandemic Advisory Technical Group • The decision of formulation the diagnostic and treatment team for COVID-19, • Decision of genetic investigation team and of the COVID-19 Research Committee • The Decision of Second level of emergency for COVID 19 • The Gulf framework for the public health plan for emergency preparedness and response prepared by the ministry with partners and officially approved within the supreme statement of the leaders of the Gulf Cooperation Council
Initiatives/ Strategies	• The program of developing the examination of expatriate workers for the purpose of residence in the State • Occupational Health and Safety Program • Travellers Health Program • Strengthen national preparedness and response capacities for public health emergencies • Artificial Intelligence Initiative in Emergency Departments to Reduce Standby Time 2019 • IHR Leading the Task Force group for monitoring and verification of human epidemics within the preparation of capacity requirements of national readiness and preparedness (Administrative Resolution no 7565 of 2019) • Coordination with all ministries and relevant authorities in the country to reach the stage of recovery • Activating the national plan to deal with epidemics and acute respiratory diseases, which are followed in preparation for emergencies and during epidemics, before any local cases arise. • National Health Security Plan 2019-2023; Multi-sectoral health security action plan had been developed following completion of JEE and agreed among the diverse array of technical experts with engagement of all national stakeholders representing the 19 technical areas of the IHR framework. • GCC Framework for a Public Health Emergency Preparedness and Response Plan • GCC Guide to Preparedness and Response Plans for Epidemics and Pandemics • GCC Airports public health emergency plan • National Protocol For notification of Public Health Events: Circular on 04 April 2019 • Guide to the early health warning system in the Gulf Cooperation Council countries

Initiatives/ Strategies

- Guide to standardized health procedures at the cross-border Points of the GCC countries, according to the requirements of the International Health Regulations 2005

- 100% compliance for Notifying International Public Health concern in 2020.

- The initiative to conduct proactive checks to detect the emerging Covid virus 19 easily includes many groups and for free, which made the Emirates the first in the world in the number of tests performed compared to the number of residents

- Establishing an epidemiological surveillance system for infected cases and contacts at the highest levels and based on international standards for counting the number of injured and tracking contacts and the proportion of cases of injury, recovery and deaths

- Raise the capacity of hospitals, especially intensive care units, build field hospitals, and allocate isolation centers to obtain the necessary health care

- UAE National Climate Change Framework for action on Climate Change and Health 2019-2021.

- UAE commitments toward COP26 health program.

↳ **Way Forward** (Evidence based Interventions) 3.d

- Enhancing the resilience of national health systems, including through the integration of disaster risk management into health care and strengthening IHR implementation in all countries

- Effective emergency and disaster risk management policies and programs should be guided by comprehensive all-hazards and whole-of-society approaches across the emergency management cycle: prevention/mitigation, preparedness, response and recovery

- Further integration into an all-hazards emergency risk approach with indicators.

- Enhance the implementation of National health security plan 2019-2023

- Average of 13 International Health Regulations core capacity scores.

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