



UNITED ARAB EMIRATES
MINISTRY OF HEALTH & PREVENTION

UAE Comprehensive Health Indicators Book

WHO Core Indicators, SDGs & UHC - 2021

Definition & Results



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1. Preface

1.1 Document Overview

This document contains the metadata and year-wise values for the **80 WHO Core Indicators** obtained from the WHO Eastern Mediterranean Health Observatory and other WHO recognized sources.

The **indicator definitions** and **supporting data** provided here serve as guidance for the **selection** of **standard health indicators** for countries and partners stakeholders. They can use the appropriate indicators for **monitoring** their health priorities and capacities with the ultimate goal of **achieving** the Sustainable Development Goals (SDG) and Universal Health Coverage (UHC) **health milestones**. Owing to the indicator data set values, reliable and timely health information is facilitated for policy development, proper health management, evidence-based decision-making, rational use of resources and monitoring and evaluation of the public health situation, health care delivery and outcomes.

Acquisition and management of such comprehensive data requires strengthened **Health Information Systems(HIS)** basis which WHO has formulated a clear framework for HIS system assessment comprising of 81 indicators spread across below components:

- **Health determinants & risks:** These indicators include exposures responsible for a wide array of outcomes on a community level. These include: illiteracy, physical inactivity, tobacco use and environmental pollution.
- **Health Status:** These indicators cover a range of outcomes focusing on the coverage of essential health services and interventions to mitigate diseases.
- **Health System Response:** These indicators focus on the financial and strategic inputs for the care, control, prevention, treatment and support of diseases, such as the general government expenditure on health as a percent of general government expenditure. These indicators also capture programme outputs detailing the accessibility, quality, readiness, and safety of health services, for example, the distribution of health facilities offering specific services and the surgical wound infection rate.

Submission Timelines : Countries are requested to share their core health indicator values with WHO **annually at the end of second quarter (Q2)**.

1.2 Indicator Overview

For each of the 81 WHO Core Health Indicators the below set of metadata details are provided:

- **Indicator Name** : The unique nomenclature based identifier attributed to the particular WHO core indicator.
- **Indicator Additional Name** : An abbreviated or alternate name, if available, associated with the particular core indicator.
- **Definition** : The brief description of the core indicator which explains the conditions needed for calculating the desired values and outcomes for the given indicator along with additional information facilitating clear indicator comprehension.
- **Measurement Frequency** : This defines the regularity with which the data for the particular core indicator is collected and measured , For Eg: Annually, Monthly , Every 'n' (number) years etc.
- **Primary Data Sources** : For each indicator primary data sources have been recommended by WHO thereby providing probable guidelines to countries for collecting data from various recognized sources such as governmental or administrative agencies, registries, annual reports, surveys etc.
- **Alternate Data Sources** : On account of potential data unavailability with Primary Data Sources, WHO have also advised on alternate data sources for successful data collection.
- **UAE Data Sources** : In relation to the WHO advised data sources we have put forth the potential UAE data sources for the respective indicators cutting across various federal and regional ministerial and external entities.

2. Indicator List

#	Category	Sub-Category	Indicators
1	Health determinants and risks	Demographic and socioeconomic determinants	Population size
2			Population living in urban areas (Percentage)
3			Population growth rate
4			Life expectancy at birth
5			Total fertility rate
6			Adolescent fertility rate (per 1000 girls aged 15-19 years)
7			Net primary School enrolment
8			Population below the international poverty line
9			Youth literacy rate
10			Access to improved drinking water
11			Access to improved sanitation facilities
12		Risk Factors	Incidence of low birth weight among newborns
13			Exclusive breastfeeding rate 0-5 months of age
14			Children under 5 who are stunted (moderate and severe)
15			Children under 5 who are wasted (moderate and severe)

16			Children under 5 who are overweight
17			Children under 5 years who are obese
18			Overweight in adolescents (13-18 years)
19			Obesity in adolescents (13-18 years)
20			Overweight in adults (18+ years)
21			Obesity in adults (18+ years)
22			Tobacco use among persons (13-15 years)
23			Tobacco use among persons 15 + years
24			Insufficient physical activity in adolescents (13-18 years)
25			Insufficient physical activity in adults (18+ years)
26			Raised blood glucose among adults (18+ years)
27			Raised blood pressure among adults (18+ years)
28			Anemia among women of reproductive age
29	Health Status	Mortality	Neonatal mortality rate (per 1000 live births)
30			Infant mortality rate
31			Under -five mortality
32			Maternal mortality ratio

33			Mortality rate by main cause of death, (age standardized)
34			Mortality between age groups 30 and 70 from cardiovascular diseases, cancer, diabetes, or chronic respiratory diseases
35			Mortality rate due to road traffic injuries (per 100 000 population)
36			Mortality rate attributed to household and ambient air pollution
37			Mortality rate attributed to unsafe water, unsafe sanitation and lack of hygiene
38			Suicide mortality rate
39		Morbidity	Cancer incidence, by type of cancer (per 100 000 population)
40			Tuberculosis case notification rate
41			Estimated number of new HIV infections
42			Number of newly reported HIV cases
43			Hepatitis B incidence
44			Incidence of confirmed malaria cases
45			Total number of reported cases - Malaria
46			Incidence of measles cases
47		Neglected tropical diseases (NTDS)	Number of people requiring interventions against neglected tropical diseases

48	Health System Response	Health Expenditure	Per capita total health expenditure
49			Out-of-pocket expenditure as % of total health expenditure
50			Domestic General Government Health Expenditure (GGHE-D) as % General Government Expenditure (GGE)
51			Population with catastrophic health expenditure
52			Population impoverished due to out-of-pocket health expenditure
53		Health Workforce	Density of health workers: a-Physicians, b-nurses, c-midwives, d-pharmacists, f-dentists
54			Density of recent graduates of registered health profession educational institutions a-Physicians, b-nurses, c-midwives, e-dentists, d-pharmacists
55		Health System Capacity	International Health Regulations (IHR) technical areas
56			IHR Annually reporting
57			Joint external evaluation of IHR capacity
58			UHC service coverage index
59		Medicines and medical devices	Availability of selected essential medicines
60			Availability of six selected medical devices
61		Service delivery	Density of primary health care facilities (public and private)

62			Hospital bed density
63			Surgical wound infection rate
64			Annually number of outpatient department visits, per capita
65		Service Coverage	Demand for family planning satisfied with modern methods
66			Antenatal care coverage (1+)
67			Antenatal care coverage (4+)
68			Births attended by skilled health personnel
69			DPT3/Pentavalent Immunization coverage rate
70			Measles immunization coverage rate (MCV1)
71			Percentage of suspected malaria cases that have had a diagnostic test
72			Percentage of population sleeping under insecticide-treated nets ITN
73			Percentage of key populations at higher risk who have received an HIV test in the past 12 months and know their results
74			Adults and children currently receiving ARV therapy among all adults and children living with HIV (%)
75			TB treatment success rate
76			Children under 5 with diarrhea receiving

			oral rehydration therapy
77			Coverage of service for severe mental health disorders
78		Health Information System	Births registration coverage
79			Deaths registration coverage, cause of death using ICD

3. Indicator Meta Data

Present below are the metadata for the 80 WHO Core Health indicators cutting across the Health Determinants & Risks, Health Status and Health System Response categories.

Note –

1. Metadata for certain Indicators is blank as data points are awaited from WHO or concerned MOHAP department.

2. Indicators where **Year is not specified** indicates its related to year **2021**.

3.1 Health Determinants & Risks

3.1.1 Demographic and socioeconomic determinants

Population Size	
Definition	De facto population in a country, area or region as of 1 July of the year indicated. Figures are presented in thousands.
Numerator	Total number of population per 1000
Denominator	NA
Value	9282 (2020)
Measurement Frequency	Annually
Primary Data Sources	Civil registration with complete coverage
Alternate Data Sources	Annually statistical yearbooks
UAE Data Sources	Federal Competitiveness and Statistics Center

Population living in urban areas (Percentage)	
Definition	The percentage of de facto population living in areas classified as urban according to the criteria used by each area or country as of 1 July of the year indicated.
Numerator	Total number of people living in urban areas
Denominator	Total population
Value	Data not reported for this indicator in UAE
Measurement Frequency	Annually if country has complete population registry or Every 10 years as per UN standards for conducting census
Primary Data Sources	Civil registration Population census
Alternate Data Sources	NA
UAE Data Sources	Federal Competitiveness and Statistics Center

Population growth rate	
Additional Name	Population growth
Definition	Average exponential rate of Annually growth of the population over a given period.
Numerator	Total number of population at t time (period of time)
Denominator	Total number of population at 0 time start of the time period
Value	1.0%
Measurement Frequency	Annually
Primary Data Sources	Civil registration with complete coverage Population census
Alternate Data Sources	Annually statistical yearbooks
UAE Data Sources	Federal Competitiveness and Statistics Center

Life expectancy at birth	
Definition	The average number of years that a newborn could expect to live, if he or she were to pass through life exposed to the gender- and age-specific death rates prevailing at the time of his or her birth, for a specific year, in a given country, territory, or geographic area.
Numerator	From life tables
Denominator	From life tables
Value	79.9 years (2018)
Measurement Frequency	Annually
Primary Data Sources	Civil registration with high coverage
Alternate Data Sources	Household surveys Population census Sample registration system
UAE Data Sources	Federal Competitiveness and Statistics Center

Life Expectancy at Birth – By Gender (Years)	
Male	78.0
Female	81.6

Total fertility rate	
Definition	<p>Average number of children that a hypothetical cohort of women would have at the end of their reproductive period if they were subject during their whole lives to the fertility rates of a given period and if they were not subject to mortality.</p> <p>It is expressed as children per woman.</p>
Numerator	Sum of age specific birth rates (5-year age groups between 10 and 49) for female residents of a specified geographic area (nation, state, county, etc.) during a specified time period (usually a calendar year) multiplied by 5
Denominator	Numerator is divided by 1000
Value	2.26 per woman (2018)
Measurement Frequency	Annually if based on civil registration and vital statistics (CRVS); once every 3–5 years if based on surveys and census
Primary Data Sources	Civil registration and vital statistics systems with high coverage Population census
Alternate Data Sources	Household survey Annually statistical yearbooks Facility-based records
UAE Data Sources	Federal Competitiveness and Statistics Center



Adolescent fertility rate (per 1000 girls aged 15-19 years)	
Additional Name	Adolescent fertility rate
Definition	<p>Annually number of births to women aged 15-19 years per 1,000 women in that age group.</p> <p>It is also referred to as the age-specific fertility rate for women aged 15-19 years.</p>
Numerator	Number of live births to women aged 15–19 years
Denominator	Exposure to childbearing by women aged 15–19 years
Value	3.8 per 1000 girls (2020)
Measurement Frequency	<p>Annually CRVS data with 90% coverage</p> <p>Population based survey are implemented 3-5 years</p>
Primary Data Sources	Civil registration with complete coverage
Alternate Data Sources	<p>Household surveys</p> <p>population census</p>
UAE Data Sources	Federal Competitiveness and Statistics Center



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 programmes.

Net primary School enrolment	
Additional Name	Net primary school enrolment ratio (%)
Definition	<p>Number of children of official primary school age who are enrolled in primary education as a percentage of the total children of the official school age population.</p> <p>The enrolment of the same age-group at secondary level is also included.</p>
Numerator	Number of children of official primary school age who are enrolled in primary education
Denominator	Total children of the official school age population
Value	99.40 per 100 school-age children (2015)
Measurement Frequency	Annually or depending on data availability
Primary Data Sources	<p>Administrative records</p> <p>Population census</p>
Alternate Data Sources	<p>Population based surveys</p> <p>School surveys</p>
UAE Data Sources	Federal Competitiveness and Statistics Center

Net primary School enrolment – By Gender	
Male	99.60
Female	99.10

Population below the international poverty line	
Definition	<p>The national poverty rate is the percentage of the total population living below the national poverty line (less than \$1.90 a day).</p> <p>The rural poverty rate is the percentage of the rural population living below the national poverty line (or in cases where a separate, rural poverty line is used, the rural poverty line).</p> <p>Urban poverty rate is the percentage of the urban population living below the national poverty line (or in cases where a separate, urban poverty line is used, the urban poverty line).</p> <p>Estimates are based on population-weighted subgroup estimates from household surveys.</p>
Numerator	Total household income or consumption
Denominator	Household size or “effective” household size (based on household composition)
Value	0.01% (2019)
Measurement Frequency	3-5 years
Primary Data Sources	Nationally representative household surveys
Alternate Data Sources	World Bank reports
UAE Data Sources	National Health Survey

Youth Literacy Rate	
Additional Name	Youth literacy rate (15-24 years)
Definition	<p>The percentage of population aged 15-24 years who can both read and write with understanding a short simple statement on his/her everyday life.</p> <p>Generally, 'literacy' also encompasses 'numeracy', the ability to make simple arithmetic calculations.</p>
Numerator	Number of literates aged 15-24 years
Denominator	Population aged 15-24 years
Value	99.43% (2015)
Measurement Frequency	Annually
Primary Data Sources	National census and national representative surveys
Alternate Data Sources	Administrative records
UAE Data Sources	Federal Competitiveness and Statistics Center

Youth Literacy Rate – By Gender (%)	
Male	99.64
Female	99.11



Access to improved drinking water	
Additional Name	Percentage of population using safely managed drinking-water services
Definition	<p>The percentage of population using an improved drinking water source.</p> <p>An improved drinking water source, by nature of its construction and design, is likely to protect the source from outside contamination, in particular from faecal matter.</p> <p>Improved drinking water sources include: Piped water into dwelling, plot or yard; Public tap/stand pipe; Tube well/borehole; Protected dug well; Protected spring and Rainwater collection.</p>
Numerator	Population using safely managed drinking-water services
Denominator	Total population
Value	100% (2020)
Measurement Frequency	Population based survey are implemented 3-5 years, estimation would be updated Annually
Primary Data Sources	Household surveys Population census
Alternate Data Sources	Administrative reporting system
UAE Data Sources	Federal Competitiveness and Statistics Center

Access to improved sanitation services	
Additional Name	Percentage of population using safely managed sanitation services
Definition	<p>The percentage of population using an improved sanitation facility.</p> <p>An improved sanitation facility is one that hygienically separates human excreta from human contact.</p> <p>Improved sanitation facilities include: Flush or pour-flush to piped sewer system, septic tank or pit latrine; Ventilated improved pit latrine; Pit latrine with slab and Composting toilet.</p>
Numerator	Population using safely managed sanitation services
Denominator	Total population
Value	100% (2020)
Measurement Frequency	Population based survey are implemented 3-5 years, estimation would be updated Annually
Primary Data Sources	Household surveys Population census
Alternate Data Sources	Administrative reporting system
UAE Data Sources	Federal Competitiveness and Statistics Center

3.1.2 Risk Factors

Incidence of low birth weight among newborns	
Definition	The percentage of live births that weigh less than 2,500 g out of the total of live births during the same time period.
Numerator	Number of live-born neonates with weight less than 2500 g at birth.
Denominator	Number of live births
Value	11.2% (2020)
Measurement Frequency	Continuous
Primary Data Sources	Population-based health surveys and data from administrative/information systems
Alternate Data Sources	Routine facility information systems
UAE Data Sources	MOHAP – Statistics & Research Center

Exclusive breastfeeding rate 0-5 months of age	
Additional Name	Exclusive breastfeeding rate
Definition	<p>Percentage of infants 0–5 months of age who are fed exclusively with breast milk = (Infants 0–5 months of age who received only breast milk during the previous day / Infants 0–5 months of age) x 100. Current status data are used.</p> <p>Vitamins and mineral drops or medicines are not counted.</p>
Numerator	Number of infants 0–5 months of age who are exclusively breastfed
Denominator	Total number of infants 0–5 months of age surveyed
Value	59.7% (2018)
Measurement Frequency	Every 3-5 years
Primary Data Sources	Household surveys Specific population surveys
Alternate Data Sources	Facility registration system
UAE Data Sources	MOHAP – Statistics & Research Center



Children under 5 who are stunted (moderate and severe)	
Additional Name	Children under 5 who are stunted
Definition	Percentage of stunted (moderate and severe) children aged 0–59 months (moderate = height-for-age below -2 standard deviations from the WHO Child Growth Standards median; severe = height-for-age below -3 standard deviations from the WHO Child Growth Standards median).
Numerator	Number of children aged 0–59 months who are stunted
Denominator	Total number of children aged 0–59 months who were measured
Value	2.6% (2019)
Measurement Frequency	Every 3-5 years
Primary Data Sources	Population based household surveys Specific population surveys Surveillance systems
Alternate Data Sources	Population-based health surveys with nutrition modules National surveillance systems
UAE Data Sources	Nutrition Survey



2.2

By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons.



Children under 5 who are wasted (moderate and severe)	
Definition	Percentage of wasted (moderate and severe) children aged 0–59 months (moderate = weight-for-height below -2 standard deviations of the WHO Child Growth Standards median; severe = weight-for-height below -3 standard deviations of the WHO Child Growth Standards median).
Numerator	Number of children aged 0–59 months who are wasted
Denominator	Total number of children aged 0–59 months who were measured
Value	0.7% (2019)
Measurement Frequency	Every 3-5 years
Primary Data Sources	Population based household surveys Specific population surveys Surveillance systems
Alternate Data Sources	Population-based health surveys with nutrition modules National surveillance systems
UAE Data Sources	Nutrition Survey



2.2

By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons.

Children under 5 who are overweight	
Definition	Percentage of overweight (weight-for-height above +2 standard deviations of the WHO Child Growth Standards median) among children aged 0-5 years.
Numerator	Number of children aged 0–59 months who are overweight
Denominator	Total number of children aged 0–59 months who were measured
Value	Data not reported for this indicator in UAE
Measurement Frequency	Every 3-5 years
Primary Data Sources	Population based household surveys Specific population surveys Surveillance systems
Alternate Data Sources	Population-based health surveys with nutrition modules National surveillance systems
UAE Data Sources	Nutrition Survey

Children aged under 5 years who are obese	
Definition	Percentage of obesity (weight-for-height above +3 standard deviations of the WHO Child Growth Standards median) among children aged 0-59 months.
Numerator	Number of children aged 0-59 months that are over three standard deviations from the median weight-for-height of the WHO Child Growth Standards
Denominator	Total number of children aged 0-59 months that were measured
Value	Data not reported for this indicator in UAE
Measurement Frequency	Every 5 years
Primary Data Sources	National population-based surveys with nutrition modules Specific population surveys
Alternate Data Sources	National surveillance systems
UAE Data Sources	Nutrition Survey

Overweight in adolescents (13-18 years)	
Definition	<p>The percent of adolescents' population with body mass index (BMI) ≥ 25 Kg/m².</p> <p>According to the WHO growth reference for school aged children and adolescents, overweight - one standard deviation BMI for age and sex.</p> <p>Overweight is ≥ 1 standard deviation BMI for age and sex. Height and weight are measured, expressed as Kg/m².</p>
Numerator	Number of surveyed adolescents population with BMI ≥ 25 Kg/m ²
Denominator	Total number of adolescents surveyed during a specified period
Value	38.4% (2016)
Measurement Frequency	Annually/ every 3 - 5 years
Primary Data Sources	Population based survey (nationally preventative) Global School Health Survey
Alternate Data Sources	These include: national specific population surveys conducted by the country's national surveillance system, national statistical office, or any other relevant agency, or by research groups (and include academic research or studies implemented by nongovernment)
UAE Data Sources	School Health Survey

Obesity in adolescents (13-18 years)	
Additional Name	Obesity in adolescents (13-18 years)
Definition	For 5-19 years, obesity is defined as body mass index (BMI)-for-age above two standard deviations of the WHO Growth Reference for School-aged Children and Adolescents median.
Numerator	Number of obese adolescents in surveyed population
Denominator	Total number of surveyed population in same age group (obese and non-obese)
Value	16.6% (2016)
Measurement Frequency	Annually in routine data/ every 3 - 5 years survey data
Primary Data Sources	Population based survey (nationally preventative) Global School Health Survey
Alternate Data Sources	National specific population surveys conducted by the country's national surveillance system, national statistical office, or any other relevant agency, or by research groups (and include academic research or studies implemented by nongovernmental organizations)
UAE Data Sources	School Health Survey

Overweight in adults (18+ years)	
Definition	Percent of adults (18+ years) who are overweight (defined as having a BMI ≥ 25 kg/m ² . BMI = weight (kg) / [height (m)] ² . Height and weight are measured expressed as kg/m ² .
Numerator	Number of respondents 18+ years who are overweight
Denominator	All respondents of the survey aged 18+ years during a specified period
Value	67.9% (2019)
Measurement Frequency	At least every 5 years
Primary Data Sources	Population based survey (preferably nationally representative) in which height and weight were measured Stepwise survey for Non-communicable diseases
Alternate Data Sources	National specific population surveys conducted by the country's national surveillance system, or any other relevant agency, or by research groups (and include academic research or studies implemented by nongovernmental organizations).
UAE Data Sources	National Health Survey

Obesity in adults (18+ years)	
Definition	<p>Percent of adults (18+ years) who are obese (defined as having BMI ≥ 30 kg/m²).</p> <p>BMI = weight (kg) / [height (m)]².</p> <p>Height and weight are measured and expressed as Kg/m².</p>
Numerator	Number of respondents aged 18+ years who are obese
Denominator	All respondents of the survey aged 18+ years
Value	27.8% (2019)
Measurement Frequency	Annually using routine data/every 5 years using survey data
Primary Data Sources	Population based survey (preferably nationally representative) in which height and weight were measured.
Alternate Data Sources	National specific population surveys conducted by the country's national surveillance system, national statistical office, or any other relevant agency/ministries, or by research groups (and include academic research or studies implemented)
UAE Data Sources	National Health Survey

Tobacco use among persons (13-15 years)

Additional Name	<p>Age standardized prevalence of current tobacco use among persons aged 13-15 years</p> <p>Prevalence of current tobacco smoking among youth 13-15 years (%).</p> <p>The youth prevalence rate, expressed as a percentage of the total youth population, refers to the number of current smokers of any tobacco product per 100 of the youth population in the country, resulting from the latest youth tobacco use survey (or survey which asks tobacco use questions).</p> <p>When this prevalence rate is multiplied by the country's youth population, the result is an estimate of the number of current smokers of any tobacco product in the country.</p>
Definition	<p>The age range to which the prevalence data for the youth refer is 13-15 years.</p> <p>The definition of "current smoker" varies between surveys, but often means someone who smokes any tobacco product either daily or occasionally at least once during a defined period leading up to the survey date.</p> <p>"Tobacco smoking" includes the consumption of cigarettes, bidis, cigars, cheroots, pipes, shisha (water pipes), fine-cut smoking articles (roll-your-own), krekets, and any other form of smoked tobacco.</p>
Numerator	Number of current youth smokers (daily or less than daily) of any tobacco product in the population surveyed
Denominator	Total size of surveyed population aged 13-18 years (youth smokers and non-smokers)
Value	12.7% (2016)
Measurement Frequency	At least once every five years
Primary Data Sources	<p>National surveys implemented as part of international data collection initiatives, such as - Tobacco-specific surveys: Global Youth Tobacco Survey (GYTS);</p> <p>Non-tobacco-specific surveys: Global School-based Student Health Survey (GSHS)</p>

Alternate Data Sources	Specific population surveys
	National specific population surveys conducted by the country's national surveillance system, national statistical office, or any other relevant agency/ministries, or by research groups (and include academic research or studies implemented by nongovernmental organizations).
	If no national data are available, country estimates may be found in the WHO Global Health Observatory Data Repository.
UAE Data Sources	School Health Survey

Tobacco use among persons (13-15 years) – By Gender (%)	
Male	17.8
Female	7.7



Tobacco use among persons 15+ years

Additional Name	Age standardized prevalence of current tobacco use among persons aged 15+ years
Definition	<p>"Smoked tobacco products" includes the consumption of cigarettes, bidis, cigars, cheroots, pipes, shisha (water pipes), fine-cut smoking articles (roll-your-own), kreteks, and any other form of smoked tobacco.</p> <p>"Smokeless tobacco" includes moist snuff, plug, creamy snuff, dissolvable, dry snuff, gul, loose leaf, red tooth powder, snus, chimo, gutkha, khaini, gudakhu, zarda, quiwam, dohra, tuibur, nasway, naas/naswar, shammah, betel quid, toombak, pan (betel quid), iq'mik, mishri, tapkeer, tombol and any other tobacco product that is sniffed, held in the mouth, or chewed.</p> <p>Age standardized prevalence of current tobacco use among persons aged 15+ years (%).</p> <p>A current smoker is someone who either smokes every day (daily smoker) or who currently smokes but not every day (occasional or non-daily smoker).</p> <p>At a population level, the prevalence of current smokers for a country is calculated as (the number of respondents in a survey who indicated smoking every day + the number of respondents who indicated smoking occasionally) divided by the total number of respondents to the survey.</p>
Numerator	Number of current smokers 15 + years (daily or less than daily) of any tobacco product in the population surveyed
Denominator	Total size of surveyed population (Smokers and non-smokers)
Value	9.1% (2018)
Measurement Frequency	At least once every five years
Primary Data Sources	<p>National household surveys using standard methods across time, so that changes over time can be measured. Examples of such surveys include:</p> <ul style="list-style-type: none"> - Tobacco-specific surveys such as the Global Adult Tobacco

<p>Alternate Data Sources</p>	<p>Survey (GATS), - Multi-risk-factor surveys on noncommunicable diseases such as the WHO Stepwise Approach to Surveillance (WHO STEPS) Other health surveys such as the WHO Study on Global Ageing and Adult Health (SAGE), Demographic and Health Surveys (DHS), Multiple Indicator Cluster Survey (MICS)."</p> <p>National censuses, national health surveys, and other national household surveys that may be about other topics such as household expenditure. Such surveys may be conducted by the country's national statistical offices, or any other relevant agency, or by national or international research groups (and include academic research or studies carried out by nongovernmental organizations).</p> <p>If no recent national data are available, country estimates may be found in the WHO Global Health Observatory Data Repository.</p>
<p>UAE Data Sources</p>	<p>National Health Survey</p>

Tobacco use among persons 15+ years – By Gender (%)	
Male	15.7
Female	2.4



3.a

Strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate.

Insufficient physical activity in adolescents (13-18 years)	
Additional Name	Age-standardized prevalence of insufficiently physically active persons aged 13-18 years
Definition	<p>Age-standardized prevalence of insufficiently physically active persons aged 13-18 years (percentage of adults aged 13-18 years not meeting any of the following criteria: 150 minutes of moderate-intensity physical activity per week; 75 minutes of vigorous-intensity physical activity per week; an equivalent combination of moderate- and vigorous-intensity physical activity accumulating at least 600 metabolic equivalent minutes per week (minutes of physical activity can be accumulated over the course of a week but must be of a duration of at least 10 minutes)).</p> <p>*Metabolic equivalent (MET) is the ratio of a person's working metabolic rate relative to the resting metabolic rate. One metabolic equivalent is defined as the energy cost of sitting quietly and is equivalent to a caloric consumption of 1 kcal/kg per hour.</p> <p>Physical activities are frequently classified by their intensity, using the metabolic equivalent as a reference.</p>
Numerator	<p>Number of respondents where all three of the following criteria are true: weekly minutes* of vigorous activity < 75 minutes; weekly minutes* of moderate activity < 150 minutes; weekly metabolic equivalent minutes** < 600</p> <p>* Weekly minutes are calculated by multiplying the number of days on which vigorous/moderate activity is done by the number of minutes of vigorous/moderate activity per day</p> <p>** Weekly metabolic equivalent minutes are calculated by multiplying the weekly minutes of vigorous activity by 8 and the number of weekly minutes of moderate activity by 4 and then adding these two results together</p>
Denominator	All respondents of the survey aged 13-18 years
Value	26.8% (2016)
Measurement Frequency	Every 3-5 years
Primary Data Sources	National representative population-based survey

Alternate Data Sources	National surveillance system, or any other relevant agency, or by research groups (and include academic research or studies implemented by nongovernmental organizations). If no national data are available, country estimates may be found in the WHO Global Health Observatory Data Repository.
UAE Data Sources	School Health Survey

Insufficient physical activity in adults (18+ years)	
Additional Name	Age-standardized prevalence of insufficiently physically active persons aged 18+ years
Definition	<p>Age-standardized prevalence of insufficiently physically active persons aged 18+ years (percentage of adults aged 18+ years not meeting any of the following criteria: 150 minutes of moderate-intensity physical activity per week; 75 minutes of vigorous-intensity physical activity per week; an equivalent combination of moderate- and vigorous-intensity physical activity accumulating at least 600 metabolic equivalent minutes per week (minutes of physical activity can be accumulated over the course of a week but must be of a duration of at least 10 minutes).</p> <p>*Metabolic equivalent (MET) is the ratio of a person's working metabolic rate relative to the resting metabolic rate. One metabolic equivalent is defined as the energy cost of sitting quietly and is equivalent to a caloric consumption of 1 kcal/kg per hour.</p> <p>Physical activities are frequently classified by their intensity, using the metabolic equivalent as a reference</p>
Numerator	<p>Number of respondents where all three of the following criteria are true: weekly minutes* of vigorous activity < 75 minutes; weekly minutes* of moderate activity < 150 minutes; weekly metabolic equivalent minutes** < 600</p> <p>* Weekly minutes are calculated by multiplying the number of days on which vigorous/moderate activity is done by the number of minutes of vigorous/moderate activity per day</p> <p>** Weekly metabolic equivalent minutes are calculated by multiplying the weekly minutes of vigorous activity by 8 and the</p>

	number of weekly minutes of moderate activity by 4 and then adding these two results together
Denominator	All respondents of the survey aged 18+ years
Value	70.8% (2018)
Measurement Frequency	Every 3- 5 years
Primary Data Sources	National representative population-based survey
Alternate Data Sources	<p>National surveillance system, or any other relevant agency, or by research groups (and include academic research or studies implemented by nongovernmental organizations).</p> <p>If no national data are available, country estimates may be found in the WHO Global Health Observatory Data Repository.</p>
UAE Data Sources	National Health Survey

Raised blood glucose among adults (18+ years)	
Additional Name	Age-standardized prevalence of raised blood glucose/diabetes among persons aged 18+ years or on medication for raised blood glucose
Definition	<p>Percent of defined population with fasting glucose ≥ 126 mg/dl (7.0 mmol/L) or on medication for raised blood glucose among adults 18+ years.</p> <p>Fasting blood glucose should be measured not self-reported, and measurement must be taken after the person has fasted at least eight hours.</p> <p>There are two main blood chemistry screening methods dry and wet chemistry.</p> <p>Dry chemistry uses capillary blood taken from finger and used in rapid diagnostic test.</p> <p>Wet chemistry uses a venous blood sample with laboratory based test.</p> <p>Most population based surveys used dry chemistry rapid diagnostic tests to gather fasting blood glucose values.</p>
Numerator	<p>Number of respondents 18+ years with fasting plasma glucose value ≥ 126 mg/dl (7.0 mmol/L) or on medication for raised blood glucose</p> <p>Fasting blood sugar must be measured, not-self reported, and measurements must be taken after the person has fasted for at least eight hours</p>
Denominator	All respondents of the survey aged 18+ years
Value	11.8% (2018)
Measurement Frequency	At least every 5 years
Primary Data Sources	Population based survey (nationally representative)
Alternate Data Sources	National surveillance system
UAE Data Sources	National Health Survey

Raised blood pressure among adults (18+ years)	
Additional Name	Age-standardized prevalence of raised blood pressure among persons aged 18+ years
Definition	<p>Age standardized prevalence of raised blood pressure among persons aged 18 years (defined as systolic blood pressure ≥ 140mmHg and/or diastolic blood pressure ≥ 90mmHg).</p> <p>Blood pressure must be measured, not self-reported. Ideally three measures should be taken, (first reading to be dropped and the second and third measures are averaged).</p> <p>Respondents with measured blood pressure where systolic blood pressure ≥ 140 mmHg and/or diastolic blood pressure ≥ 90mmHg).</p> <p>Mean value of systolic and diastolic blood pressure among surveyed population.</p>
Numerator	<p>Number of respondents with systolic blood pressure ≥ 140mmHg or diastolic blood pressure ≥ 90mmHg)</p> <p>Ideally the blood measurements should be taken and the average systolic and diastolic readings of the second and third measures should be used in this calculation</p>
Denominator	All respondents of survey aged 18+ years
Value	28.8% (2018)
Measurement Frequency	At least every 5 years
Primary Data Sources	Population based survey (preferably nationally representative)
Alternate Data Sources	National surveillance system
UAE Data Sources	National Health Survey

Anemia among women of reproductive age	
Additional Name	Anaemia prevalence in women of reproductive age
Definition	Percentage of women aged 15-49 years with a haemoglobin level less than 120g/L for non-pregnant women and lactating women, and less than 110g/L for pregnant women, adjusted for altitude and smoking.
Numerator	Number of women aged 15-49 years with haemoglobin levels below the indicated cut-off, adjusted for altitude and smoking
Denominator	Total number of women aged 15-49 years with haemoglobin levels assessed during a specified period
Value	24.3% (2019)
Measurement Frequency	Population based survey are implemented 3-5 years
Primary Data Sources	Population based health survey (preferably nationally representative)
Alternate Data Sources	NA
UAE Data Sources	National Health Survey

3.2 Health Status

3.2.1 Mortality



Neonatal mortality rate (per 1000 live births)	
Additional Name	Neonatal mortality
Definition	<p>Number of deaths during the first 28 completed days of life per 1000 live births in a given year or other period.</p> <p>May be subdivided into early neonatal deaths, occurring during the first 7 days of life, and late neonatal deaths, occurring after the 7th day but before the 28th completed day of life.</p> <p>Probability that a child born in a specific year or period will die during the first 28 completed days of life if subject to age-specific mortality rates of that period, expressed per 1000 live births.</p>
Numerator	Number of children who died during the first 28 days of life
Denominator	Number of live births (years of exposure)
Value	2.4 (2020)
Measurement Frequency	Annually, if based on registration system; otherwise, less frequent (3–5 years based on surveys)
Primary Data Sources	Civil registration with high coverage
Alternate Data Sources	Household surveys Population census
UAE Data Sources	MOHAP – Statistics & Research Center



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 Indicators.

Infant mortality rate	
Additional Name	Infant mortality rate (probability of dying between birth and age of 1 year per 1000 live births)
Definition	The probability of a child born in a specific year or period dying before reaching the age of one, if subject to age-specific mortality rates of that period, expressed as a rate per 1000 live births.
Numerator	Number of children who died before their first birthday (0-11 months of age)
Denominator	Number of live births (years of exposure)
Value	4 (2020)
Measurement Frequency	Annually if based on registration system; otherwise, less frequent (3–5 years based on surveys)
Primary Data Sources	Civil registration with high coverage
Alternate Data Sources	Household surveys, population census
UAE Data Sources	MOHAP – Statistics & Research Center



Under - five mortality	
Additional Name	Under- five mortality rate (probability of dying by age 5 per 1000 live births)
Definition	<p>The probability of a child born in a specific year or period dying before reaching the age of five, if subject to age-specific mortality rates of that period.</p> <p>Under-five mortality rate as defined here is strictly speaking not a rate (i.e. the number of deaths divided by the number of population at risk during a certain period of time) but a probability of death derived from a life table and expressed as rate per 1000 live births.</p>
Numerator	Number of deaths among children aged 0–4 years (0–59 months of age), broken down by age groups
Denominator	Number of live births (person-years of exposure)
Value	5.1 (2020)
Measurement Frequency	Annually
Primary Data Sources	Civil registration with complete coverage
Alternate Data Sources	Household surveys Population census
UAE Data Sources	MOHAP – Statistics & Research Center



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 Indicators.



Maternal mortality ratio	
Additional Name	Maternal mortality ratio (per 100 000 live births)
Definition	<p>The maternal mortality ratio (MMR) is the number of maternal deaths during a given time period per 100,000 live births during the same time-period.</p> <p>Maternal death refers to the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, from any cause related to or aggravated by the pregnancy or its management (from direct or indirect obstetric death), but not from accidental or incidental causes.</p> <p>Pregnancy-related death refers to the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the cause of death.</p> <p>Live birth refers to the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life - e.g. beating of the heart, pulsation of the umbilical cord or definite movement of voluntary muscles - whether or not the umbilical cord has been cut or the placenta is attached.</p> <p>Each product of such a birth is considered live born.</p>
Numerator	Number of maternal deaths
Denominator	Number of live births
Value	3.7 (2020)
Measurement Frequency	Annually for civil registration and every 3-5 years for survey
Primary Data Sources	Civil registration with high coverage and medical certification of cause of death and regular assessment of misreporting and underreporting.
Alternate Data Sources	Sample registration with verbal autopsy Household surveys

	Population census Sample or sentinel registration systems Special studies.
UAE Data Sources	MOHAP – Statistics & Research Center



3.1

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

Mortality rate by main cause of death, (age standardized)	
Additional Name	Age-standardized mortality rate (per 100 000 population)
Definition	The age-standardized mortality rate is a weighted average of the age-specific mortality rates per 100 000 persons, where the weights are the proportions of persons in the corresponding age groups of the WHO standard population.
Numerator	Total Deaths per 100 000 population
Denominator	NA
Value	Present in below table
Measurement Frequency	Continuous
Primary Data Sources	Civil registration with complete coverage and medical certification of cause of death
Alternate Data Sources	Civil registration with complete coverage Household surveys Population census Sample or sentinel registration systems Special studies Surveillance systems
UAE Data Sources	MOHAP – Statistics & Research Center

Mortality rate by main cause of death (age standardized) – (2020)	
Category	Value
Communicable Diseases	33
Non-Communicable Diseases	117.42
Injuries	9.4



Mortality between age groups 30 and 70 from cardiovascular diseases, cancer, diabetes, or chronic respiratory diseases	
Definition	<p>Total number of death among 30-70 years due to specific cause (cardiovascular diseases, cancer, chronic respiratory disease and diabetes) per 10,000.</p> <p>Unconditional probability of dying between the exact ages 30 and 70 years from CVDs, cancers, diabetes, or chronic respiratory diseases.</p>
Numerator	Number of deaths between ages 30 and 70 years due to the four causes
Denominator	Number of years of exposure
Value	14.1 (2020)
Measurement Frequency	Annually for civil registration
Primary Data Sources	Civil registration with high coverage and medical certification of cause of death (vital statistics systems)
Alternate Data Sources	<p>Household surveys</p> <p>Population-based health surveys with verbal autopsy</p>



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.



Mortality rate from road traffic injuries (per 100 000 population)

Additional Name

Mortality rate from road traffic injuries

Definition

Number of road traffic fatal injury deaths per 100 000 population (age-standardized).

Road traffic deaths figure are classified in the International Classification of Diseases (ICD10) in 12 groups.

Those relating to land transport accidents (V01-V89) reflect the victim's mode of transport and are subdivided to identify the victim's "counterpart" or the type of event.

The vehicle of which the injured person is an occupant is identified in the first two characters since it is seen as the most important factor to identify, for prevention purposes.

It exclude crashes to persons engaged in the maintenance or repair of transport equipment or vehicle (not in motion) unless injured by another vehicle in motion (W00-X59), assault by crashing of motor vehicle (Y03), event of undetermined intent (Y31-Y33) and intentional self-harm (X81-X83).

Numerator

Number of deaths due to road traffic fatal injury in a given year

Denominator

Population of each country in the same year

Value

3.14 (2020)

Measurement Frequency	Annually if civil registration data are available, otherwise every five years
Primary Data Sources	At country level: Police reports and health data (vital registration and hospital data) Civil registration and vital statistics systems with full coverage
Alternate Data Sources	Injury surveillance systems Mortuary data Population-based health surveys with verbal autopsy Administrative reporting systems (police reports)
UAE Data Sources	Ministry of Interior



3.6

By 2020, halve the number of global deaths and injuries from road traffic accidents



Mortality from household and ambient air pollution

Additional Name	Mortality attributable to joint effects of household and ambient air pollution
Definition	Evidence from epidemiological studies have shown that exposure to ambient air pollution is linked, among others, to the important diseases taken into account in this estimate: acute respiratory infections in young children (estimated under 5 years of age); cerebrovascular diseases in adults (estimated above 25 years); ischemic heart diseases in adults (estimated above 25 years); chronic obstructive pulmonary disease in adults (estimated above 25 years); and lung cancer in adults (estimated above 25 years).
Numerator	Total number of deaths attributed to household and ambient air pollution
Denominator	Total population
Value	15.45 (2016)
Measurement Frequency	Annually or every 5 years
Primary Data Sources	Civil registration with complete coverage and medical certification of cause of death Special studies
Alternate Data Sources	Sample Registration Systems Verbal Autopsy
UAE Data Sources	NA



3.9

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



Mortality rate attributed to unsafe water, unsafe sanitation and lack of hygiene	
Additional Name	Mortality rate attributed to unsafe water, unsafe sanitation, and lack of hygiene (exposure to unsafe water, sanitation and hygiene for all (WASH) services)
Definition	<p>Deaths attributable to unsafe water, sanitation and hygiene focusing on inadequate WASH services, expressed per 100,000 population. Death rates are calculated by dividing the number of deaths by the total population. Evidence from epidemiological studies have shown that exposure to unsafe water, sanitation and hygiene habits is, among others, directly linked to diarrhoeal diseases and intestinal nematode infections and other diseases.</p> <p>Repeated diarrhoea episodes are linked to protein-energy malnutrition. In this estimate, only the impact of diarrhoeal diseases, intestinal nematode infections, and protein-energy malnutrition are taken into account.</p> <p>The included diseases are the WASH attributable portions of diarrhoea (ICD-10 code A00, A01, A03, A04, A06-A09), intestinal nematode infections (ICD-10 code B76-B77, B79) and protein-energy malnutrition (ICD-10 code E40-E46).</p>
Numerator	Total number of deaths attributed to unsafe water, unsafe sanitation and lack of hygiene
Denominator	Total population
Value	<0.1 (2016)
Measurement Frequency	Annually or every 5 years
Primary Data Sources	Civil registration with complete coverage Medical certification of cause of death
Alternate Data Sources	Household surveys Special studies Sample or sentinel registration systems Population census Surveillance systems

UAE Data Sources

NA



3.9

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



Suicide mortality rate

Additional Name	Suicide mortality rate (per 100 000 population)
Definition	Number of suicide deaths in a year, divided by the population and multiplied by 100 000.
Numerator	Number of suicide deaths in year x 100 000
Denominator	Population
Value	1.4 (2020)
Measurement Frequency	Annually
Primary Data Sources	Civil registration with complete coverage and medical certification of cause of death
Alternate Data Sources	Household surveys Surveillance systems Sample or sentinel registration systems Special studies
WHO Data Sources	MOHAP – Statistics & Research Center



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.

3.2.2 Morbidity

Cancer incidence, by type of cancer (per 100 000 population)	
Additional Name	Cancer incidence, by type of cancer
Definition	Number of new cancers of a specific site/type occurring per 100,000 population.
Numerator	<p>Number of new cancer cases diagnosed in a specific year. This may include multiple primary cancers occurring in one patient</p> <p>The primary site reported is the site of origin and not the metastatic site</p> <p>In general, the incidence rate would not include recurrences</p>
Denominator	<p>The at-risk population for the given category of cancer. The population used depends on the rate to be calculated</p> <p>For cancer sites that occur only in one sex, the sex-specific population (e.g. females for cervical cancer) is used</p>
Value	78.4
Measurement Frequency	Annually
Primary Data Sources	Population based cancer registry data collected from treatment facilities, clinicians, pathologists and death certificates at national or regional level
Alternate Data Sources	NA
UAE Data Sources	MOHAP – Statistics & Research Center



Tuberculosis case notification rate	
Additional Name	Tuberculosis (TB) notification rate (per 100 000 population)
Definition	The number of TB cases (new and relapse) notified to the national health authorities during a specified period of time per 100,000 population.
Numerator	Number of new and relapse cases of TB in a specified time period
Denominator	Number of persons/total population
Value	0.73
Measurement Frequency	Quarterly and Annually
Primary Data Sources	TB surveillance system linked to routine facility information system TB quarterly reports TB register
Alternate Data Sources	Quarterly report TB registers
UAE Data Sources	MOHAP – Preventive Medicine



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.



Estimated number of new HIV infections	
Definition	The number of new HIV infections per 1,000 uninfected population, by sex, age and key populations, as defined as, the number of new HIV infections per 1000 person-years among the uninfected population.
Numerator	Number of new HIV infections by sex, age and key populations
Denominator	Total uninfected population by sex, age and key populations
Value	Data not reported for this indicator in UAE
Measurement Frequency	Annually
Primary Data Sources	Spectrum modeling Household or key population surveys with HIV incidence-testing
Alternate Data Sources	Regular surveillance system among key populations
UAE Data Sources	MOHAP – Preventive Medicine (AIDS Programme)



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.

Number of newly reported HIV cases	
Definition	Absolute number of annual reported cases of HIV detected by national HIV surveillance system (new and cumulative) notified by national health authority.
Numerator	The number of HIV cases (new and cumulative) notified to the national health authorities during a specified period of time
Denominator	NA
Value	Data not reported for this indicator in UAE
Measurement Frequency	Annually
Primary Data Sources	Regular surveillance system among key populations
Alternate Data Sources	Spectrum modeling Household or key population surveys with HIV incidence-testing
UAE Data Sources	MOHAP – Preventive Medicine



Hepatitis B incidence	
Additional Name	Estimated number of new hepatitis B infections per 100 000 population in a given year
Definition	The number of new hepatitis B infections per 100 000 population in a given year is estimated from the prevalence of total antibodies against hepatitis B core antigen (Total anti-HBc) and hepatitis B surface antigen (HBsAg) positive among children 5 years of age, adjusted for sampling design.
Numerator	Number of survey participants with Total anti-HBc and HBsAg positive test
Denominator	Number in survey with Total anti-Hc/HBsAg result
Value	3
Measurement Frequency	Intermittent, dependent on population seroprevalence of HBsAg before hepatitis B immunization and infant hepatitis B vaccination coverage
Primary Data Sources	Serosurvey
Alternate Data Sources	NA
UAE Data Sources	MOHAP – Preventive Medicine



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.



Incidence of confirmed malaria cases	
Additional Name	Incidence of confirmed malaria cases (per 1000 population)
Definition	The number of parasitologically confirmed cases of malaria per 1000 population at risk.
Numerator	<p>Number of confirmed malaria cases (by microscopy or RDT)</p> <p>The number should include cases detected passively (attending health facilities or seen by community health workers) or actively (sought in the community)</p> <p>It is often useful to provide a breakdown</p>
Denominator	Population at risk (number of people living in areas where malaria transmission occurs)
Value	0.00
Measurement Frequency	Annually/quarterly
Primary Data Sources	Routine health information systems : Health facility reports (integrated or disease specific surveillance systems)
Alternate Data Sources	NA
UAE Data Sources	MOHAP – Malaria Center



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.

Total number of reported cases - Malaria	
Additional Name	Malaria - number of reported confirmed cases
Definition	<p>The sum of confirmed cases of malaria (confirmed by slide examination or RDT).</p> <p>Microcopy cases - The number of cases confirmed by microscopy. Include both inpatients and outpatients of all ages (but do not count the same patient more than once). Include cases detected both by active and passive case detection. Excludes cases detected in community.</p> <p>RDTs cases - The number of cases confirmed by RDTs. Include both inpatients and outpatients of all ages (but do not count the same patient more than once). Include cases detected both by active and passive case detection. Exclude cases that are also confirmed by microscopy. Exclude cases detected and confirmed by community based programs.</p>
Numerator	The sum of confirmed cases of malaria (confirmed by slide examination or RDT)
Denominator	NA
Value	1014
Measurement Frequency	Annually
Primary Data Sources	Surveillance systems
Alternate Data Sources	NA
UAE Data Sources	MOHAP – Malaria Center

Incidence rate of measles cases	
Additional Name	Incidence of measles cases per (1000,000 population)
Definition	The incidence of measles is a basic measure of measles control and progress made towards elimination.
Numerator	Number of confirmed cases (laboratory confirmed, epidemiologically linked and clinically compatible)
Denominator	Total population
Value	3.70
Measurement Frequency	Monthly
Primary Data Sources	Surveillance unit and health facility
Alternate Data Sources	JRF
UAE Data Sources	MOHAP – Preventive Medicine

3.2.3 Neglected Tropical Diseases (NTDS)



Number of people requiring interventions against neglected tropical diseases	
Definition	<p>Number of people requiring treatment and care for any one of the neglected tropical diseases (NTDs) targeted by the WHO NTD Roadmap and World Health Assembly resolutions and reported to WHO.</p> <p>Treatment and care is broadly defined to allow for preventive, curative, surgical or rehabilitative treatment and care.</p> <p>Other interventions (e.g. vector management, veterinary public health, water, sanitation and hygiene, disease surveillance, morbidity management and disability prevention) are to be addressed in the context of targets and indicators for Universal Health Coverage (UHC) and universal access to water and sanitation.</p>
Numerator	<p>Average Annually number of people requiring preventive chemotherapy (PC) for at least one PC-NTD; and</p> <p>Number of new cases requiring individual treatment and care for other NTDs</p>
Denominator	NA
Value	Present in below table
Measurement Frequency	Annually
Primary Data Sources	The number of people requiring treatment and care for NTDs is measured by existing country systems, and reported through joint request and reporting forms for donated medicines, the integrated NTD database, and other reports to WHO.
Alternate Data Sources	Develop a standard protocol for systematic data collection for NTDs through World Health Survey Plus (WHS+)
UAE Data Sources	MOHAP – Preventive Medicine

Number of people requiring interventions against neglected tropical diseases	
Category	Value
Dracunculiasis	0
Leishmaniasis	3
Leprosy	41
Rabies	0
Mycetoma	0
Lymphatic filariasis	0
Onchocerciasis	0
Schistosomiasis	0
Soil-transmitted helminthiases	0
Trachoma	0



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 Health System Response

3.3.1 Health Expenditures

Per capita total health expenditure	
Definition	Per capita total expenditure on health (THE) expressed in US\$ per person.
Numerator	Current total Health Expenditure
Denominator	Total population
Value	1842 (2019)
Measurement Frequency	Annually
Primary Data Sources	National Health Accounts
Alternate Data Sources	None
UAE Data Sources	Federal Competitiveness and Statistics Center National Health Account

Out-of-pocket expenditure as % of total health expenditure	
Additional Name	Out-of-pocket payment on health as a percentage of current expenditure on health
Definition	Share of total current expenditure on health paid by household out of pocket, expressed as a percentage of total health expenditure (this is the households' out of pocket expenses).
Numerator	Out-of-pocket payment on health
Denominator	Total current expenditure on health
Value	12.5% (2019)
Measurement Frequency	Annually
Primary Data Sources	National Health Accounts
Alternate Data Sources	Administrative reporting system Household surveys Special studies Ad hoc surveys
UAE Data Sources	Federal Competitiveness and Statistics Center National Health Account

Domestic General Government Health Expenditure (GGHE-D) as % General Government Expenditure (GGE)	
Additional Name	GGHE-D as a percent GGE
Definition	Share of general government expenditures funding current health expenditures (%).
Numerator	Domestic general government health expenditure : Sum of all public domestic sources of current spending on health (12-month period).
Denominator	General Government Expenditure (GGE)
Value	7.4% (2019)
Measurement Frequency	Annually
Primary Data Sources	Administrative reporting systems
Alternate Data Sources	Other sources including estimation and modelling
UAE Data Sources	Federal Competitiveness and Statistics Center

Population with catastrophic health expenditure	
Definition	A health care payment is considered to be catastrophic (cata) if a household's total out-of-pocket health payments equal or exceed 40% of household's capacity to pay (or household's non-subsistence spending).
Numerator	NA
Denominator	NA
Value	0.4% (2019)
Measurement Frequency	Annually if the Household Budget (Expenditure) Survey is institutionalized and every 5 years otherwise
Primary Data Sources	National Health Accounts
Alternate Data Sources	Administrative reporting system Household surveys Special studies Ad hoc surveys
UAE Data Sources	Federal Competitiveness and Statistics Center



Population impoverished due to out-of-pocket health expenditure	
Definition	Proportion of the population where a household's total consumption expenditure or income including household expenditure on health is greater than the poverty line but the household's total consumption expenditure or income excluding household expenditure on health is below the poverty line.
Numerator	Total number of people whose household's total consumption expenditure or income including household expenditure on health is greater than the poverty line but the household's total consumption expenditure or income excluding household expenditure on health is below the poverty line
Denominator	Total number of people
Value	0.0% (2019)
Measurement Frequency	Annually
Primary Data Sources	<p>HH surveys: household total expenditure and household expenditures on health, from a national population-based survey; the three most common data sources are household budget surveys (HBS), household income and expenditure surveys (HIES), socio-economic or living standards surveys.</p> <p>These surveys are typically implemented by or in close collaboration with national statistical bureaus.</p> <p>Datasets from these surveys are always available to MoH, typically obtained through technical contacts in-country but may also be available publically or for direct purchase.</p>
Alternate Data Sources	Total number of people whose household's total consumption expenditure or income including household expenditure on health is greater than the poverty line but the household's total consumption expenditure or income excluding household expenditure on health is below the poverty line.
UAE Data Sources	Federal Competitiveness and Statistics Center



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.

3.3.2 Health Workforce



Density of health workers: a-Physicians, b-nurses, c-midwives, d-pharmacists, f-dentists

Definition

The number of health workers available in a country relative to the total population.

Numerator

The absolute number of registered health workers at a given time in a given country or region (that is, all persons eligible to participate in the national health labor market by virtue of their skills, age, ability and physical presence in the country)

Denominator

The total population for the same geographical area

Value

Value present in below table

Measurement Frequency

Monthly, quarterly or Annually for routine administrative records.
A validation exercise should be conducted every 3–5 years against a national population-based or facility-based assessment

Primary Data Sources

Routine health facility reporting system
Population-based surveys
Administrative records

Alternate Data Sources

National health workforce database (aggregate)
HRH Observatory
HRH information system

UAE Data Sources

MOHAP – Statistics & Research

Density of health workers (2020)	
Category	Value (per 10 000 population)
Physician	28.8
Nurses	63.6
Pharmacists	12.0
Dentists	7.4

**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.

Density of recent graduates of registered health profession educational institutions a-Physicians, b-nurses, c-midwives, e-dentists, d-pharmacists

Definition	Number of graduates from health profession educational institutions (including schools of medicine, dentistry, pharmacy, nursing, midwifery and other health services) during the last academic year, divided by the total population.
Numerator	The absolute number of graduates of health professions educational institutions in the past academic year (by level and field of education)
Denominator	Total population
Value	Value present in below table
Measurement Frequency	Annually
Primary Data Sources	Administrative records Registries
Alternate Data Sources	HRH Observatory HRH Information system
UAE Data Sources	Federal Competitiveness and Statistics Center

Density of recent health education graduates (2020)

Category	Value (per 100 000 population)
Physician	4.5
Nurses	4.2
Pharmacists	5.4
Dentists	4.2

3.3.3 Health System Capacity

International Health Regulations (IHR) technical areas	
Additional Name	International Health Regulations (IHR) core capacity index
Definition	<p>States Parties to IHR (2005) submit reporting data to the Secretariat Annually, measuring self-reported scores on 24 indicators.</p> <p>These indicators, with defined attributes, are scored from 0–5 (5 step) capacity levels. Each of 13 IHR (2005) capacities can be measured as the average of its indicator scores (range of 1–3 indicators per capacity).</p> <p>The tracer indicator is the average of scores for the 13 capacities.</p> <p>Countries can then be stratified into 5 levels, allowing for prioritization of preparedness efforts can be done.</p> <p>Progress can be measured by the cumulative population moving from one level of preparedness to a higher level.</p>
Numerator	State Party self-reported average of 13 IHR (2005) capacities, as measured by the SPAR
Denominator	Total number of reported capacities (i.e., 13)
Value	Value present in below table
Measurement Frequency	Annually
Primary Data Sources	SPAR reports (available on the Global Health Observatory); Strategic Partnership for International Health Regulations (2005) and Health Security (https://extranet.who.int/sph/)
Alternate Data Sources	<p>Joint external evaluation (JEE; available at https://extranet.who.int/sph/)</p> <p>Current Health Expenditure (CHE; available on Global Health Observatory)</p> <p>Previous years' IHR (2005) self-assessment Annually reporting data (available on Global Health Observatory).</p>
UAE Data Sources	MOHAP – International Health Regulations

International Health Regulations (IHR) technical areas (2017)	
Category	Value
Detect	90.0
Prevent	89.0
Respond	98.0
Points of Entry & other IHR related hazards	100.0



IHR Annually reporting	
Definition	Overall IHR Core Capacity value calculated by Country using SPAR tool (IHR state parties – Self Assessment and reporting tool).
Numerator	NA
Denominator	NA
Value	96 (2017)
Measurement Frequency	Annual

Primary Data Sources	<p>Multi-sectoral data sources representing all relevant stakeholders at all country level concerned with IHR Core capacity implementation, Eg – Ministry of Climatic Change and Environment, Local health authorities at emirate-level, Municipalities etc.</p> <p>SPAR reports (available on the Global Health Observatory); Strategic Partnership for International Health Regulations (2005) and Health Security (https://extranet.who.int/sph/)</p>
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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.

Joint external evaluation of IHR capacity	
Definition	<p>Overall IHR Core Capacity value calculated by WHO. Linked with IHR technical areas indicator but methodology is different.</p> <p>External expertise arranged and sent by WHO to do external evaluation of above technical areas.</p> <p>WHO checks compliance and commitment of country towards IHR core capacity implementation.</p>
Numerator	NA
Denominator	NA
Value	95.5 (2017)
Measurement Frequency	Every 5 years

Primary Data Sources

Same stakeholders as above indicator

Joint external evaluation (JEE; available at <https://extranet.who.int/sph/>)



UHC service coverage index	
Additional Name	Coverage of essential health services
Definition	<p>Coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, non-communicable diseases and service capacity and access, among the general and the most disadvantaged population).</p> <p>The indicator is an index reported on a unit less scale of 0 to 100, which is computed as the geometric mean of 14 tracer indicators of health service coverage.</p>
Numerator	This indicator is based on aggregate estimate
Denominator	This indicator is based on aggregate estimate
Value	78 (2019)
Measurement Frequency	<p>Data collection varies from every 1 to 5 years across tracer indicators.</p> <p>For example, country data on immunizations and HIV treatment are reported annually, whereas household surveys to collect information on child treatment may occur every 3-5 years, depending on the country.</p>
Primary Data Sources	<p>Many of the tracer indicators of health service coverage are measured by household surveys.</p> <p>However, administrative data, facility data, facility surveys, and sentinel surveillance systems are utilized for certain indicators.</p>
Alternate Data Sources	NA
UAE Data Sources	NA



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.

3.3.4 Medicine & medical devices



Availability of selected essential medicines	
Additional Name	Availability of selected essential medicines in health facilities
Definition	<p>The average percentage of medicines outlets, where a selection of essential medicines are found on the day of the survey.</p> <p>Access to medicines: Having medicines continuously available and affordable at public or private health facilities or medicine outlets that are within one hour's walk of the population.</p> <p>Affordability: The cost of treatment in relation to lowest paid government employee.</p>
Numerator	Number of facilities with essential medicines in stock
Denominator	Total number of health facilities
Value	Value present in below table
Measurement Frequency	Routine facility information systems provide data instantly and for facility assessment survey Annually/Biannually
Primary Data Sources	Special Health facility assessment surveys
Alternate Data Sources	Routine facility information systems
UAE Data Sources	MOHAP – Statistics & Research Center (Survey)

Availability of selected essential medicines (2018)	
Public	Private
100.0a	100.0a



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.

Availability of six selected medical devices

Additional Name	Density per million population of six selected medical devices in public and private health facilities
Definition	This indicator measures the total number and density per million populations (females aged 50-60 years in case of Mammography) on the availability and use of 6 medical devices – Computed Tomography (CT) scanners, Magnetic Resonance Imaging (MRI) units, Gamma Cameras, Mammography, Angiography Units, and Lithotripters.
Numerator	Total number of facilities with the available device (CT Scan, MRI, Gamma Cameras, Mammography, Angiography Units, and Lithotripters)
Denominator	Total populations (females aged 50-60 years in case of Mammography)
Value	Present in below table
Measurement Frequency	Routine facility information systems provide data instantly and for facility assessment survey Annually/Biannually
Primary Data Sources	Routine facility information systems
Alternate Data Sources	Health facility assessment surveys
UAE Data Sources	MOHAP – Statistics & Research Center (Survey)

Availability of six selected medical devices (2019)	
Device	Value
Computed Tomography	25.4
Radiotherapy	1.3
Magnetic Resonance Imaging	10.6
Mammographs	21.8
Digital Subtraction Angiography	NA
Lithotripters	NA

3.3.5 Service Delivery

Density of primary health care facilities (public and private)	
Additional Name	Density of primary health care facilities
Definition	The number of public and private primary health care facilities available relative to the total population for the same geographical area.
Numerator	<p>"District and national databases provide the number of public primary health care facilities, often by type (such as, health center, PHC centers, health post, health houses, and dispensary)</p> <p>Special efforts, notably facility censuses, are often required to obtain the number of private facilities, especially if no registration system is enforced</p> <p>A facility sample survey will not provide the data needed to compute service availability</p>
Denominator	Information collected directly from ministries of health through the baseline national health survey
Value	3.7 Per 10 000 population (2020)
Measurement Frequency	Annually updating of the number of PHC facilities, and validation every 3–5 years through a complete census.
Primary Data Sources	District and national database of health facilities (often requiring facility censuses),
Alternate Data Sources	Health facility surveys
UAE Data Sources	MOHAP – Statistics & Research Center



Hospital bed density	
Additional Name	Hospital bed density (per 10 000 population)
Definition	The number of inpatient beds available relative to the total population for the same geographical area.
Numerator	The number of inpatient beds
	This includes total hospital beds (for long-term and acute care), maternity beds and pediatric beds, but not delivery beds
	Public and private sectors are included
	Locality/ district/ province or country
Denominator	The total population for the same geographical area
Value	19.4 Per 10 000 population (2020)
Measurement Frequency	Regular updating of the number of beds in facilities, and validation every 3-5 years through a complete census
Primary Data Sources	District and national databases provide the number of beds. Special efforts, notably facility censuses, are often required to obtain the number of beds in private facilities, especially if no registration system is enforced.
Alternate Data Sources	Health facility census
UAE Data Sources	MOHAP – Statistics & Research Center

Surgical wound infection rate	
Additional Name	Surgical wound infection
Definition	Surgical site infections (SSIs) are infections of the incision or organ or space that occur after surgery.
Numerator	Number of patients with surgical wound infections
Denominator	Total patients who underwent surgical operations
Value	1.20% (2020)
Measurement Frequency	Continuous
Primary Data Sources	Surveillance system
Alternate Data Sources	Health facility registry system
UAE Data Sources	MOHAP – Quality Management

Annually number of outpatient department visits, per capita	
Additional Name	Annually number of outpatient department visits
Definition	Number of outpatient department visits per person per year.
Numerator	Total number of outpatient department visits per year
Denominator	Total population
Value	2.1 (2020)
Measurement Frequency	Annually
Primary Data Sources	Routine health facility reporting system and population-based surveys
Alternate Data Sources	NA
UAE Data Sources	MOHAP – Statistics & Research Center

3.3.6 Service Coverage



Demand for family planning satisfied with modern methods	
Additional Name	Need for contraception satisfied
Definition	Proportion of women of reproductive age (15-49 years), who are sexually active, who have their need for family planning satisfied with modern methods.
Numerator	Number of women with family planning demand who use modern methods
Denominator	Total number of women in need of family planning
Value	67.2% (2020)
Measurement Frequency	Every 3-5 years
Primary Data Sources	Population-based health surveys such as the DHS, RHS, MICS, and other nationally Sponsored surveys
Alternate Data Sources	Service statistics
UAE Data Sources	World Health Survey Family Health Survey



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 programmes.

Antenatal care coverage (1+)	
Additional Name	Antenatal care coverage – at least one visit (%)
Definition	The percentage of women aged 15-49 years with a live birth in a given time period that received antenatal care provided by skilled health personnel (doctors, nurses, or midwives) at least once during pregnancy.
Numerator	Number of women aged 15–49 years with a live birth in a given time period who received antenatal care at least once during pregnancy
Denominator	Total number of women aged 15–49 years with a live birth in the same period
Value	100% (2020)
Measurement Frequency	Annually for facility records and Every 3–5 years (depending on frequency of household surveys)
Primary Data Sources	Household surveys Facility records
Alternate Data Sources	Routine facility reporting system
UAE Data Sources	MOHAP – Statistics & Research Center

Antenatal care coverage (4+)	
Additional Name	Antenatal care coverage – at least four visits (%)
Definition	<p>The percentage of women aged 15-49 years with a live birth in a given time period that received antenatal care four or more times.</p> <p>Due to data limitations, it is not possible to determine the type of provider for each visit.</p>
Numerator	Number of women aged 15–49 years with a live birth in a given time period who received antenatal care four or more times
Denominator	Total number of women aged 15–49 years with a live birth in the same period
Value	98.6% (2020)
Measurement Frequency	Annually for facility records and Every 3 - 5 years (depending on frequency of household surveys)
Primary Data Sources	Household surveys
Alternate Data Sources	Routine facility reporting system
UAE Data Sources	MOHAP – Statistics & Research Center



Births attended by skilled health personnel	
Additional Name	Births attended by skilled health personnel (%)
Definition	Percentage of births attended by skilled health personnel during a specific time period.
Numerator	Number of births attended by skilled health personnel (doctors, nurses or midwives) trained in providing lifesaving obstetric care, including giving the necessary supervision, care and advice to women during pregnancy, childbirth and the post-partum period
Denominator	The total number of live births in the same period
Value	100% (2020)
Measurement Frequency	Annually Every 3 - 5 years (depending on frequency of household surveys)
Primary Data Sources	Household surveys
Alternate Data Sources	Routine facility reporting system
UAE Data Sources	MOHAP – Statistics & Research Center



3.1

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



DPT3/Pentavalent Immunization coverage rate	
Additional Name	DPT3/Pentavalent Immunization coverage rate coverage among children under 1 year of age (%)
Definition	The percentage of one-year-olds who have received three doses of the combined diphtheria, tetanus toxoid and pertussis vaccine in a given year.
Numerator	For vaccines in the infant immunization schedule, this would be the number of children aged 12–23 months who have received the specified vaccinations before their first birthday
Denominator	The total number of individuals in the target group for each vaccine. For vaccines in the infant immunization schedule, this would be the total number of infants surviving to age one
Value	96% (2020)
Measurement Frequency	Quarterly, Annually
Primary Data Sources	National Health Information Systems or National Immunization systems National immunization registries
Alternate Data Sources	High quality household surveys with immunization module (e.g. DHS, MICS, national in-country surveys)
UAE Data Sources	MOHAP - Vaccinations

Measles immunization coverage rate (MCV1)	
Definition	<p>The percentage of children under one year of age who have received at least one dose of measles-containing vaccine in a given year.</p> <p>For countries recommending the first dose of measles vaccine in children over 12 months of age, the indicator is calculated as the proportion of children less than 12-23 months of age receiving one dose of measles-containing vaccine.</p>
Numerator	<p>Children under one year of age who have received at least one dose of measles-containing vaccine in a given year</p> <p>For countries recommending the first dose of measles vaccine in children over 12 months of age, the number of children less than 12-23 months</p>
Denominator	The total number of individuals in the target group for each vaccine. For vaccines in the infant immunization schedule, this would be the total number of infants surviving to age one
Value	99% (2020)
Measurement Frequency	Annually tracking through facility information systems, supplemented by periodic estimation through household surveys
Primary Data Sources	National Health Information Systems or National Immunization systems National immunization registries
Alternate Data Sources	High quality household surveys with immunization module (e.g. DHS, MICS, national in-country surveys)
UAE Data Sources	MOHAP – Vaccinations

Percentage of suspected malaria cases that have had a diagnostic test	
Definition	Percentage of suspected malaria cases that received parasitological diagnosis either by microscopy or RDT.
Numerator	Total number of suspected malaria cases tested either by microscopy or RDT x100
Denominator	Number of suspected malaria cases attending health facilities. In situation that number of suspected malaria cases is not available through reporting system the number of suspected malaria cases = Total number cases tested for malaria (either Microscopy or RDT) and total cases treated as malaria without confirmation (probable or clinical cases)
Value	100% (2020)
Measurement Frequency	Annually/quarterly/Monthly
Primary Data Sources	Health Information System (HIS) Routine surveillance system Health facility reports
Alternate Data Sources	National Malaria Control Programs
UAE Data Sources	MOHAP – Malaria Center

Percentage of population sleeping under insecticide-treated nets ITN	
Additional Name	Percentage of individuals who slept under an ITN the previous night
Definition	Percentage of individuals in malaria endemic areas who slept under an insecticide-treated net (ITN) the previous night of survey question.
Numerator	Number of individuals in malaria endemic areas who slept under an ITN the previous night
Denominator	Number of individuals who spent the previous night in surveyed households
Value	0.0% (2020)
Measurement Frequency	Surveys: every 3-5 years; modeled estimates: Annually
Primary Data Sources	Demographic and Health Surveys (DHS) Multiple Indicator Cluster Surveys (MICS) Malaria Indicator Surveys (MIS)
Alternate Data Sources	National Malaria Control Programs Manufacturer deliveries
UAE Data Sources	MOHAP – Malaria Center

Percentage of key populations at higher risk who have received an HIV test in the past 12 months and know their results

Definition	It measures progress in implementing HIV testing and counselling among people who inject drugs.
Numerator	Number of key population respondents previously unaware of their HIV-positive status who were tested for HIV and received their results within the past 12 months
Denominator	Number of key population respondents in survey
Value	Data not reported for this indicator in UAE
Measurement Frequency	Every 2 – 3 years unless there is very rapid scale up of services, a change in the key population size or a noted rise in positive cases from service data.
Primary Data Sources	Survey of key population
Alternate Data Sources	NA
UAE Data Sources	MOHAP – Preventive Medicine



Adults and children currently receiving ARV therapy among all adults and children living with HIV (%)

Definition	Number and % of people living with HIV who are receiving ART.
Numerator	Number of people living with HIV who are currently receiving ART
Denominator	Number of people living with HIV
Value	Data not reported for this indicator in UAE
Measurement Frequency	Once a year, preferably quarterly
Primary Data Sources	Programme records eg: ART register and reporting forms Internationally consistent modelling estimates eg: Spectrum AIM
Alternate Data Sources	NA
UAE Data Sources	MOHAP – Preventive Medicine



TB treatment success rate	
Additional Name	Treatment success rate of new bacteriologically confirmed tuberculosis
Definition	<p>Percentage of TB cases successfully treated (cured plus treatment completed) among TB cases notified to the national health authorities during a specified period.</p> <p>Cured: A pulmonary TB patient with bacteriologically confirmed TB at the beginning of treatment who was smear- or culture-negative in the last month of treatment and on at least one previous occasion.</p> <p>* Treatment completed: A TB patient who completed treatment without evidence of failure BUT with no record to show that sputum smear or culture results in the last month of treatment and on at least one previous occasion were negative, either because tests were not done or because results are unavailable.</p> <p>* Treatment success: The sum of cured and treatment completed. Percentage of notified TB patients who were successfully treated. The target is for drug- susceptible and drug-resistant TB combined, although outcomes should also be reported separately.</p>
Numerator	New bacteriologically confirmed TB patients successfully treated (cured plus completed treatment) during a specified period of time
Denominator	Total number of new bacteriologically confirmed TB cases registered for treatment during the same time period
Value	77.4% (2020)
Measurement Frequency	Quarterly and Annually
Primary Data Sources	TB register health facility registry systems
Alternate Data Sources	NA
UAE Data Sources	MOHAP – Preventive Medicine

Children under 5 with diarrhea receiving oral rehydration therapy	
Definition	<p>According to the DHS, the term(s) used for diarrhoea should encompass the expressions used for all forms of diarrhoea, including bloody stools (consistent with dysentery), watery stools, etc.</p> <p>The term encompasses the mother's definition as well as locally-used term(s).</p> <p>The indicator calculated by dividing the total number of children who developed diarrhea during the specified period before survey and treated with ORT, over, total number of children reported having diarrhea during same period.</p>
Numerator	Number of children under age 5 with diarrhea in the last 2 weeks who received ORT (ORS packet, pre-packaged ORS fluid, recommended homemade fluid or increased fluids) during the episode of diarrhea
Denominator	Total number of children under age 5 with diarrhoea in the last 2 weeks
Value	100% (2020)
Measurement Frequency	Every 3 – 5 years (depending on frequency of household surveys)
Primary Data Sources	Household surveys
Alternate Data Sources	Routine facility information systems
UAE Data Sources	MOHAP - Hospital

Coverage of service for severe mental health disorders	
Definition	Percentage of persons with a severe mental disorder (psychosis (ICD 10 F2); bipolar affective disorder (ICD 10 F30-31); moderate-severe depression (ICD 10 F32-F33) who are in receipt of services in the last one year
Numerator	Cases of severe mental disorder receiving services
Denominator	Total cases of severe mental disorder in the population (total number of people in need)
Value	100%
Measurement Frequency	Annually
Primary Data Sources	Mental health information system(s) National epidemiological surveys
Alternate Data Sources	Facility records WHO ATLAS Survey Global Burden of Disease estimates WMHS estimates
UAE Data Sources	MOHAP – Mental Health Program Coordinator

3.3.7 Health Information System

Births registration coverage	
Definition	Percentage of births that are registered within one month of age in a civil registration system.
Numerator	Number of births registered
Denominator	Total number of births
Value	100% (2020)
Measurement Frequency	Annually
Primary Data Sources	Civil registration or sample registration system
Alternate Data Sources	National population surveys
UAE Data Sources	MOHAP – Statistics & Research Center

Deaths registration coverage, cause of death using ICD	
Definition	Percentage of deaths that are registered (with age and sex).
Numerator	Number of deaths registered
Denominator	Total number of deaths
Value	100% (2020)
Measurement Frequency	Annually
Primary Data Sources	Civil registration or sample registration system
Alternate Data Sources	Civil registration and vital statistics systems
UAE Data Sources	MOHAP – Statistics & Research Center

4. Metadata Definition Sources

#	Indicators	Source Link
1	Population size	https://rho.emro.who.int/Metadata/population-size
2	Population living in urban areas (Percentage)	https://www.who.int/data/gho/data/indicators/indicator-details/GHO/population-living-in-urban-areas-(-)
3	Population growth rate	https://rho.emro.who.int/Metadata/population-growth-rate
4	Life expectancy at birth	https://rho.emro.who.int/Metadata/life-expectancy-at-birth
5	Total fertility rate	https://rho.emro.who.int/Metadata/total-fertility-rate
6	Adolescent fertility rate (15-19 years)	https://rho.emro.who.int/Metadata/adolescent-fertility-rate-per-1000-girls-aged-15-19-years
7	Net primary School enrolment	https://rho.emro.who.int/Metadata/net-primary-school-enrolment
8	Population below the international poverty line	https://rho.emro.who.int/Metadata/population-below-international-poverty-line
9	Adult literacy rate (15- 24 years)	https://rho.emro.who.int/Metadata/youth-literacy-rate-15-24-years
10	Access to improved drinking water	https://rho.emro.who.int/Metadata/access-to-improved-drinking-water
11	Access to improved sanitation facilities	https://rho.emro.who.int/Metadata/access-to-improved-sanitation-services
12	Incidence of low birth weight among newborns	https://rho.emro.who.int/Metadata/incidence-of-low-birth-weight-among-newborns
13	Exclusive breastfeeding rate 0-5 months of age	https://rho.emro.who.int/Metadata/exclusive-breastfeeding-rate-0-5-months-of-age
14	Children under 5 who are stunted	https://rho.emro.who.int/Metadata/children-under-5-years-who-are-stunted-moderate-and-severe
15	Children under 5 who are wasted	https://rho.emro.who.int/Metadata/children-under-5-years-who-are-wasted-moderate-and-severe

16	Children under 5 who are overweight	https://rho.emro.who.int/Metadata/children-under-5-years-who-are-overweight
17	Children under 5 who are obese	https://rho.emro.who.int/Metadata/children-aged-under-5-years-who-are-obese
18	Overweight (13-18 years)	https://rho.emro.who.int/Metadata/overweight-in-adolescents-13-18-years
19	Obesity (13-18 years)	https://rho.emro.who.int/Metadata/obesity-in-adolescents-13-18-years
20	Overweight (18+ years)	https://rho.emro.who.int/Metadata/overweight-in-adults-18-years
21	Obesity (18+ years)	https://rho.emro.who.int/Metadata/obesity-in-adults-18years
22	Tobacco use (13-15 years)	https://rho.emro.who.int/Metadata/tobacco-use-among-persons-13-15-years
23	Tobacco use (15+ years)	https://rho.emro.who.int/Metadata/tobacco-use-among-persons-15-years
24	Insufficient physical activity (13-18 years)	https://rho.emro.who.int/Metadata/insufficient-physical-activity-in-adolescents-13-18-years
25	Insufficient physical activity (18+ years)	https://rho.emro.who.int/Metadata/insufficient-physical-activity-in-adults-18-years
26	Raised blood glucose (18+ years)	https://rho.emro.who.int/Metadata/raised-blood-glucose-among-adults-18-years
27	Raised blood pressure (18+ years)	https://rho.emro.who.int/Metadata/raised-blood-pressure-among-adults-18-years
28	Anemia among women of reproductive age	https://rho.emro.who.int/Metadata/anaemia-among-women-of-reproductive-age
29	Neonatal mortality	https://rho.emro.who.int/Metadata/neonatal-mortality-rate-per-1000-live-births
30	Infant mortality	https://rho.emro.who.int/Metadata/infant-mortality-rate
31	Under-5 mortality	https://rho.emro.who.int/Metadata/under-five-mortality-rate
32	Maternal mortality ratio	https://rho.emro.who.int/Metadata/maternal-mortality-ratio

33	Mortality rate by main cause of death, (age standardized)	https://www.who.int/data/gho/indicator-metadata-registry/imr-details/78
34	Mortality between age groups 30 and 70 from cardiovascular diseases, cancer, diabetes, or chronic respiratory diseases	https://rho.emro.who.int/Metadata/mortality-between-30-and-70-years-of-age-from-cardiovascular-diseases-cancer-diabetes-or
35	Mortality rate due to road traffic injuries (per 100 000 population)	https://rho.emro.who.int/Metadata/mortality-rate-from-road-traffic-injuries-per-100-000-population
36	Mortality rate attributed to household and ambient air pollution per 10000	https://rho.emro.who.int/Metadata/mortality-from-household-and-ambient-air-pollution
37	Mortality rate attributed to unsafe water, unsafe sanitation and lack of hygiene per 100000	https://rho.emro.who.int/Metadata/mortality-from-unsafe-water-unsafe-sanitation-and-lack-of-hygiene
38	Suicide mortality rate	https://www.who.int/data/gho/indicator-metadata-registry/imr-details/4664
39	Cancer incidence by type	https://rho.emro.who.int/Metadata/cancer-incidence-by-type-of-cancer-per-100-000-population
40	Tuberculosis case notification rate	https://rho.emro.who.int/Metadata/tuberculosis-notification-rate
41	Estimated number of new HIV infections	https://rho.emro.who.int/Metadata/estimated-number-of-new-hiv-infections
42	Number of newly reported HIV cases	https://rho.emro.who.int/Metadata/number-of-newly-reported-hiv-cases
43	Hepatitis B incidence rate per 100 000 population	https://rho.emro.who.int/Metadata/hepatitis-b-incidence
44	Incidence of confirmed malaria cases	https://rho.emro.who.int/Metadata/incidence-of-confirmed-malaria-cases
45	Malaria - Total number of reported cases	https://www.who.int/data/gho/data/indicators/indicator-details/GHO/malaria---number-of-reported-confirmed-cases
46	Incidence of measles cases	https://rho.emro.who.int/Metadata/incidence-rate-of-measles-cases
47	Number of people requiring interventions against neglected tropical diseases	https://rho.emro.who.int/Metadata/number-of-people-requiring-interventions-against-neglected-tropical-diseases
48	Current Health Expenditure (CHE) per Capita in US\$	https://rho.emro.who.int/Metadata/per-capita-total-health-expenditure
49	Out-of-pocket expenditure as % of total health expenditure	https://rho.emro.who.int/Metadata/out-of-pocket-expenditure-as-of-total-health-expenditure

50	General government expenditure on health as % of general government expenditure	https://rho.emro.who.int/Metadata/domestic-general-government-health-expenditure-gghe-d-as-percentage-of-general-government
51	Population with catastrophic health expenditure	https://rho.emro.who.int/Metadata/population-with-catastrophic-health-expenditure
52	Population impoverished due to out-of-pocket health expenditure	https://rho.emro.who.int/Metadata/population-impoverished-due-to-out-of-pocket-health-expenditure
53	Density of health workers: a-Physicians, b-nurses, c-midwives, d-pharmacists, f-dentists	https://rho.emro.who.int/Metadata/density-of-health-workers
54	Density of recent graduates of registered health profession educational institutions a-Physicians, b-nurses, c-midwives, e-dentists, d-pharmacists	https://rho.emro.who.int/Metadata/density-of-recent-graduates-of-registered-health-profession-educational-institutions
55	International Health Regulations (IHR) technical areas	https://rho.emro.who.int/Metadata/international-health-regulations-ihc-core-capacity-index
56	IHR annual reporting	MOHAP-IHR department
57	Joint external evaluation of IHR capacity	MOHAP-IHR department
58	UHC service coverage index	https://rho.emro.who.int/Metadata/coverage-of-essential-health-services
59	Availability of selected essential medicines health facilities	https://rho.emro.who.int/Metadata/availability-of-selected-essential-medicines
60	Density per million population of six selected medical devices in public and private health facilities	https://rho.emro.who.int/Metadata/availability-of-six-selected-medical-devices
61	Density of primary health care facilities (public and private)	https://rho.emro.who.int/Metadata/density-of-primary-health-care-facilities-public-and-private-sector
62	Density of inpatient beds (hospitals)	https://rho.emro.who.int/Metadata/hospital-bed-density
63	Surgical wound infection rate	https://rho.emro.who.int/Metadata/surgical-wound-infection-rate
64	Annual number of outpatient department visits, per capita	https://rho.emro.who.int/Metadata/annual-number-of-outpatient-department-visits-per-capita

65	Need for contraception satisfied	https://rho.emro.who.int/Metadata/demand-for-family-planning-satisfied-with-modern-methods
66	Antenatal care coverage (1+)	https://rho.emro.who.int/Metadata/antenatal-care-coverage-1
67	Antenatal care coverage (4+)	https://rho.emro.who.int/Metadata/antenatal-care-coverage-4
68	Skilled birth attendance	https://rho.emro.who.int/Metadata/births-attended-by-skilled-health-personnel
69	DPT3/pentavalent coverage among children under 1 year of age	https://rho.emro.who.int/Metadata/dpt3pentavalent-immunization-coverage-rate
70	Measles immunization coverage (MCV1)	https://rho.emro.who.int/Metadata/measles-immunization-coverage-rate-mcv1
71	Percentage of suspected malaria cases that have had a diagnostic test	https://rho.emro.who.int/Metadata/percentage-of-suspected-malaria-cases-that-have-had-a-diagnostic-test
72	Percentage of individuals who slept under an ITN the previous night	https://rho.emro.who.int/Metadata/percentage-of-population-sleeping-under-insecticide-treated-nets-itn
73	Percentage of key populations at higher risk who have received an HIV test in the past 12 months and know their results	https://www.who.int/publications/i/item/consolidated-hiv-strategic-information-guidelines
74	Adults and children currently receiving ARV therapy among all adults and children living with HIV (%)	https://www.who.int/publications/i/item/consolidated-hiv-strategic-information-guidelines
75	Treatment success rate of new bacteriologically confirmed tuberculosis	https://rho.emro.who.int/Metadata/tb-treatment-success-rate
76	Children under 5 with diarrhea receiving oral rehydration therapy	https://rho.emro.who.int/Metadata/children-under-5-with-diarrhea-receiving-oral-rehydration-therapy
77	Service coverage of severe mental disorders	https://rho.emro.who.int/Metadata/coverage-of-service-for-severe-mental-health-disorders
78	Births registration coverage	https://rho.emro.who.int/Metadata/births-registration-coverage
79	Deaths registration coverage, cause of death using ICD	https://rho.emro.who.int/Metadata/deaths-registration-coverage