

Series of SDG Webinars for the Arab Region
SDG 2.2.1, 2.2.2, 2.2.3, 3.4.2 and 3.5.2

Anaemia prevalence estimates and determinants

SDG 2.2.3

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Introduction

- Accurate and timely data needed for countries to achieve health goals and targets
- Core function of WHO is to monitor the health situation and assess health trends
- The Micronutrients Database in the WHO Vitamin and Mineral Information System (VMNIS):
 - Compiles national, sub-national and first administrative level data on the vitamin and mineral status of populations
 - Used to monitor micronutrient status, provide global estimates of the burden of micronutrient malnutrition, and calculate trends in status over time

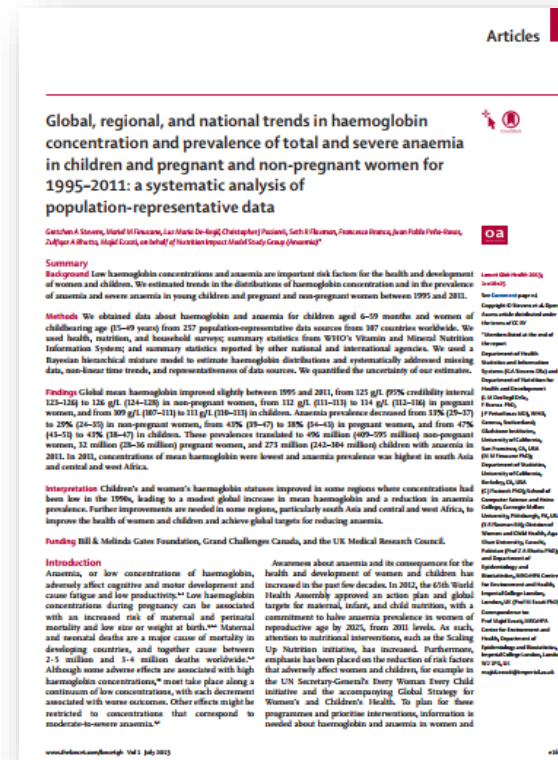


- Ministries of health through WHO regional and country offices
- National research and academic institutions
- Non-governmental organizations
- Organizations of the UN system
- Reports and peer-review publications generated by partners or implementing partners
- Peer-review publications found literature search

- Sampling frame of defined population
- Sample representative at national, regional and 1st admin level
- Population-based, household-based or facility based sample (complying with representativeness)
- Cross-sectional sample or baseline assessment of interventions
- Standard, validated data collection techniques and laboratory methodology

Global estimates of anaemia prevalence

- Produced by WHO since at least the early 1980s
- **Bayesian hierarchical mixture model** as of 2011
 - Estimates informed by data from each country-year itself, if available, and by data from other years in the same country and in other countries
 - Estimates also informed by **covariates**
 - Includes variance term to account for **unobserved design factors** (e.g. sample design, season, method of haemoglobin measurement, type of blood sample)
 - Accounts for **additional factors** (e.g. subnational data, imprecise age ranges)



Anaemia prevalence estimates

2000-2019

- **Survey data**

- Restricted to data on **children 6-59 months** and **women of reproductive age**
- National and subnational (if representative of at least 3 1st admin levels) data
- Haemoglobin adjusted for elevation using US CDC formula
- Haemoglobin adjusted for smoking status if available

- **Data availability for latest round of estimates (2000-2019)**

- **489** population-representative **data sources** from **133 countries** worldwide with **4.5 million** hemoglobin **measurements**
 - 458 (94%) nationally representative sources
 - 408 (83%) sources had data for women (providing an average of 2.1 data sources per country)
 - 393 (80%) sources had data for children (providing an average of 2.0 data sources per country)
- Countries with at least one data source represent 92% of women and children in the world
- Countries with at least 2 data sources represent 85% of women and children in the world

Determinants of anaemia

Consideration for covariates in statistical model

- **Determinants**

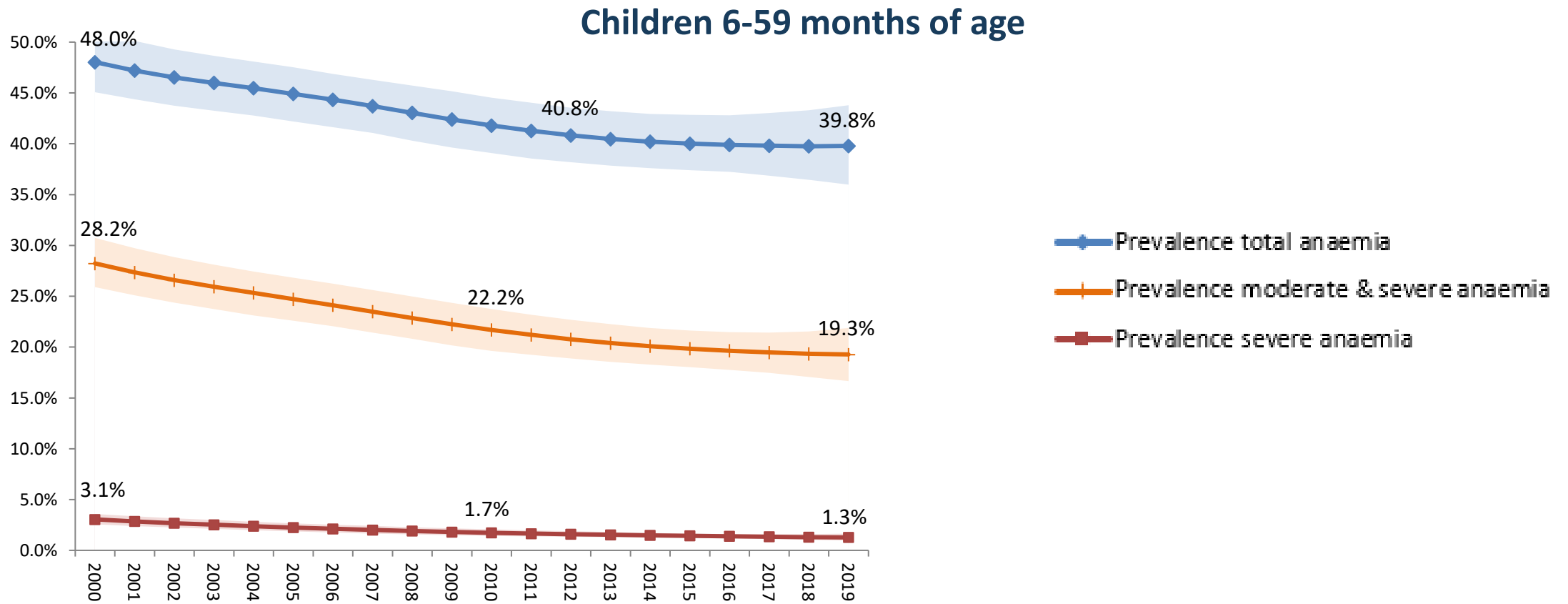
- Development & socio-demographics
 - Maternal education
 - Urban/rural residence
 - Fertility rate
- Health & nutrition
 - Dietary intake of iron and other micronutrients
 - Body mass index / weight-for-age Z scores
 - Malabsorption disorders
 - Intestinal helminths and parasites
 - Malaria and other disease incidence
- Genetics
 - Hemoglobinopathies, thalasseмии, haemoglobin variants, G6PD deficiency

Population group	Covariates in 1990-2016 model	Covariates in 2000-2019 model
Children	Maternal education Proportion of population in urban areas Prevalence of sickle-cell disorders and thalassaemias Mean weight-for-age Z score	Socio-demographic index Meat supply (kcal/capita) Shock-free under-five mortality
Women	Maternal education Proportion of population in urban areas Prevalence of sickle-cell disorders and thalassaemias Mean body mass index	Socio-demographic index Meat supply (kcal/capita) Mean body mass index

Anaemia prevalence estimates

2000-2019

- Estimated distributions of haemoglobin concentration in each country-year for each population group
- Calculated population mean and prevalence of anaemia¹ for each country-year

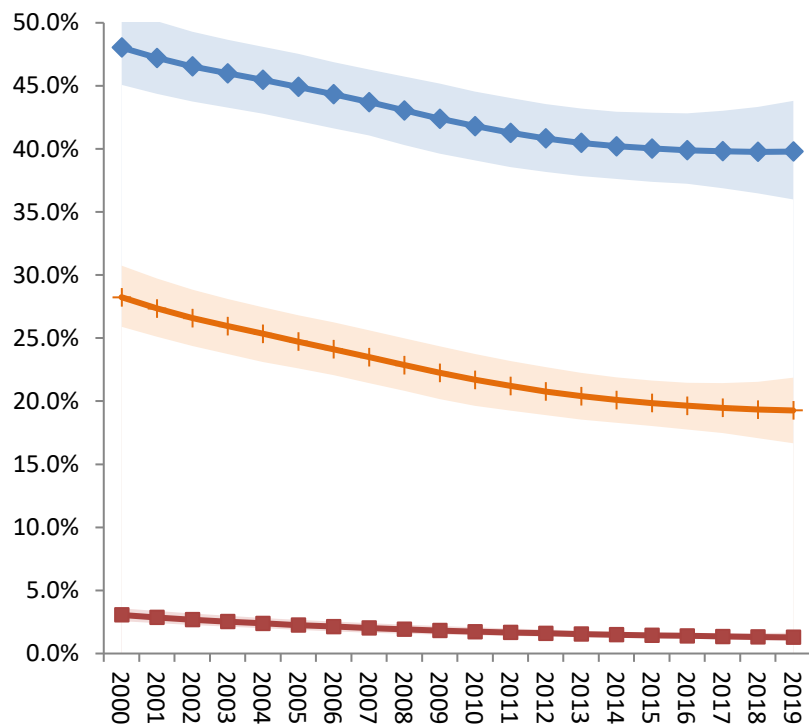


¹ Total anaemia defined as <110 g/L in pregnant women and children 6-59 months of age and <120 g/L in non-pregnant women
Moderate+severe anemia defined as <100 g/L in pregnant women and children 6-59 months of age and <110 g/L in non-pregnant women
Severe anaemia defined as <70 g/L in pregnant women and children 6-59 months age and <80 g/L in non-pregnant women

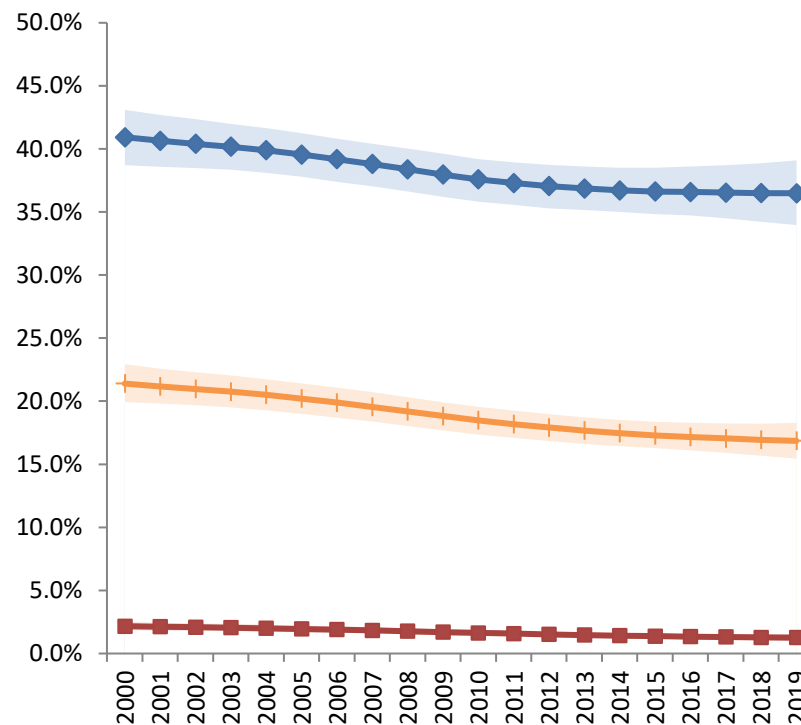
Global trends in the prevalence of anaemia

2000-2019

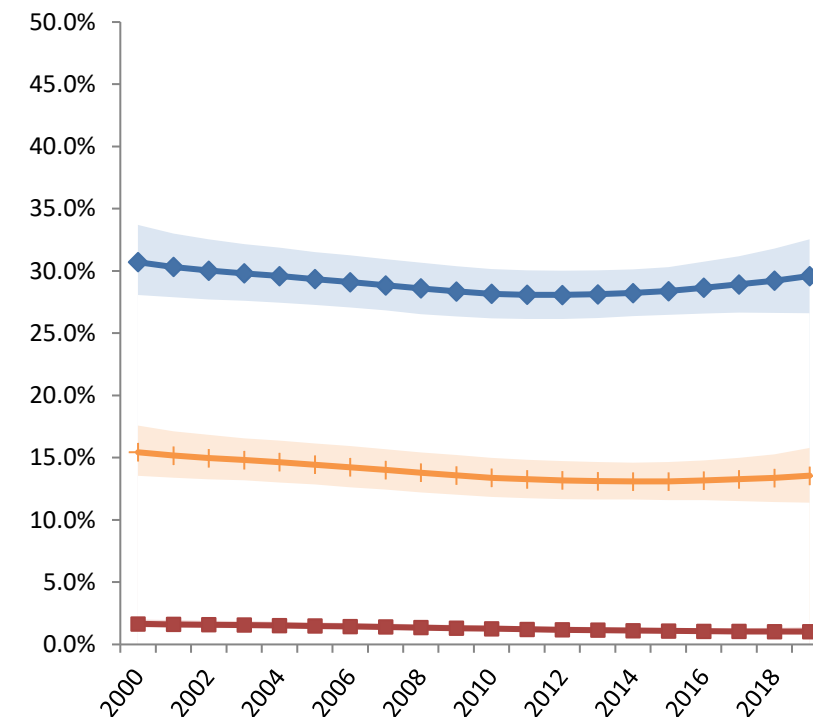
Children 6-59 months of age



Pregnant women



Non-pregnant women



◆ Prevalence total anaemia

+ Prevalence moderate & severe anaemia

■ Prevalence severe anaemia

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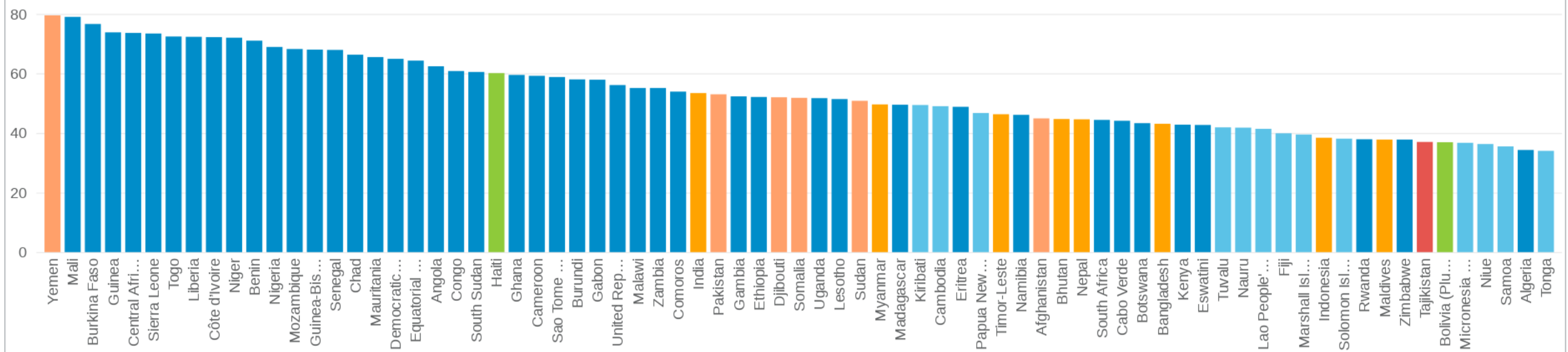
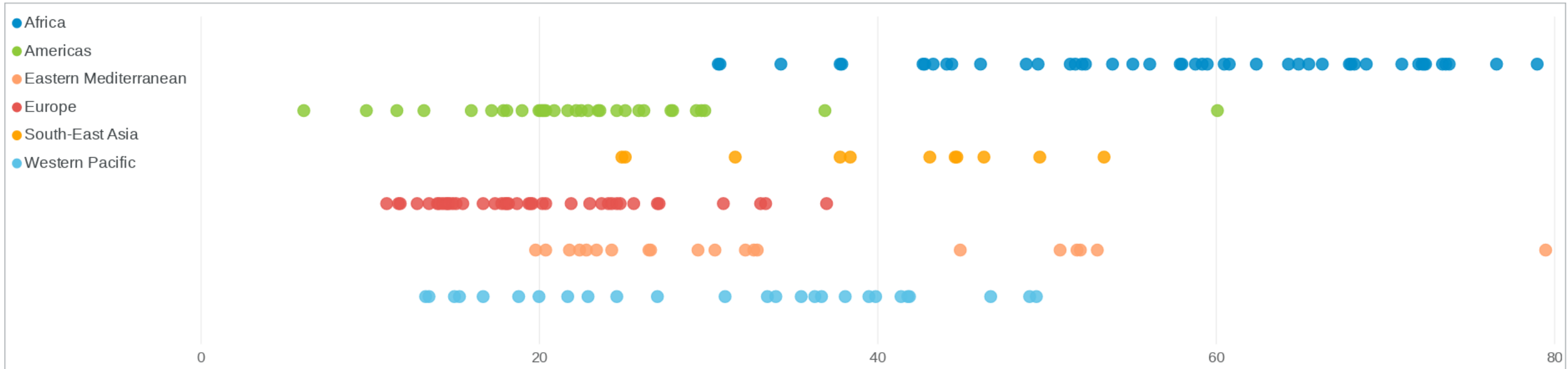
Prevalence of anaemia in children aged 6–59 months (%)

Year

Latest

Sex

Both sexes



FILTERS

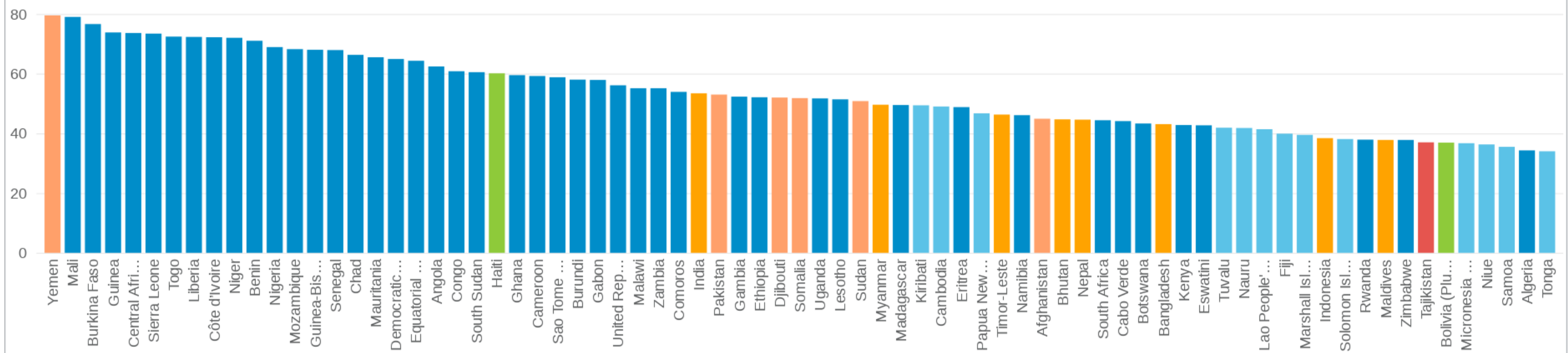
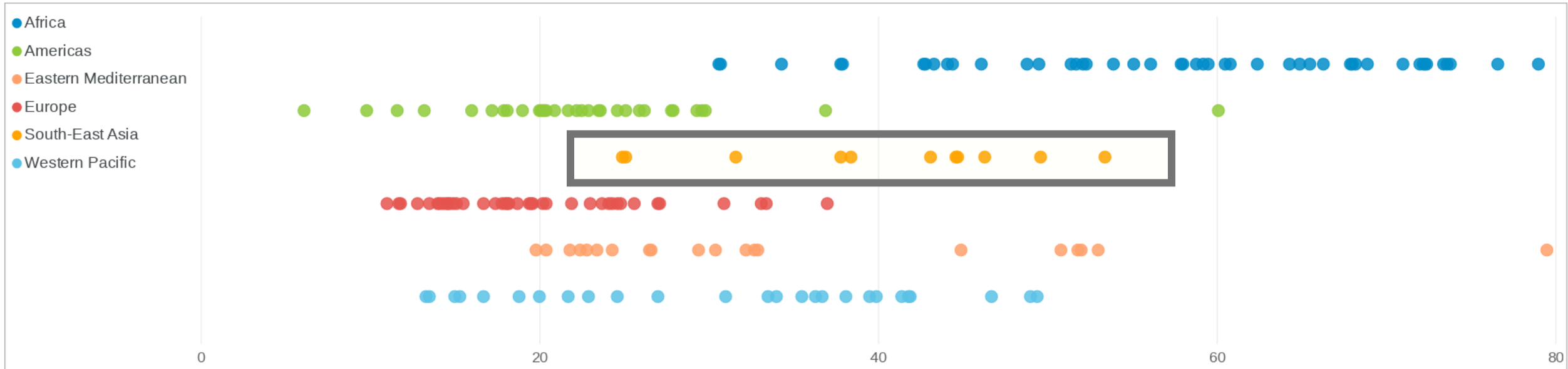
Prevalence of anaemia in children aged 6–59 months (%)

Year

Latest

Sex

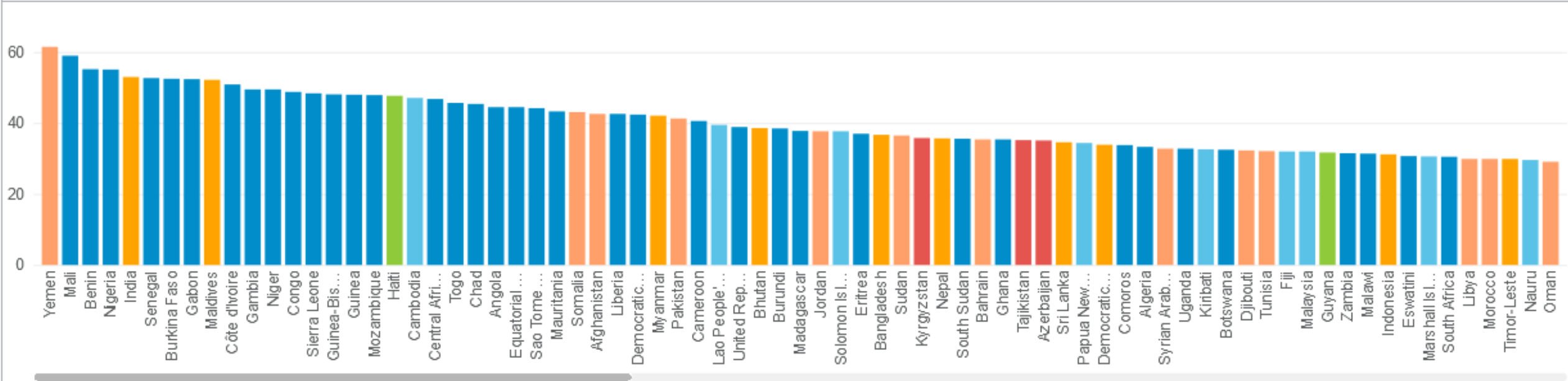
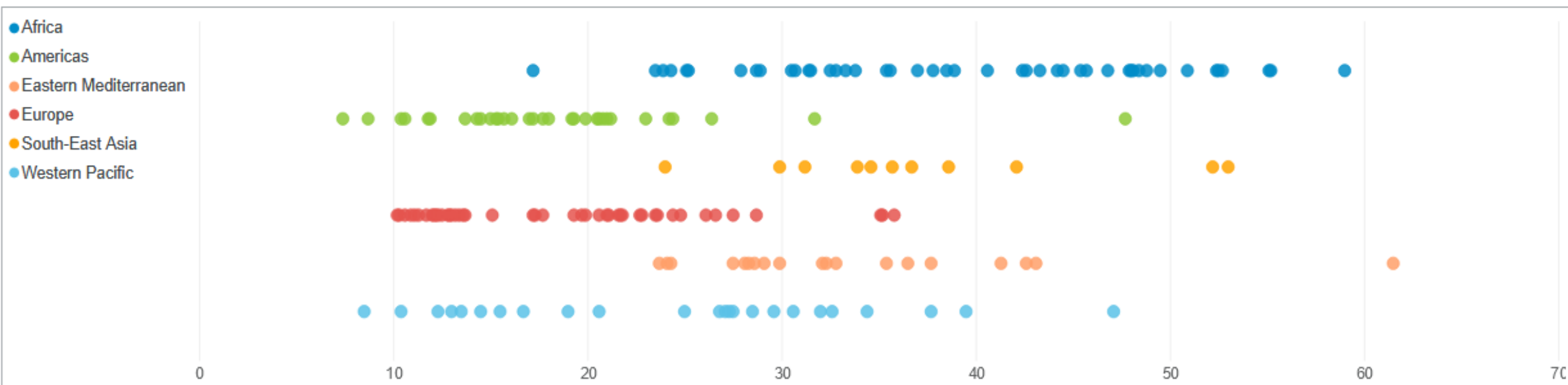
Both sexes



Prevalence of anaemia in women of reproductive age (aged 15-49) (%)

Year
Latest

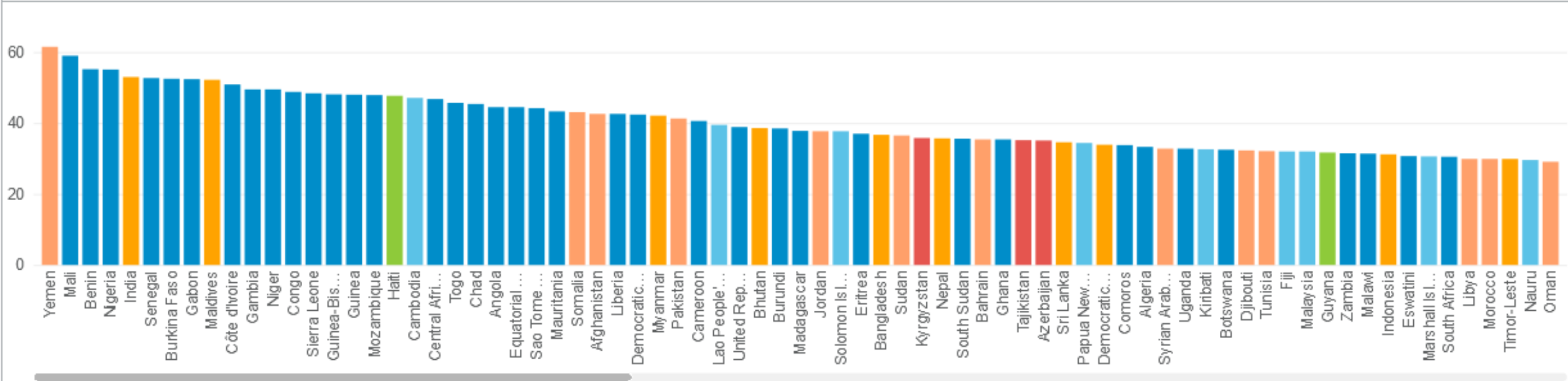
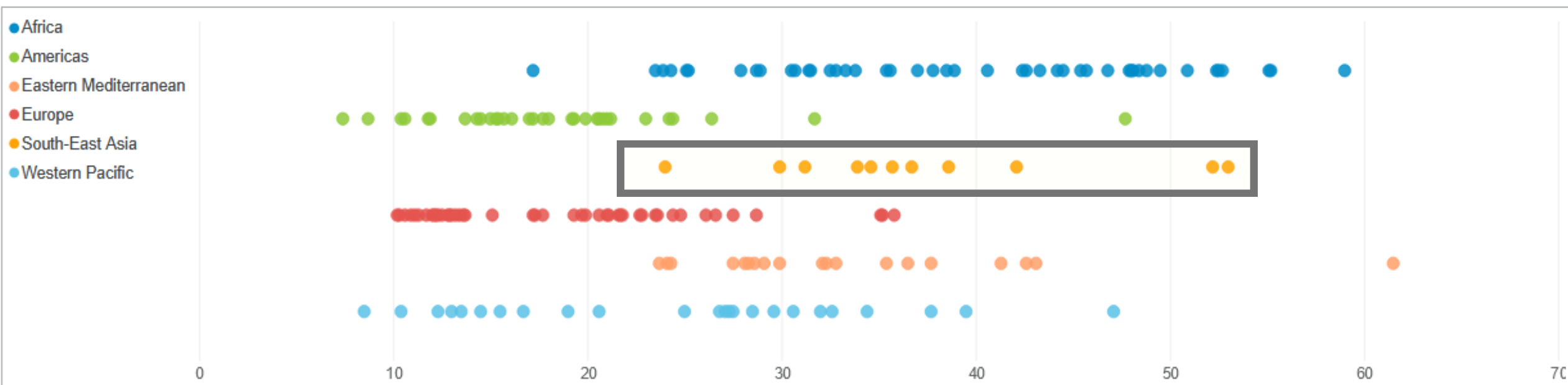
Sex
Female



Prevalence of anaemia in women of reproductive age (aged 15-49) (%)

Year
Latest

Sex
Female



FILTERS

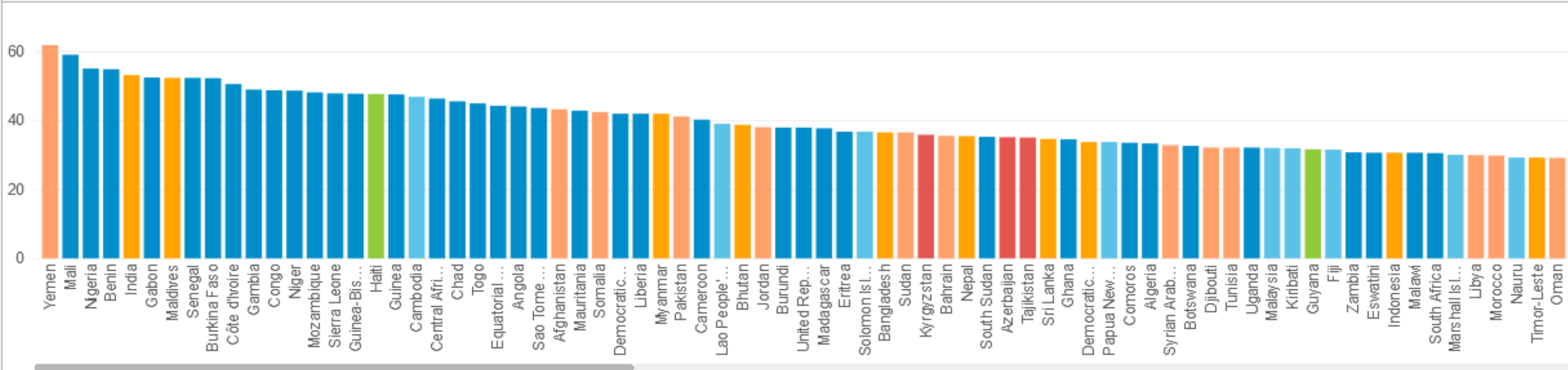
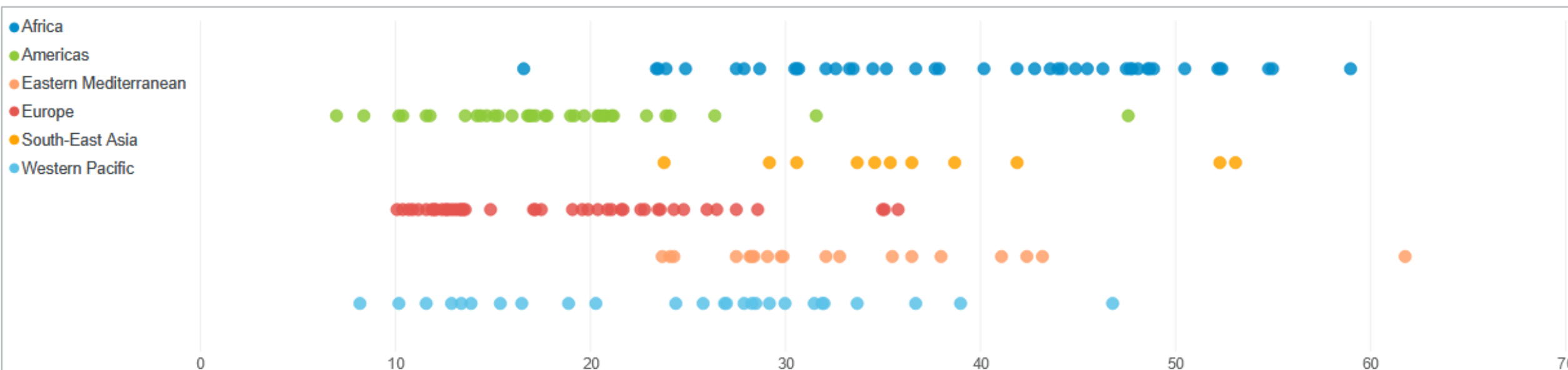
Prevalence of anaemia in non-pregnant women (aged 15-49) (%)

Year

Latest

Sex

Female

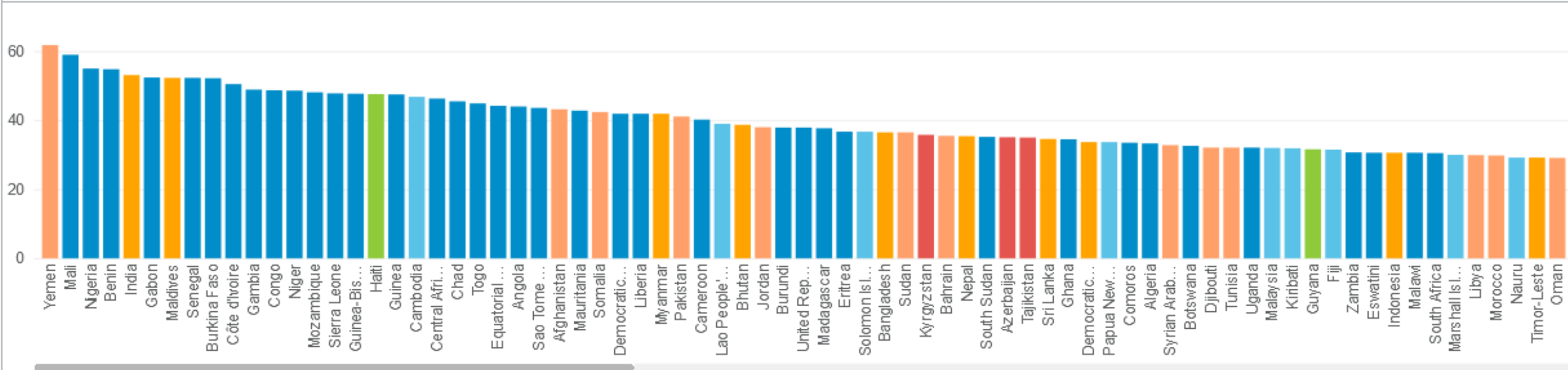
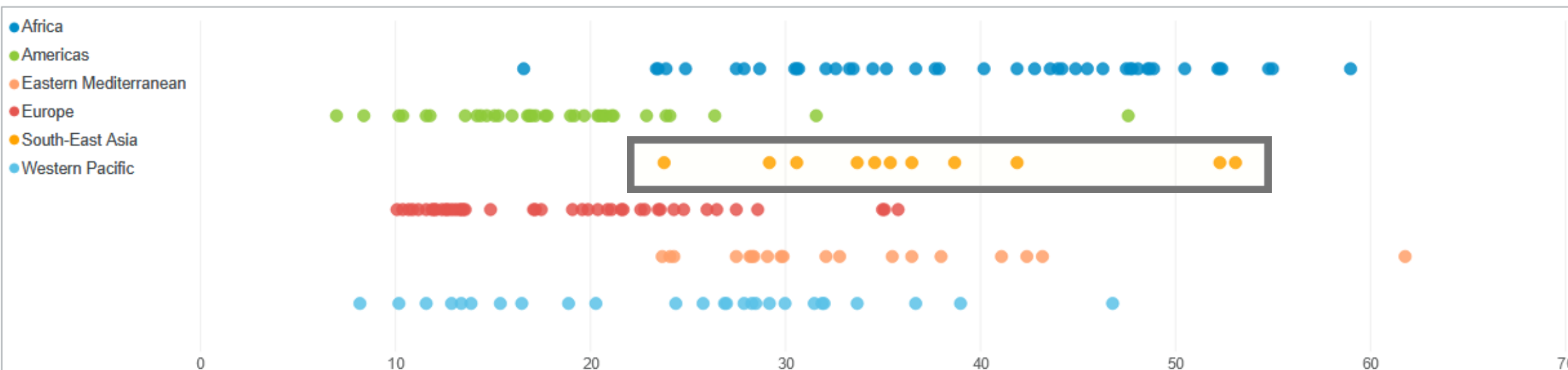


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Prevalence of anaemia in non-pregnant women (aged 15-49) (%)

Year
Latest

Sex
Female



FILTERS

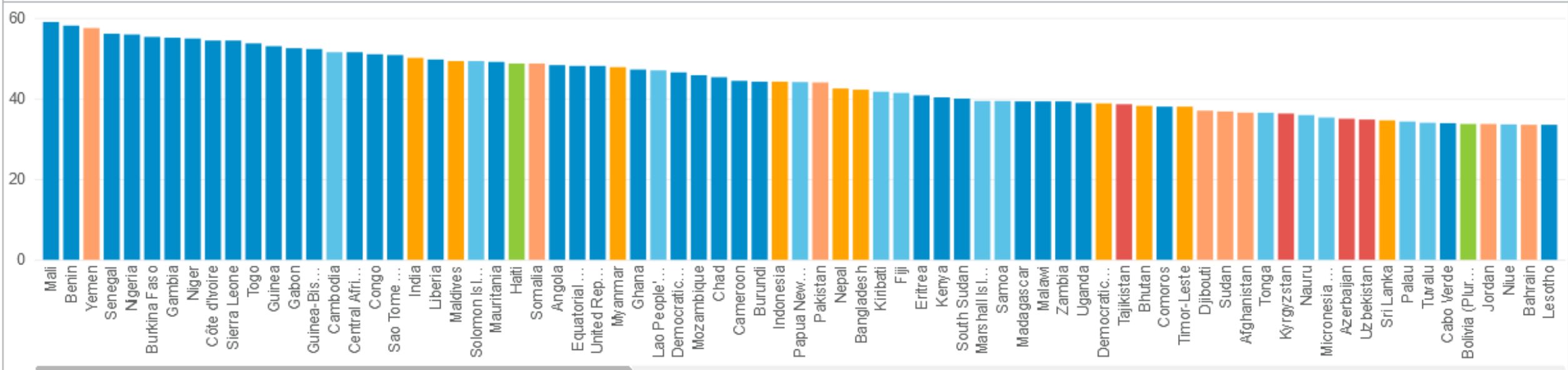
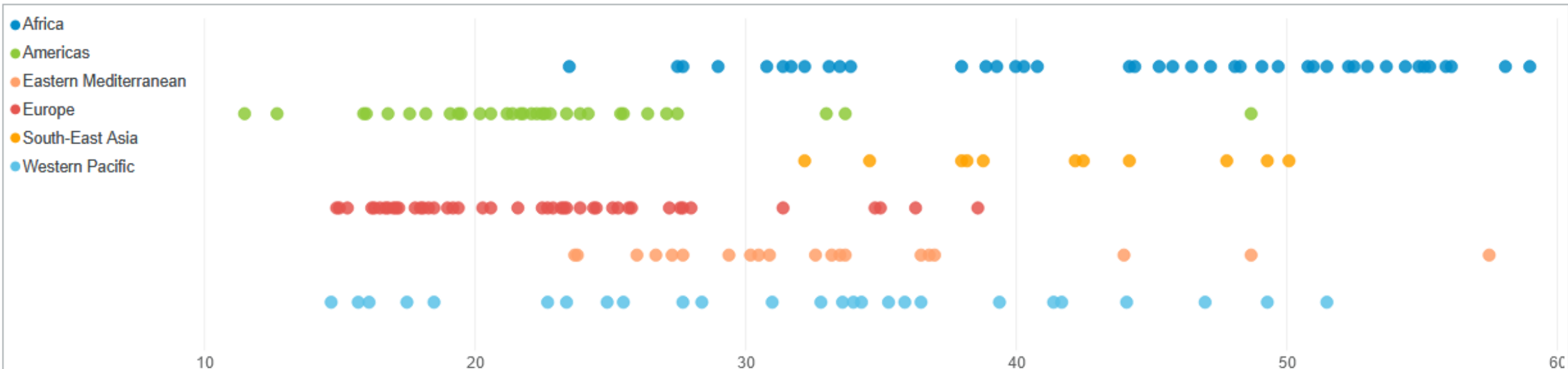
Prevalence of anaemia in pregnant women (aged 15-49) (%)

Year

Latest

Sex

Female



FILTERS

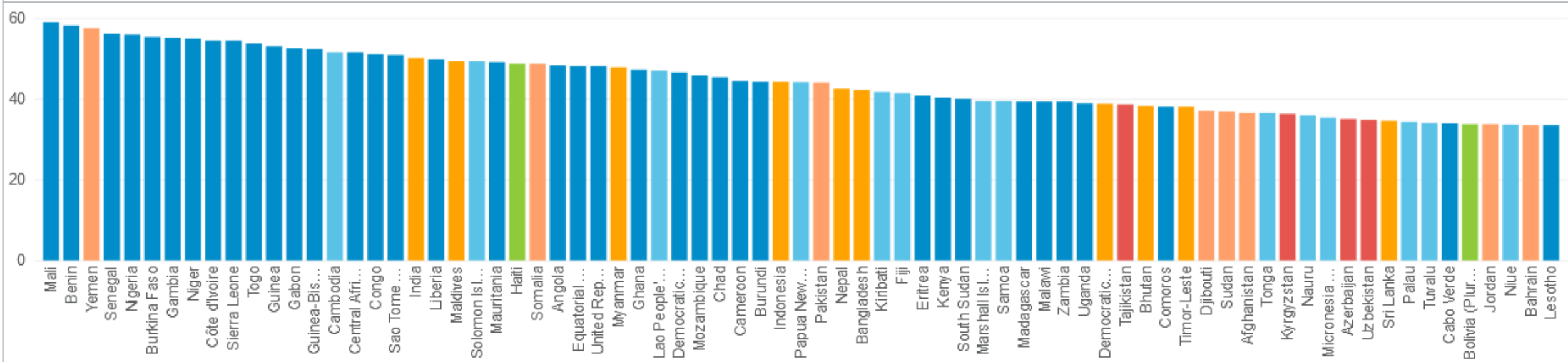
Prevalence of anaemia in pregnant women (aged 15-49) (%)

Year

Latest

Sex

Female



Children 6-59 months of age

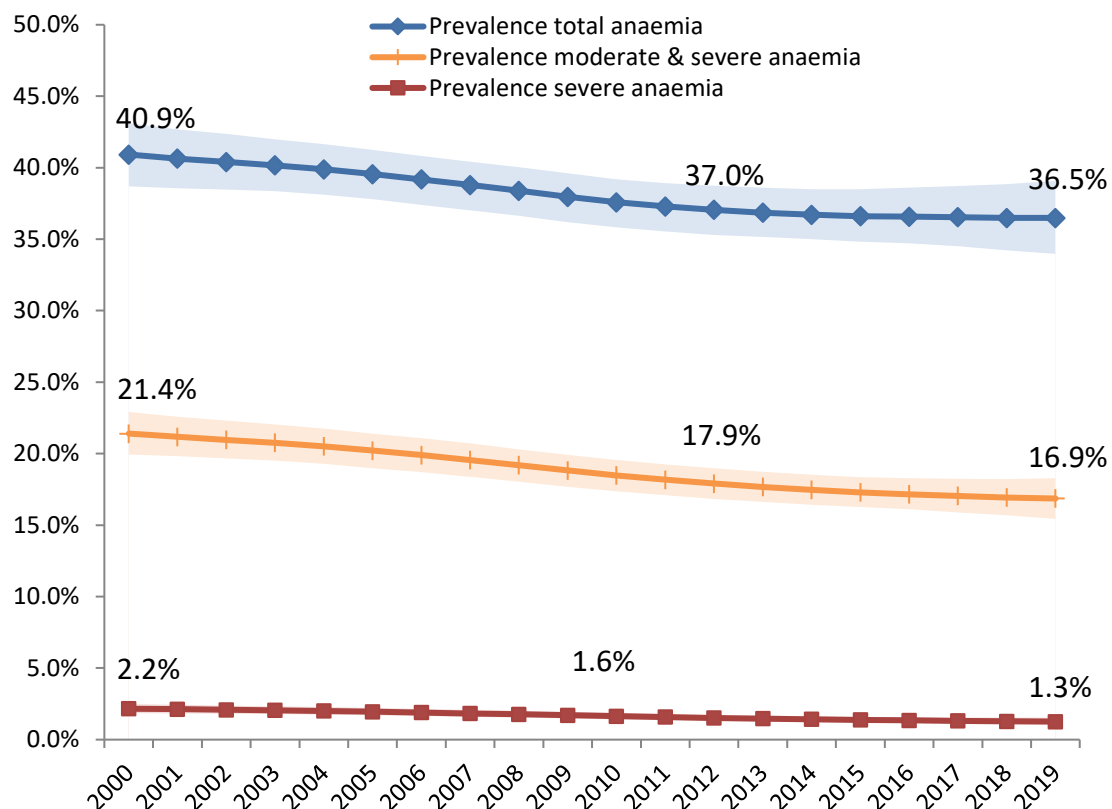
Global anaemia prevalence estimates 2019

WHO region	Anaemia percentage (95% CI)	Anaemia number (millions) (95% CI)	Severe anaemia percentage (95% CI)	Severe anaemia number (millions) (95% CI)
African	60 (57-64)	102.5 (96.3-108.5)	2.7 (2.1-3.4)	4.6 (3.6-5.8)
Americas	17 (13-20)	12.1 (9.8-14.7)	0.2 (0.07-0.4)	0.1 (0.06-0.3)
Eastern Mediterranean	43 (36-50)	36.4 (30.2-42.4)	2.0 (0.9-3.3)	1.7 (0.8-2.8)
European	20 (15-27)	11.5 (8.2-15.5)	0.1 (0.06-0.4)	0.1 (0.03-0.2)
South-East Asia	49 (39-58)	83.2 (66.4-98.2)	1.1 (0.5-2.1)	1.8 (0.8-3.5)
Western Pacific	19 (11-32)	23.3 (13.0-38.1)	0.3 (0.1-0.7)	0.3 (0.1-0.8)
Global	40 (36-44)	269 (244-297)	1.3 (1.0-1.7)	8.7 (6.7-11.2)

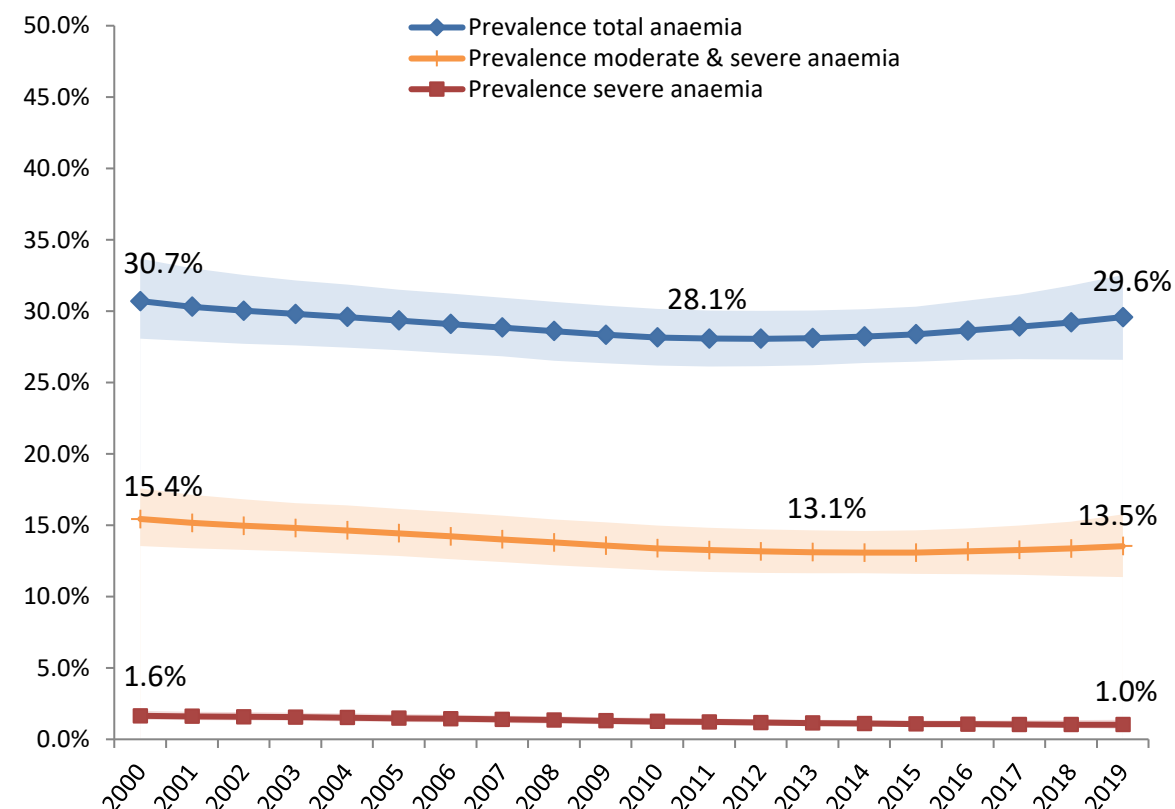
Anaemia prevalence estimates

Global trends for women: 2000-2019

Pregnant women



Non-pregnant women 15-49 years of age

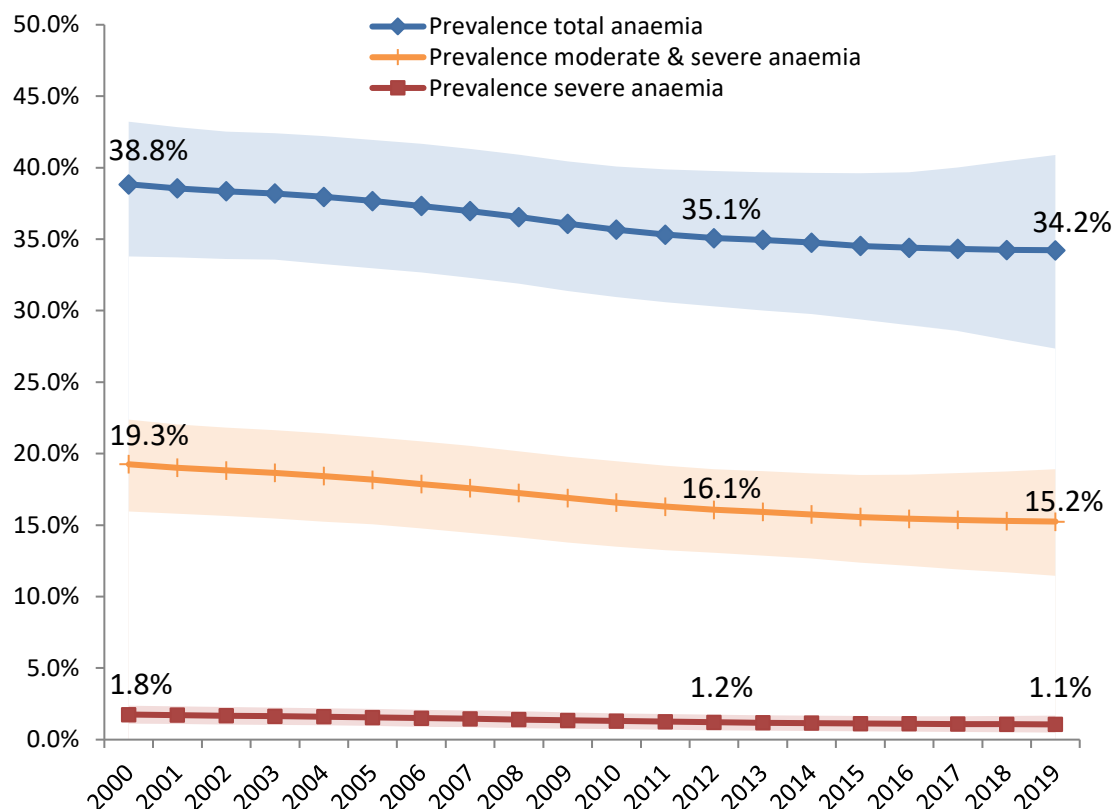


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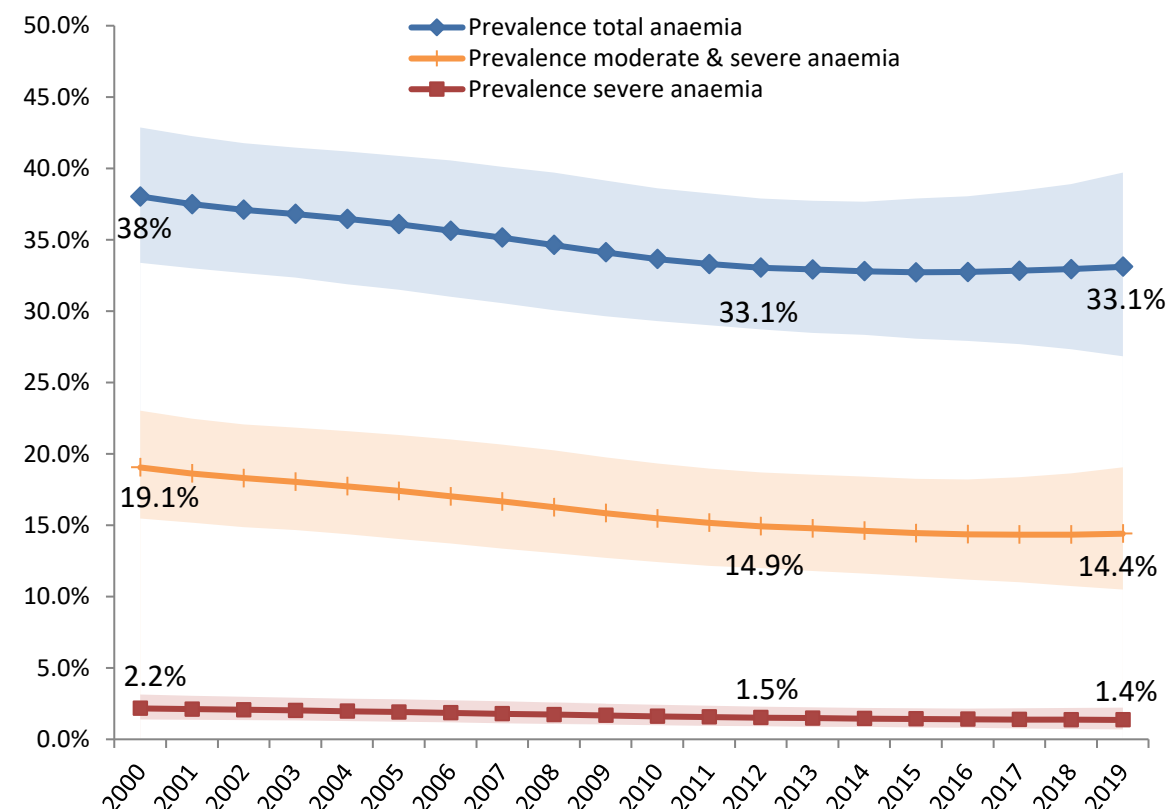
Anaemia prevalence estimates

Trends for women in the ESCWA region: 2000-2019

Pregnant women



Non-pregnant women 15-49 years of age



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Severe anaemia defined as <70 g/L in pregnant women and children 6-59 months age and <80 g/L in non-pregnant women

Non pregnant women

Global anaemia prevalence estimates by EC regions 2019

UN region	Anaemia percentage (95% CI)	Anaemia number (millions) (95% CI)	Severe anaemia percentage (95% CI)	Severe anaemia number (millions) (95% CI)
ESCWA	33.1 (26.8,19.7)	33.1 (26.8,39.7)	1.4 (0.7,2.2)	1.4 (0.7,2.2)
ECA (E,W,S,C,N Africa)	38.4 (34.7,42.1)	110.7 (100.2,121.3)	1.3 (1,1.6)	3.7 (2.8,4.7)
ECE (Europe)	16.6 (13.2,20.8)	47.7 (37.8,59.7)	0.4 (0.2,0.8)	1.3 (0.7,2.4)
ECLAC (LAC and Caribbean)	17.1 (12.4,23)	28.2 (20.5,38.1)	0.5 (0.3,1)	0.9 (0.4,1.6)
ESCAP (East and North Asia)	15.8 (10,24.1)	60.6 (38.2,92.2)	0.3 (0.1,0.6)	1 (0.5,2.3)
ESCAP (South East Asia)	26.8 (20.9,33.4)	44.8 (35.1,56)	0.6 (0.4,1.1)	1 (0.6,1.8)
ESCAP(South and South-West Asia)	47.5 (40.3,54.3)	236.5 (200.7,270.2)	2 (1.2,3.2)	10.1 (0.7,2.2)
Global	29.6 (26.6-32.5)	538.8 (484.5,592.4)	1 (0.8-1.4)	18.7 (13.7-25.1)

Pregnant women

Global anaemia prevalence estimates by EC regions 2019

UN region	Anaemia percentage (95% CI)	Anaemia number (millions) (95% CI)	Severe anaemia percentage (95% CI)	Severe anaemia number (millions) (95% CI)
ESCWA	34.2 (27.3-40.9)	2.3 (1.8,2.7)	1.1 (0.5-1.7)	0.1 (0,0.1)
ECA (E,W,S,C,N Africa)	44.1 (41.4-46.7)	12 (11.3,12.7)	1.9 (1.5-2.3)	0.51 (0.41,0.62)
ECE (Europe)	20.2 (15.5-25.9)	1.9 (1.5,2.5)	0.3 (0.1-0.6)	0.03 (0.01,0.06)
ECLAC (LAC and Caribbean)	21.9 (15.5-29.4)	1.4 (1,1.9)	0.4 (0.2-0.7)	0.0 (0.0,0.0)
ESCAP (East and North Asia)	19.1 (11,31.1)	2.2 (1.2,3.5)	0.3 (0.1,0.8)	0.0 (0,0.1)
ESCAP (South East Asia)	37.5 (32.1,42.2)	2.6 (2.3,3)	0.8 (0.4,1.5)	0.1 (0.0,0.1)
ESCAP(South and South-West Asia)	46.1 (41.1,49.8)	11 (9.8,11.9)	1.7 (1,2.4)	0.40 (0.25,0.58)
Global	37 (34-39)	32 (29.8-34.2)	1.3 (1.0-1.5)	1.1 (0.9-1.4)

Anaemia prevalence estimates: 2019

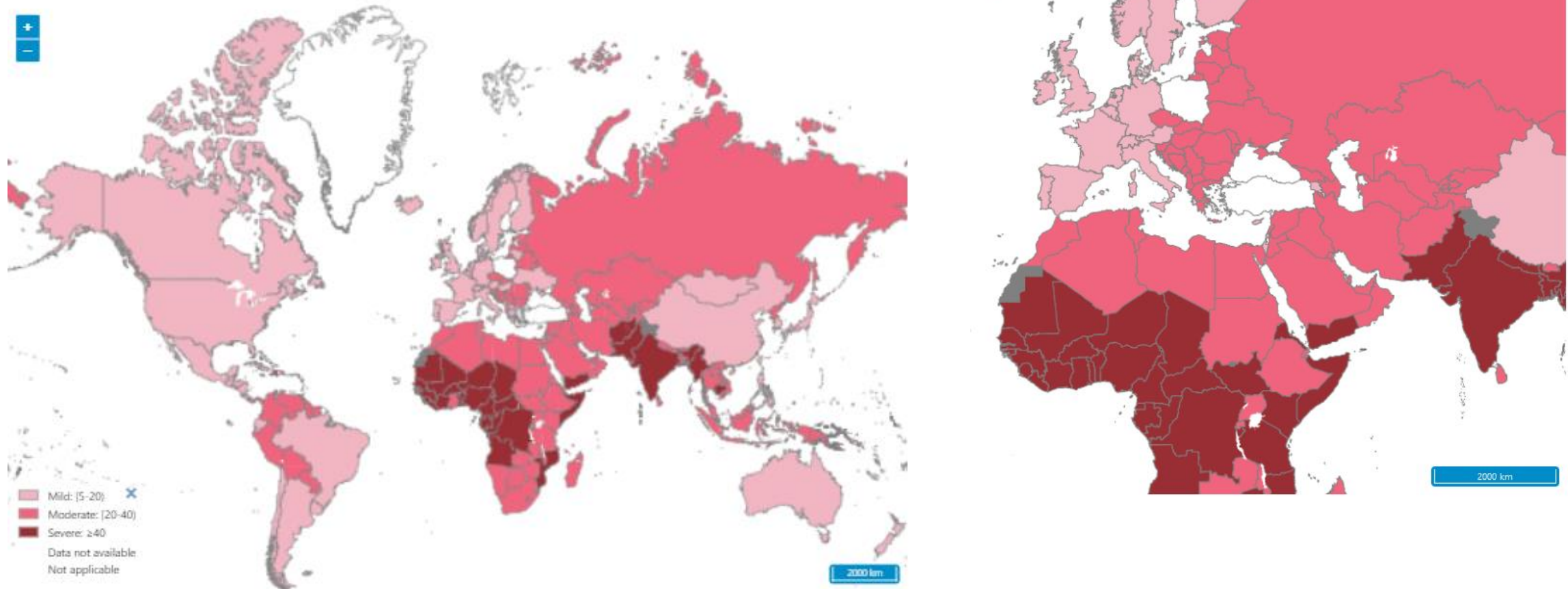
Women of reproductive age

Prevalence of anaemia in women of reproductive age (%)

FILTERS

Year

Latest

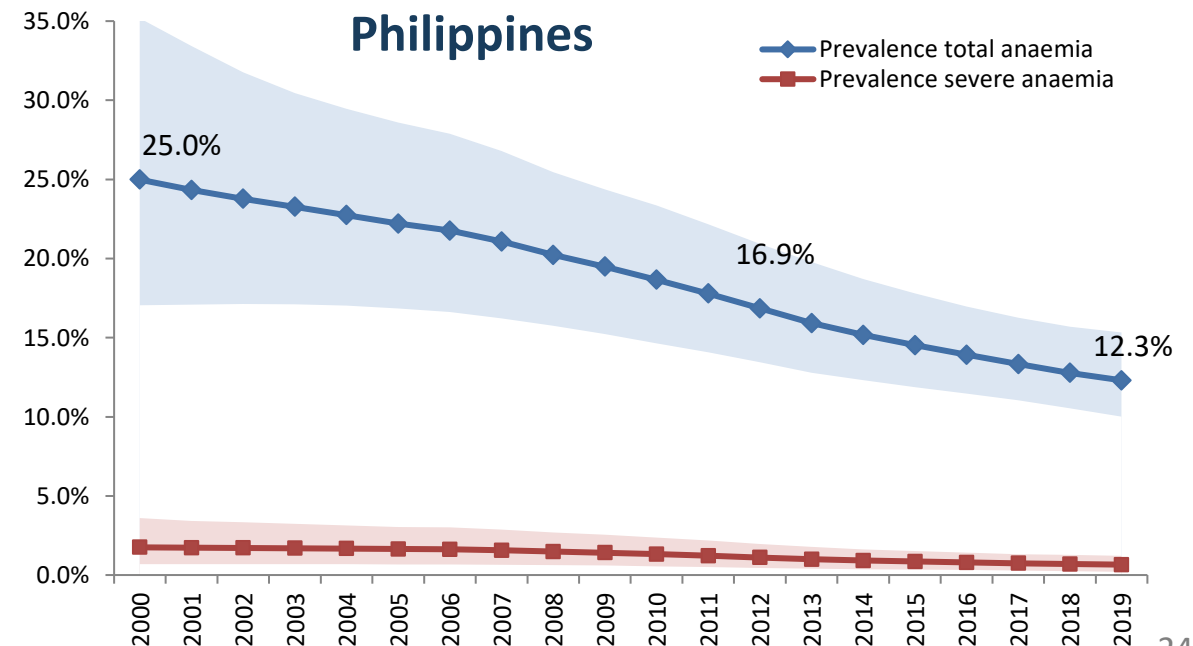
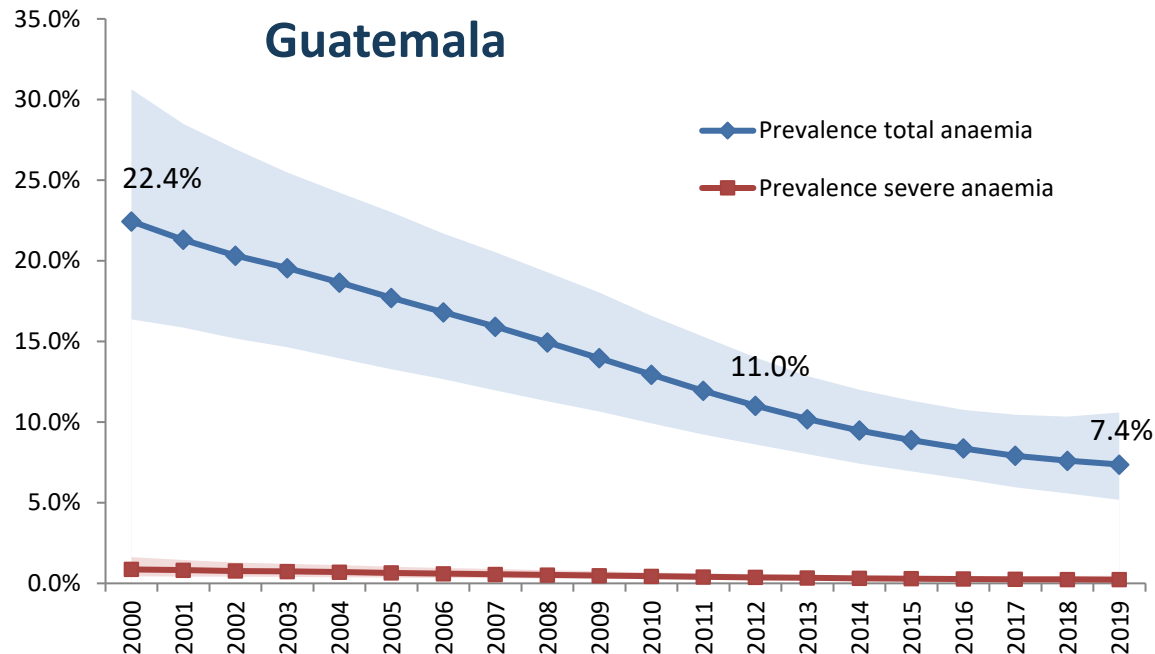


Anaemia in women of reproductive age

Global indicator and targets

- **Global nutrition target 2: reduce the prevalence of anaemia in women of reproductive age by 50% by 2025, using baseline of 2012**

- Current round of estimates indicate 2012 baseline prevalence of 28.5% and 2019 estimate of 29.9%
- Most countries appear off-track for a 50% reduction
- Guatemala and Philippines had the most progress



Acknowledgements

A talented team

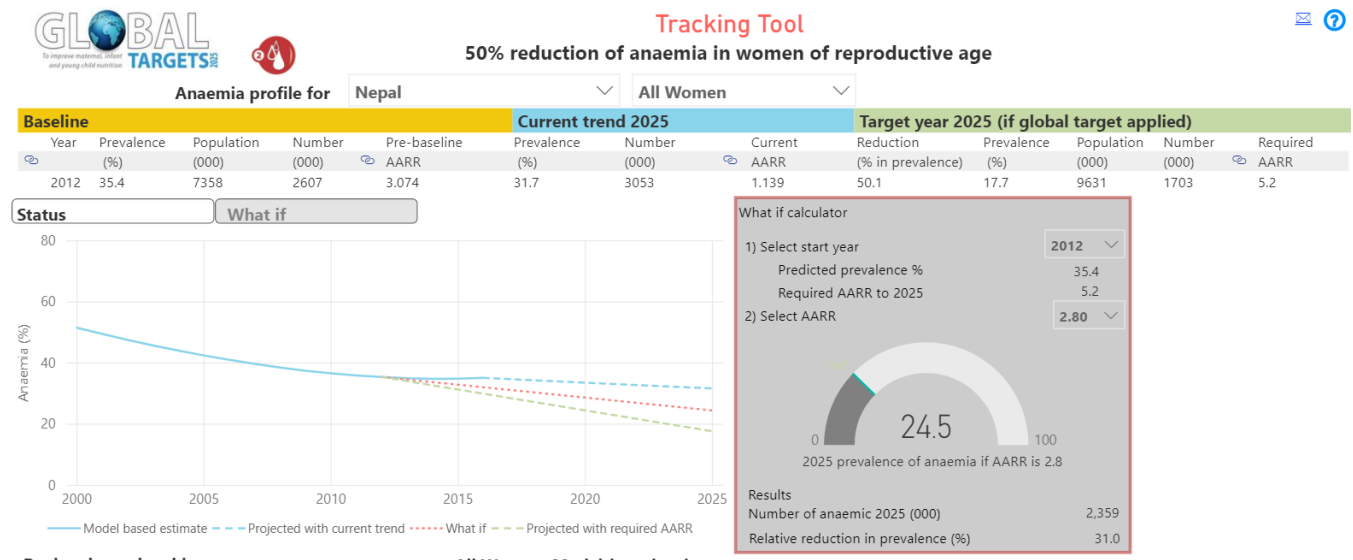
- Dr Lisa Rogers
 - WHO Food and Nutrition Action in Health Systems Unit
- Dr Elaine Borghi
 - WHO Monitoring Nutritional Status & Food Safety Events Unit
- Dr Christopher Paciorek
 - Department of Statistics, UC Berkeley
- Dr Gretchen Stevens, consultant



Micronutrient survey manual



Tracking Tool



Future plans for anaemia work

- WHO-UNICEF Technical Expert Advisory group on nutrition Monitoring (TEAM) to develop technical notes regarding data quality in anaemia assessment
- WHO to develop a Micronutrient survey analyser
- Enhance the Micronutrients database towards further equity disaggregations



Thank you



World Health
Organization
Organisation mondiale de la Santé