

Australia



Country report card

This report card contains the latest data available on the Global Obesity Observatory on overweight and obesity . Where available, data on common and relevant obesity drivers and comorbidities are also presented.



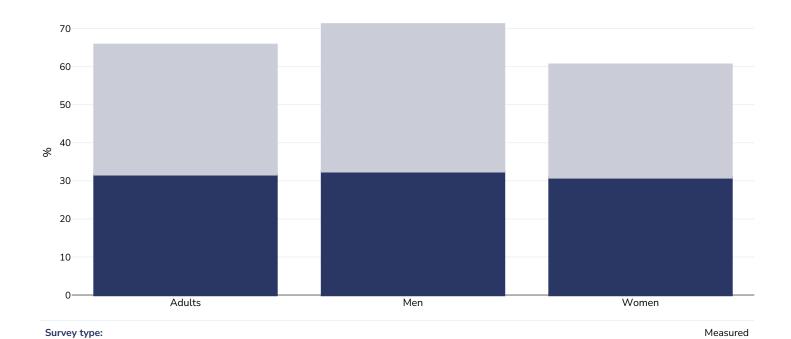
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Obesity prevalence

Adults, 2022-2023





Age:	18+
Sample size:	~12846
Area covered:	National
References:	Australian National Health Survey 2022-2023. https://www.abs.gov.au/statistics/health/health-conditions-and-risks/waist-circumference-and-bmi/2022#body-mass-index-bmi- (Accessed 03.01.2024)

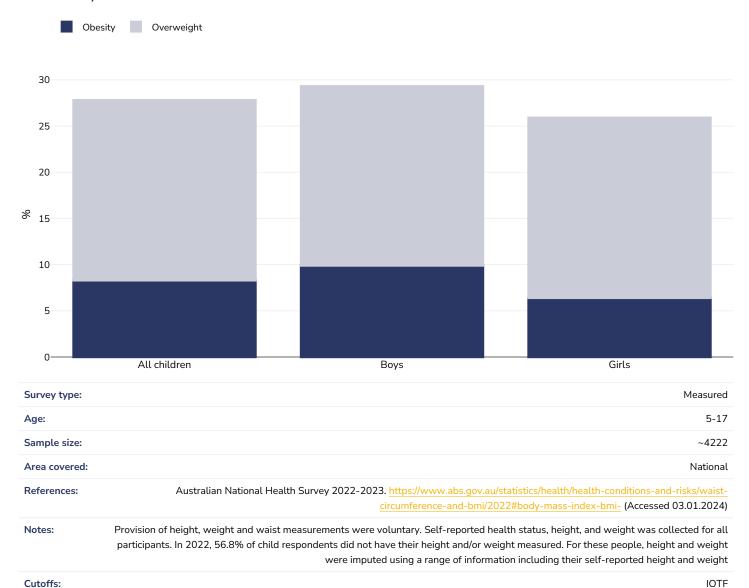
Notes:

Provision of height, weight and waist measurements were voluntary. Self-reported health status, height, and weight was collected for all participants. In 2022, 41.8% of adult respondents did not have their height and/or weight measured. For these people, height and weight were imputed using a range of information including their self-reported height and weight

Unless otherwise noted, overweight refers to a BMI between 25kg and 29.9kg/m², obesity refers to a BMI greater than 30kg/m².



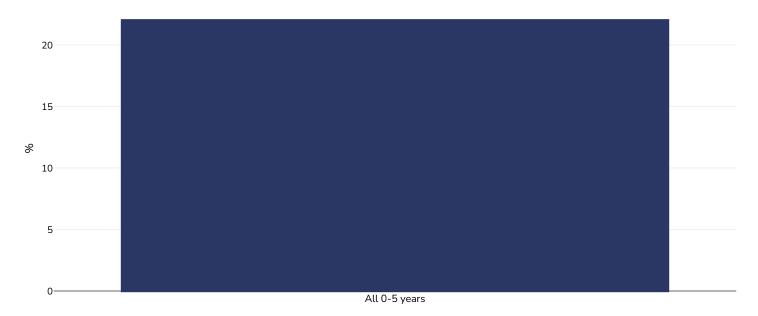
Children, 2022-2023





0-5 years, 2017-2018

Overweight or obesity



Age: 0-5

References:

Other: Australia National Health Survey 2017-18

Notes:

UNICEF/WHO/World Bank Joint Child Malnutrition Estimates Expanded Database: Overweight (Survey Estimates), May 2023, New York.

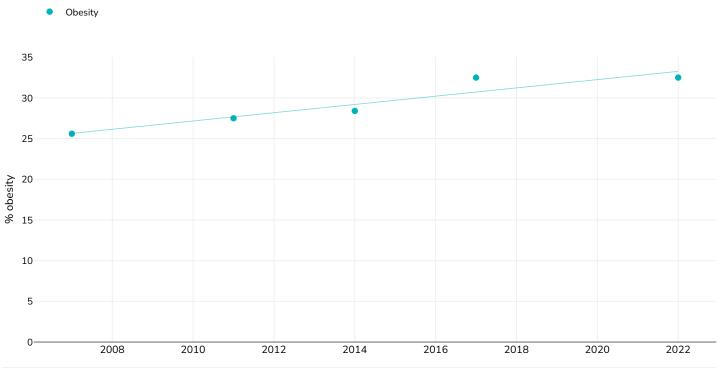
For more information about the methodology, please consult https://data.unicef.org/resources/jme-2023-country-consultations/
Percentage of children under 5 years of age falling above 2 standard deviations (moderate and severe) from the median weight-forheight of the reference population.

Definitions: =>+2SD



% Adults living with obesity in Australia 2007-2022

Men



Survey type: Measured

References:

2007: Australian Bureau of Statistics (ABS). National Health Survey: Summary of results. Canberra, Australia, ABS, 2009. WHO Global InfoBase reference:102910

2011: Australian Institute of Health and Welfare 2015. Cardiovascular disease, diabetes and chronic kidney diseaseÃ????Australian facts: Risk factors. Cardiovascular, diabetes and chronic kidney disease series no. 4. Cat. no. CDK 4. Canberra: AIHW. ABS 2013a. Australian Health Survey: biomedical results for chronic diseases, 2011–12. ABS. cat. no. 4364.0.55.005. Canberra: ABS. Australian

Health Survey 2011-12. http://www.aihw.gov.au/publication-detail/?id=60129550538 2014: Australian National Health Survey, 2014-15 First Results. Australian Bureau of Statistics.

http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/4364.0.55.001Appendix22014-

15?opendocument&tabname=Notes&prodno=4364.0.55.001&issue=2014-15&num=&view= (last accessed 27th September 2017)
2017: Australian National Health Survey 2017-18 (provisional results).

 $\underline{\text{http://abs.gov.au/ausstats/abs@.nsf/Lookup/by\%20Subject/4364.0.55.001} \sim 2017-2017-2018$

18~Main%20Features~About%20the%20National%20Health%20Survey~5 (accessed 12.12.18)

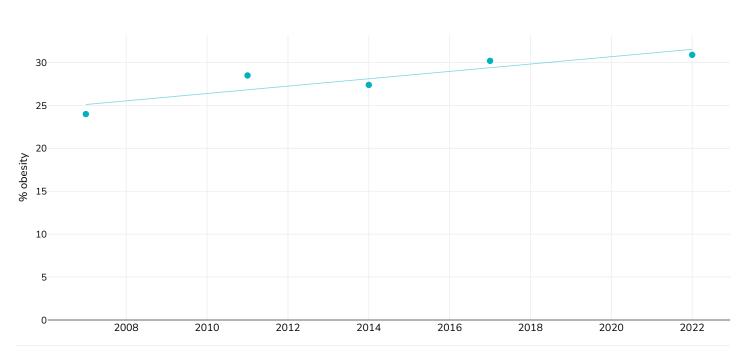
2022: Australian National Health Survey 2022-2023. https://www.abs.gov.au/statistics/health/health-conditions-and-risks/waist-circumference-and-bmi/2022#body-mass-index-bmi- (Accessed 03.01.2024)

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Women





Survey type: Measured

References:

2007: Australian Bureau of Statistics (ABS). National Health Survey: Summary of results. Canberra, Australia, ABS, 2009. WHO Global InfoBase reference:102910

2011: Australian Institute of Health and Welfare 2015. Cardiovascular disease, diabetes and chronic kidney diseaseÃ?â??Australian facts: Risk factors. Cardiovascular, diabetes and chronic kidney disease series no. 4. Cat. no. CDK 4. Canberra: AIHW. ABS 2013a. Australian Health Survey: biomedical results for chronic diseases, 2011–12. ABS. cat. no. 4364.0.55.005. Canberra: ABS. Australian Health Survey 2011-12. http://www.aihw.gov.au/publication-detail/?id=60129550538

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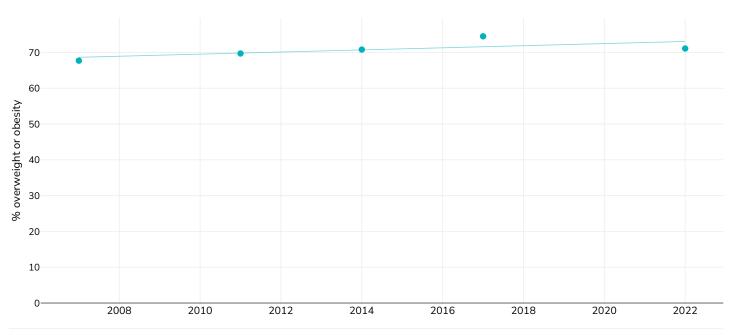
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% Adults living with overweight or obesity in Australia 2007-2022

Men

Overweight or obesity



Survey type: Measured

References:

2007: Australian Bureau of Statistics (ABS). National Health Survey: Summary of results. Canberra, Australia, ABS, 2009. WHO Global InfoBase reference:102910

2011: Australian Institute of Health and Welfare 2015. Cardiovascular disease, diabetes and chronic kidney diseaseÃ????Australian facts: Risk factors. Cardiovascular, diabetes and chronic kidney disease series no. 4. Cat. no. CDK 4. Canberra: AIHW. ABS 2013a. Australian Health Survey: biomedical results for chronic diseases, 2011–12. ABS. cat. no. 4364.0.55.005. Canberra: ABS. Australian

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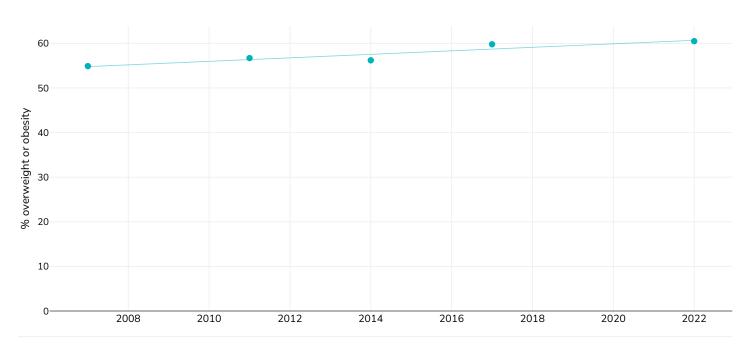
2022: Australian National Health Survey 2022-2023. https://www.abs.gov.au/statistics/health/health-conditions-and-risks/waist-circumference-and-bmi/2022#body-mass-index-bmi- (Accessed 03.01.2024)

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Women

Overweight or obesity



Survey type: Measured

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2007: Australian Bureau of Statistics (ABS). National Health Survey: Summary of results. Canberra, Australia, ABS, 2009. WHO Global InfoBase reference:102910

2011: Australian Institute of Health and Welfare 2015. Cardiovascular disease, diabetes and chronic kidney diseaseÃ?â??Australian facts: Risk factors. Cardiovascular, diabetes and chronic kidney disease series no. 4. Cat. no. CDK 4. Canberra: AIHW. ABS 2013a. Australian Health Survey: biomedical results for chronic diseases, 2011–12. ABS. cat. no. 4364.0.55.005. Canberra: ABS. Australian Health Survey 2011-12. http://www.aihw.gov.au/publication-detail/?id=60129550538

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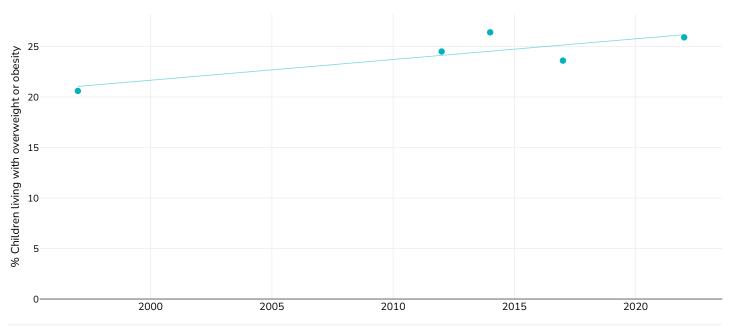
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Children living with overweight or obesity in Australia

Girls

Overweight or obesity



Survey type: Measured

References:

1997: Booth ML, Dobbins T, Okely D, Denney-Wilson E and Hardy LL. 2007. Trends in the prevalence of overweight and obesity among young Australians, 1985, 1997 and 2004. Obesity, 15 (5): 1089 - 1095.

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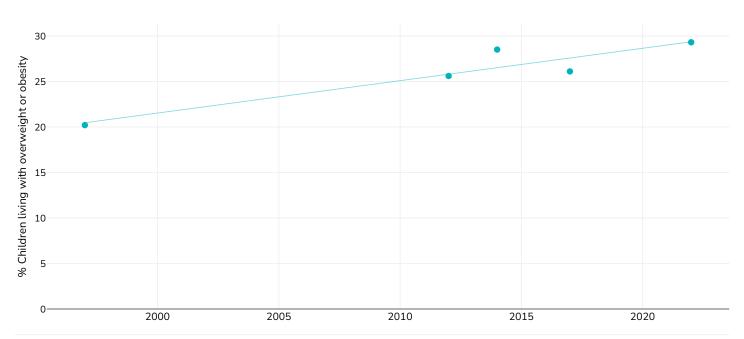
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Boys

Overweight or obesity



Survey type: Measured

References:

1997: Booth ML, Dobbins T, Okely D, Denney-Wilson E and Hardy LL. 2007. Trends in the prevalence of overweight and obesity among young Australians, 1985, 1997 and 2004. Obesity, 15 (5): 1089 - 1095.

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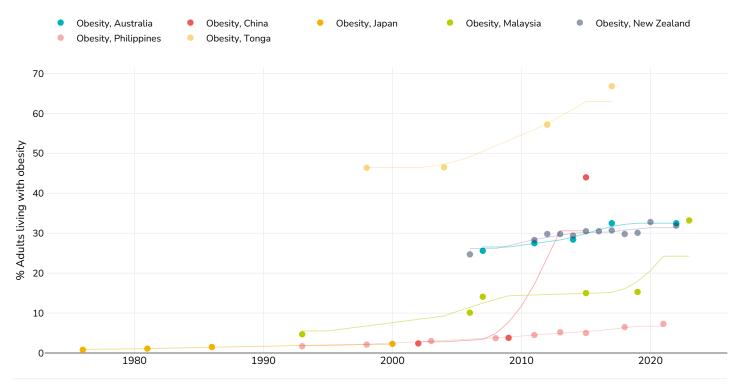
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% Adults living with obesity in selected countries in the Asia/Oceania Region 1975-2019, selected countries



Men



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1976, 1981, 1986: Yoshiike N, Seino F, Tajima S, Arai Y, Kawano M, Furuhata T, Inoue S. Twenty-year changes in the prevalence of overweight in Japanese adults: The National Nutrition Survey 1976-95. Obesity Reviews 2002;3:183-190

1993, 2005, 2013: Chang HC, Yang HC, Chang HY, et al. Morbid obesity in Taiwan: Prevalence, trends, associated social demographics, and lifestyle factors. PLoS One. 2017;12(2):e0169577. Published 2017 Feb 2. doi:10.1371/journal.pone.0169577

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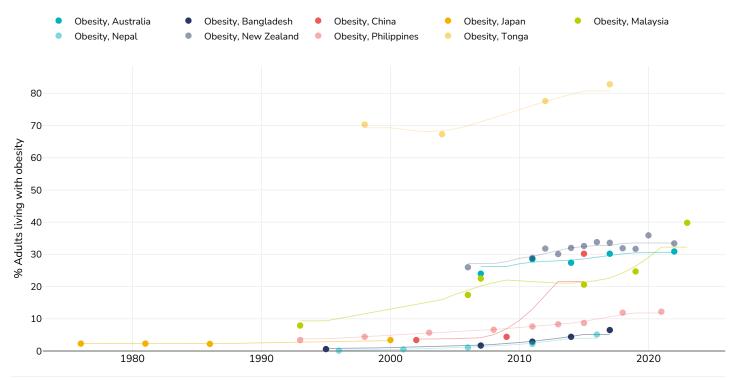
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Women



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1976, 1981, 1986: Yoshiike N, Seino F, Tajima S, Arai Y, Kawano M, Furuhata T, Inoue S. Twenty-year changes in the prevalence of overweight in Japanese adults: The National Nutrition Survey 1976-95. Obesity Reviews 2002;3:183-190

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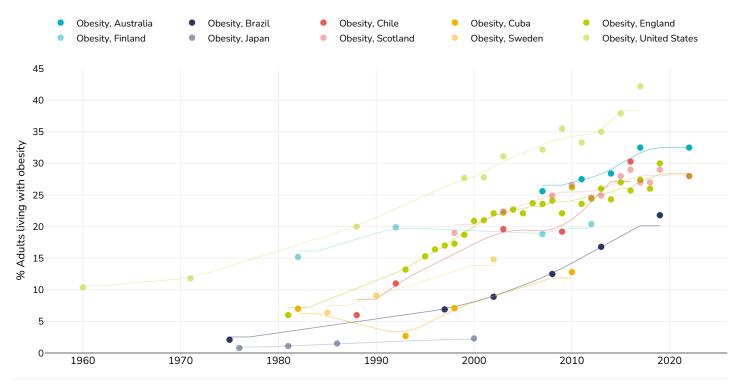




% Adults living with obesity in selected countries worldwide 1976-2018, selected countries



Men



References:

1960, 1971, 1973, 1976, 1988, 1991: Flegal KM, Carroll MD, Kuczmarski RJ, Johnson CL. Overweight and obesity in the United States: prevalence and trends, 1960-1994. International Journal of Obesity (1998);22:39-47

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1982, 1993: Rodriguez-Ojea A, Jimenez S, Berdasco A, Esquivel M. The nutrition transition in Cuba in the nineties:an overview. Public health Nutrition 2002:5(1A), 129-133

1985: Berg C, Rosengren A, Aires N, :appas G, Toren K, Thelle D, Lissner L. Trends in overweight and obesity from 1985 to 2002 in Goteborg, West Sweden. IJO 2005 Aug;29(8):916-24

1990: Berg C, Rosengren A, Aires N, :appas G, Toren K, Thelle D, Lissner L. Trends in overweight and obesity from 1985 to 2002 in Goteborg, West Sweden. IJO 2005 online published ahead of print.

1992: Uauy R, Albal C, Kain J. Obesity Trends in Latin America: Transiting from Under-to Overweight. Journal of Nutrition

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Reviews, 2001;2:99-196

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2000: Ogden CL, Carroll MD, Curtin LR, McDowell MA, Tabak CJ, Flegal KM. Prevalence of Overweight and Obesity in the United States, 1999-2004. JAMA 2006;295(13):1549-1555

2001: Health Survey for England 2001.

2002: Monteiro CA, Conde WL and Popkin BA. (2007). Income-specific trends in obesity in Brazil: 1975 - 2003. American Journal of Public Health, 97 (10): 1808 - 1812.

2003: 2003 ENS Report. Final results on the National Health Survey. http://epi.minsal.cl/epi/html/invest/ENS/informeFinalENS.pdf.

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2009: NHANES Survey - Published in Flegal KM, Carrolll MD, Kit BK, Ogden CL. Prevalence of Obesity and Trends in the Distribution of

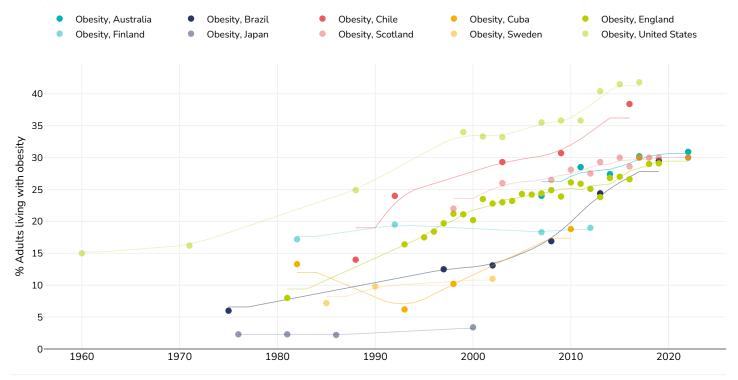
Kansanterveyslaitos. Yliopistopaino, Helsinki 2008.

2008: Health Survey for England 2008.





Women



References:

1960, 1971, 1973, 1976, 1988, 1991: Flegal KM, Carroll MD, Kuczmarski RJ, Johnson CL. Overweight and obesity in the United States: prevalence and trends, 1960-1994. International Journal of Obesity (1998);22:39-47

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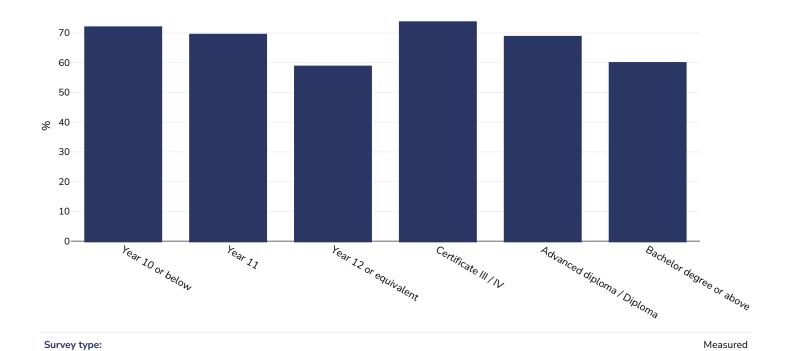




Overweight/obesity by education

Adults, 2022-2023

Overweight or obesity



Age:	18+
Sample size:	~12846
Area covered:	National
References:	Australian National Health Survey 2022-2023. https://www.abs.gov.au/statistics/health/health-conditions-and-risks/waist-circumference-and-bmi/2022#body-mass-index-bmi (Accessed 03.01.2024)

Notes:

Provision of height, weight and waist measurements were voluntary. Self-reported health status, height, and weight was collected for all participants. In 2022, 41.8% of adult respondents did not have their height and/or weight measured. For these people, height and weight were imputed using a range of information including their self-reported height and weight

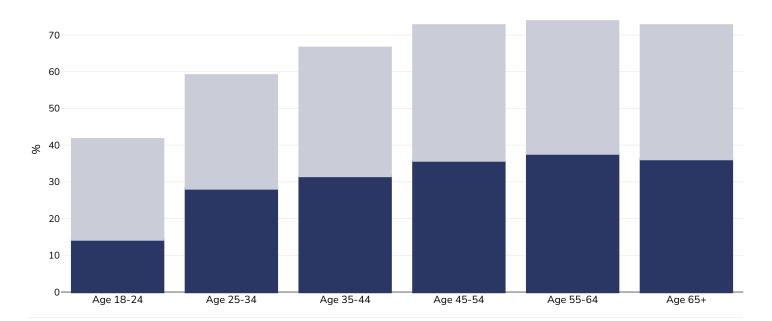
Unless otherwise noted, overweight refers to a BMI between 25kg and 29.9kg/m², obesity refers to a BMI greater than 30kg/m².



Overweight/obesity by age

Adults, 2022-2023





Measured Survey type: ~12846 Sample size: Area covered: National $Australian\ National\ Health\ Survey\ 2022-2023.\ \underline{https://www.abs.gov.au/statistics/health/health-conditions-and-risks/waist-risks/wai$ References: circumference-and-bmi/2022#body-mass-index-bmi- (Accessed 03.01.2024)

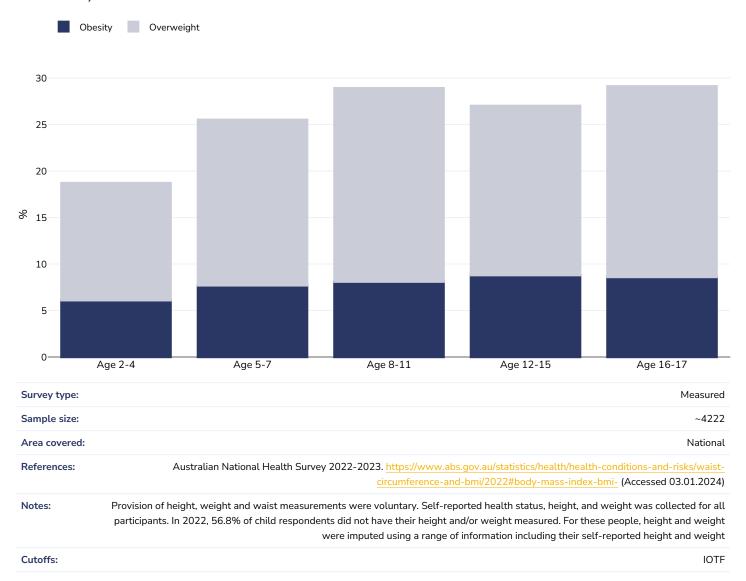
Notes:

Provision of height, weight and waist measurements were voluntary. Self-reported health status, height, and weight was collected for all participants. In 2022, 41.8% of adult respondents did not have their height and/or weight measured. For these people, height and weight were imputed using a range of information including their self-reported height and weight

 $Unless \ otherwise \ noted, overweight \ refers \ to \ a \ BMI \ between \ 25kg \ and \ 29.9kg/m^2, obesity \ refers \ to \ a \ BMI \ greater \ than \ 30kg/m^2.$



Children, 2022-2023

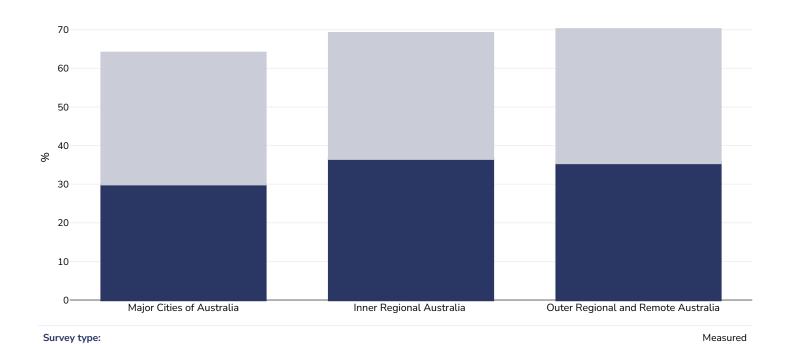




Overweight/obesity by region

Adults, 2022-2023





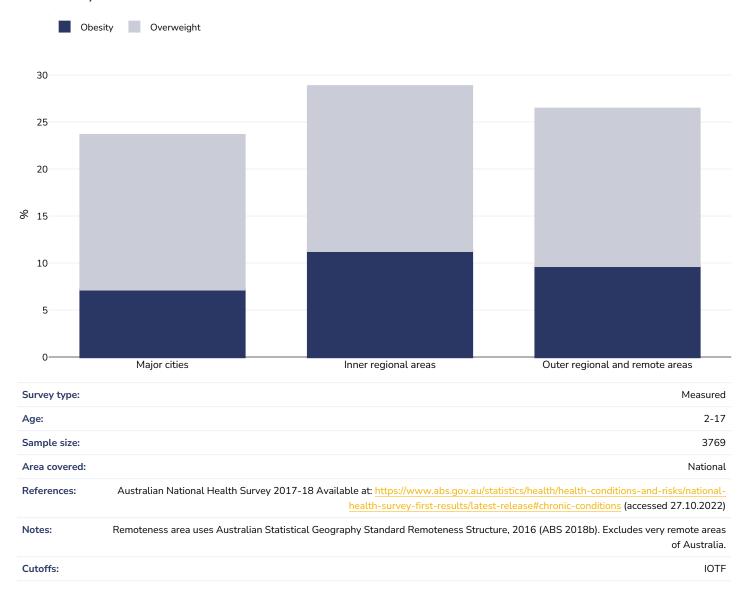
Age:	18+
Sample size:	~12846
Area covered:	National
References:	Australian National Health Survey 2022-2023. https://www.abs.gov.au/statistics/health/health-conditions-and-risks/waist-circumference-and-bmi/2022#body-mass-index-bmi- (Accessed 03.01.2024)

Notes: Provision of height, weight and waist measurements were voluntary. Self-reported health status, height, and weight was collected for all participants. In 2022, 41.8% of adult respondents did not have their height and/or weight measured. For these people, height and weight were imputed using a range of information including their self-reported height and weight

Unless otherwise noted, overweight refers to a BMI between 25kg and 29.9kg/m², obesity refers to a BMI greater than 30kg/m².



Children, 2017-2018

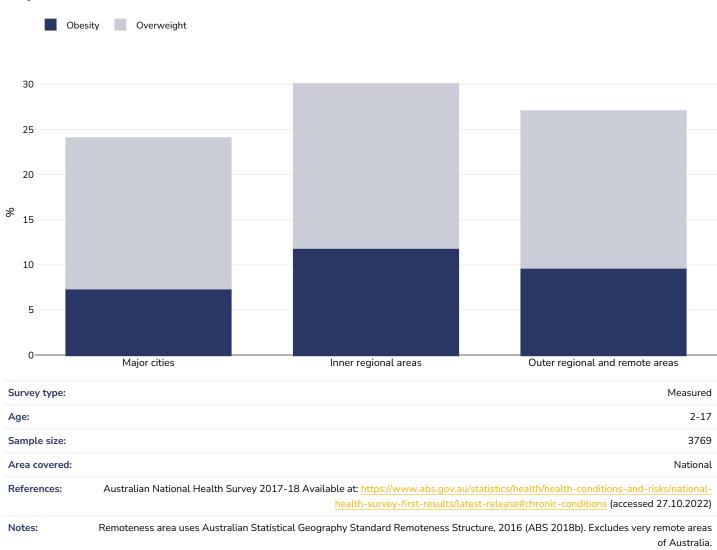


IOTF



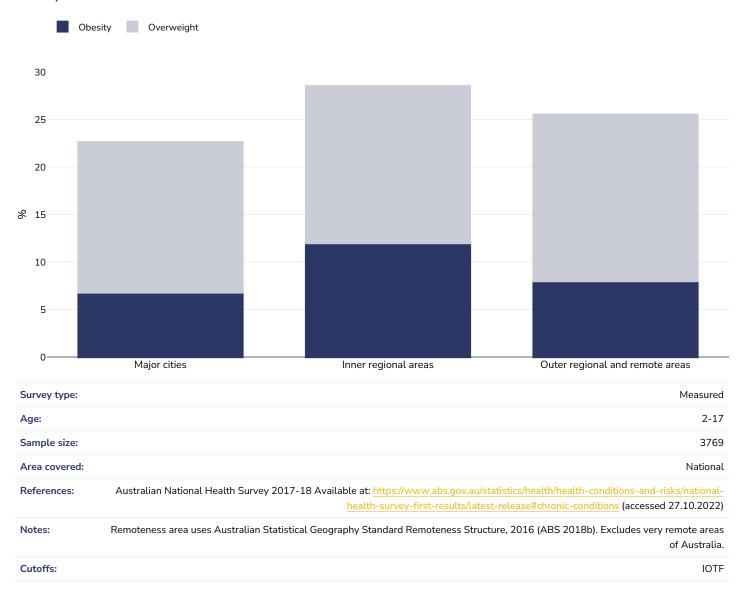
Boys, 2017-2018

Cutoffs:





Girls, 2017-2018

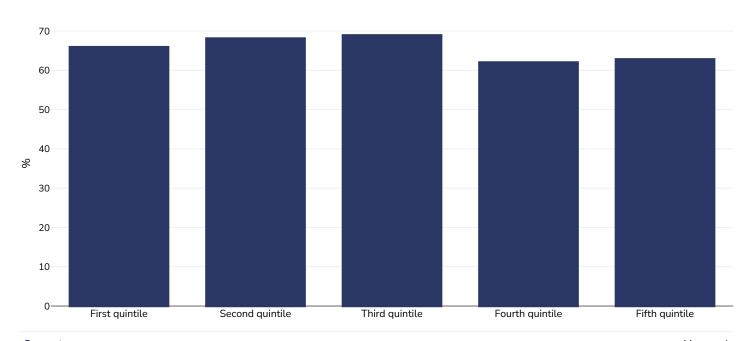




Overweight/obesity by socio-economic group

Adults, 2022-2023

Overweight or obesity

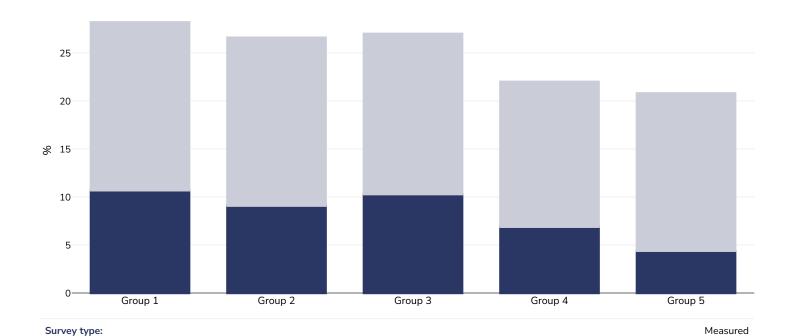


Survey type:	Measured
Age:	18+
Sample size:	~12846
Area covered:	National
References:	Australian National Health Survey 2022-2023. https://www.abs.gov.au/statistics/health/health-conditions-and-risks/waist-circumference-and-bmi/2022#body-mass-index-bmi- (Accessed 03.01.2024)
Notes:	Provision of height, weight and waist measurements were voluntary. Self-reported health status, height, and weight was collected for all participants. In 2022, 41.8% of adult respondents did not have their height and/or weight measured. For these people, height and weight were imputed using a range of information including their self-reported height and weight
Definitions:	A lower Index of Disadvantage quintile (e.g. the first quintile) indicates relatively greater disadvantage and a lack of advantage in general. A higher Index of Disadvantage (e.g. the fifth quintile) indicates a relative lack of disadvantage and greater advantage in general.



Children, 2017-2018





Age:	2-17
Sample size:	3769
Area covered:	National
References:	Australian National Health Survey 2017-18 Available at: https://www.abs.gov.au/statistics/health/health-conditions-and-risks/national-

Notes:

Socioeconomic areas are quintiles of Socio-Economic Indexes for Areas 2016 (SEIFA 2016), specifically the Index of Relative Socio-Economic Disadvantage (IRSD) (ABS 2018c). Lower socioeconomic areas have greater overall levels of disadvantage. "This index ranks areas on a continuum from most disadvantaged to least disadvantaged. A low score on this index indicates a high proportion of relatively disadvantaged people in an area. We cannot conclude that an area with a very high score has a large proportion of relatively advantaged people, as there are no variables in the index to indicate this. We can only conclude that such an area has a relatively low incidence of

 $\underline{\text{health-survey-first-results/latest-release\#chronic-conditions}} \ (\text{accessed 27.10.2022})$

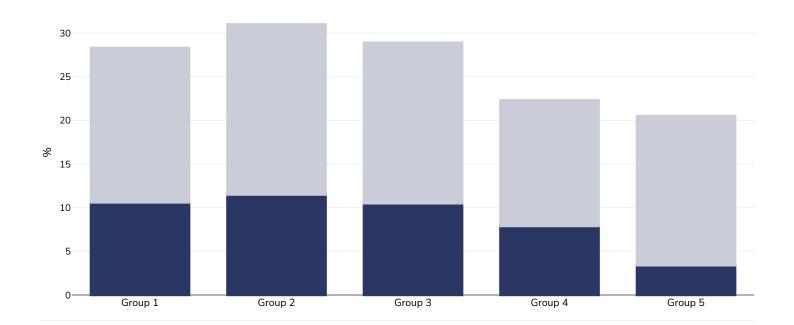
Definitions: Group 1: Most disadvantaged areas Group 5: Least disadvantaged areas **Cutoffs:** IOTF

Measured



Boys, 2017-2018





Age:	2-17
Sample size:	3769
Area covered:	National
References:	Australian National Health Survey 2017-18 Available at: https://www.abs.gov.au/statistics/health/health-conditions-and-risks/national-

Notes:

Survey type:

Socioeconomic areas are quintiles of Socio-Economic Indexes for Areas 2016 (SEIFA 2016), specifically the Index of Relative Socio-Economic Disadvantage (IRSD) (ABS 2018c). Lower socioeconomic areas have greater overall levels of disadvantage. "This index ranks areas on a continuum from most disadvantaged to least disadvantaged. A low score on this index indicates a high proportion of relatively disadvantaged people in an area. We cannot conclude that an area with a very high score has a large proportion of relatively advantaged people, as there are no variables in the index to indicate this. We can only conclude that such an area has a relatively low incidence of disadvantage."

health-survey-first-results/latest-release#chronic-conditions (accessed 27.10.2022)

Definitions:	Group 1: Most disadvantaged areas Group 5: Least disadvantaged areas
Cutoffs:	IOTF

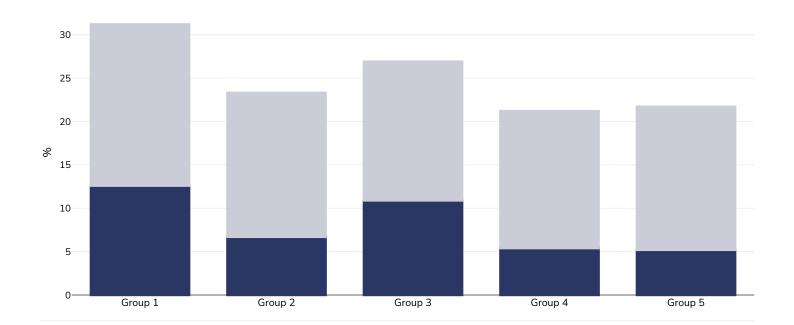
Measured

2-17



Girls, 2017-2018





Age: Sample size: 3769 Area covered: References:

Survey type:

Australian National Health Survey 2017-18 Available at: https://www.abs.gov.au/statistics/health/health-conditions-and-risks/nationalhealth-survey-first-results/latest-release#chronic-conditions (accessed 27.10.2022)

Notes:

Socioeconomic areas are quintiles of Socio-Economic Indexes for Areas 2016 (SEIFA 2016), specifically the Index of Relative Socio-Economic Disadvantage (IRSD) (ABS 2018c). Lower socioeconomic areas have greater overall levels of disadvantage. "This index ranks areas on a continuum from most disadvantaged to least disadvantaged. A low score on this index indicates a high proportion of relatively disadvantaged people in an area. We cannot conclude that an area with a very high score has a large proportion of relatively advantaged people, as there are no variables in the index to indicate this. We can only conclude that such an area has a relatively low incidence of

Definitions: Group 1: Most disadvantaged areas Group 5: Least disadvantaged areas **Cutoffs:** IOTF

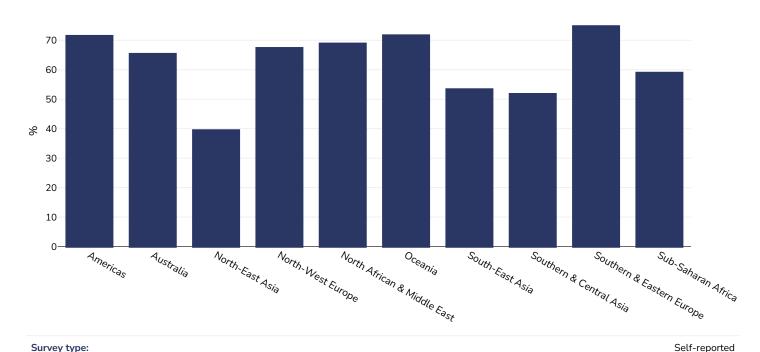


Overweight/obesity by ethnicity

Ethnic groups are as defined by publication of origin and are not as defined by WOF. In some instances ethnicity is conflated with nationality and/or race.

Men, 2011

Overweight or obesity



ourvey type:	Sett reported
Age:	18+
Sample size:	16,044
References:	Menigoz, Karen, et al. "Ethnic Differences in Overweight and Obesity and the Influence of Acculturation on Immigrant Bodyweight: Evidence from a National Sample of Australian Adults." BMC Public Health, vol. 16, no. 1, 5 Sept. 2016, www.ncbi.nlm.nih.gov/pmc/articles/PMC5011908/, 10.1186/s12889-016-3608-6. Accessed 30 Sept. 2021.
Definitions:	Country of birth

Unless otherwise noted, overweight refers to a BMI between 25kg and 29.9kg/m², obesity refers to a BMI greater than 30kg/m².

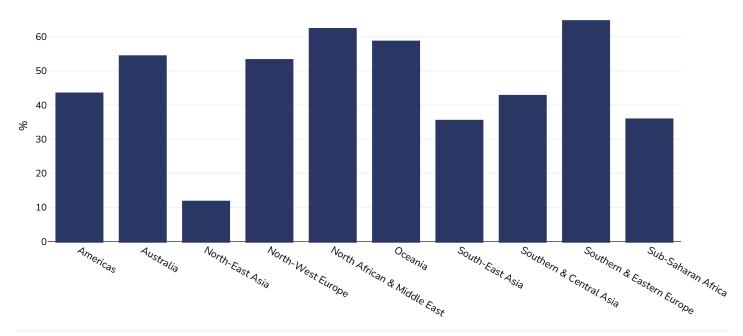
18+



Women, 2011

Age:

Overweight or obesity



Survey type: Self-reported

Sample size: 16,044

References: Menigoz, Karen, et al. "Ethnic Differences in Overweight and Obesity and the Influence of Acculturation on Immigrant Bodyweight:

Evidence from a National Sample of Australian Adults." BMC Public Health, vol. 16, no. 1, 5 Sept. 2016,

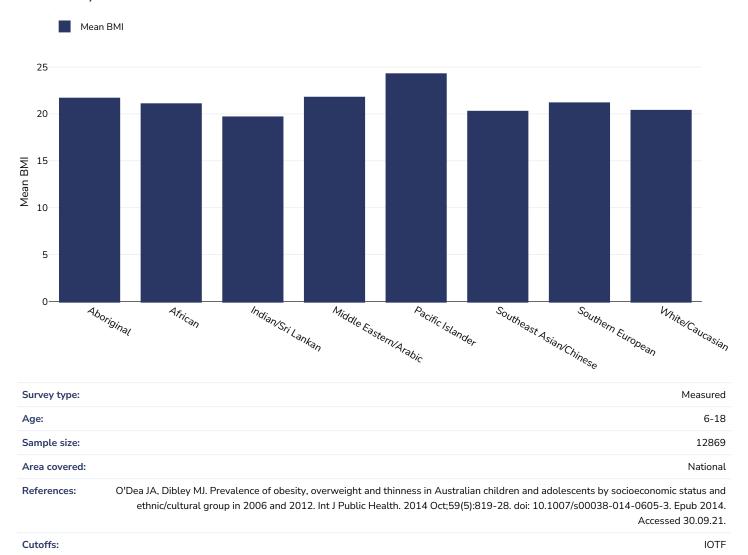
www.ncbi.nlm.nih.gov/pmc/articles/PMC5011908/, 10.1186/s12889-016-3608-6. Accessed 30 Sept. 2021.

Definitions: Country of birth

 $Unless \ otherwise \ noted, overweight \ refers \ to \ a \ BMI \ between \ 25kg \ and \ 29.9kg/m^2, obesity \ refers \ to \ a \ BMI \ greater \ than \ 30kg/m^2.$



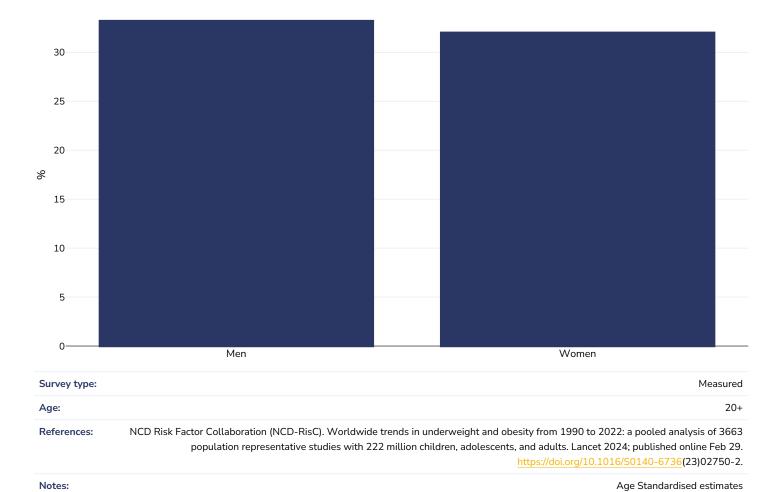
Children, 2012





Double burden of underweight & overweight

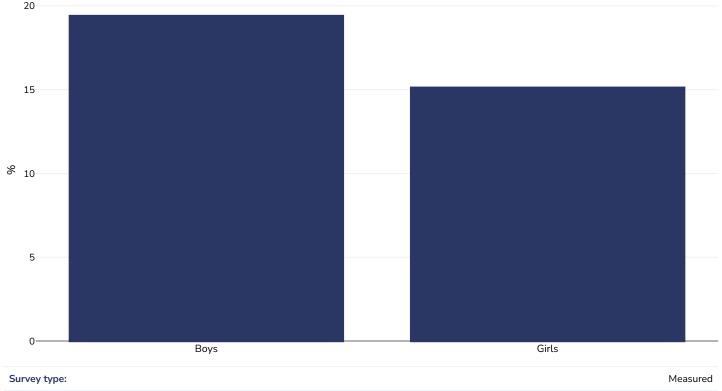
Adults, 2022



Definitions: Combined prevalence of BMI<18.5 kg/m² and BMI>=30 kg/m² (double burden of underweight and obesity)



Children, 2022



Age:		5-19

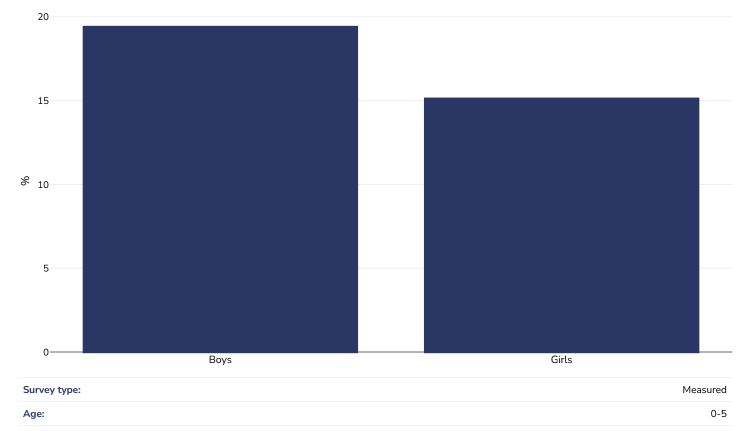
References: NCD Risk Factor Collaboration (NCD-RisC). Worldwide trends in underweight and obesity from 1990 to 2022: a pooled analysis of 3663 population representative studies with 222 million children, adolescents, and adults. Lancet 2024; published online Feb 29. https://doi.org/10.1016/S0140-6736(23)02750-2.

Notes:	Age standardised estimates
Definitions:	Combined prevalence of BMI < -2SD and BMI > 2SD (double burden of thinness and obesity)

Cutoffs: BMI < -2SD and BMI > 2SD



0-5 years, 2007-2007

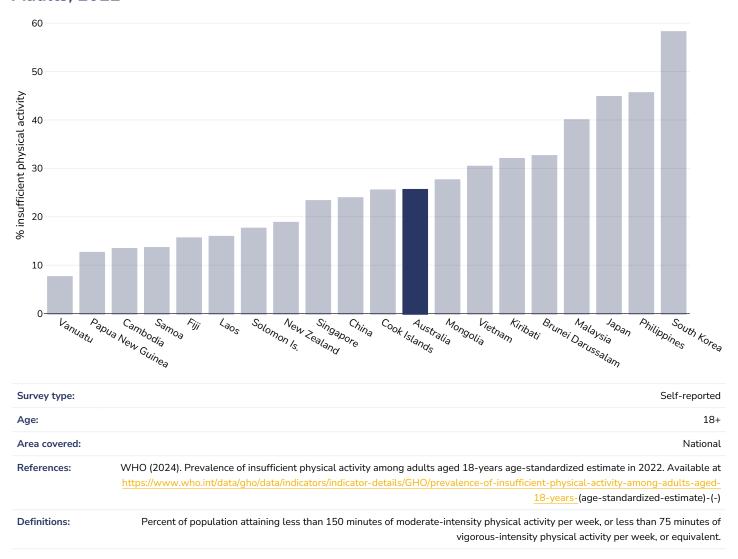


References: UNICEF data available at https://data.unicef.org/topic/nutrition/malnutrition/(last accessed 12.03.25)

Notes: Children under 5 falling below -2 standard deviations from the median height for age and falling at or above +2 standard deviations from the median weight-for-height of the reference population

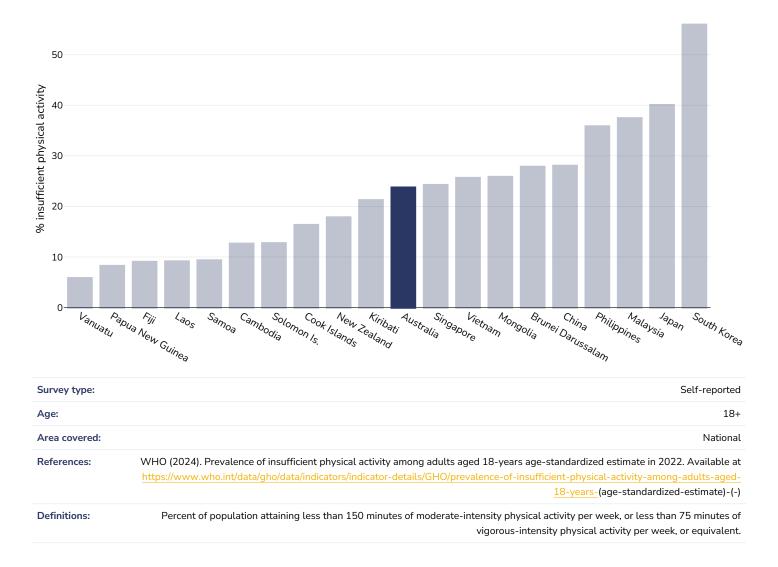


Insufficient physical activity





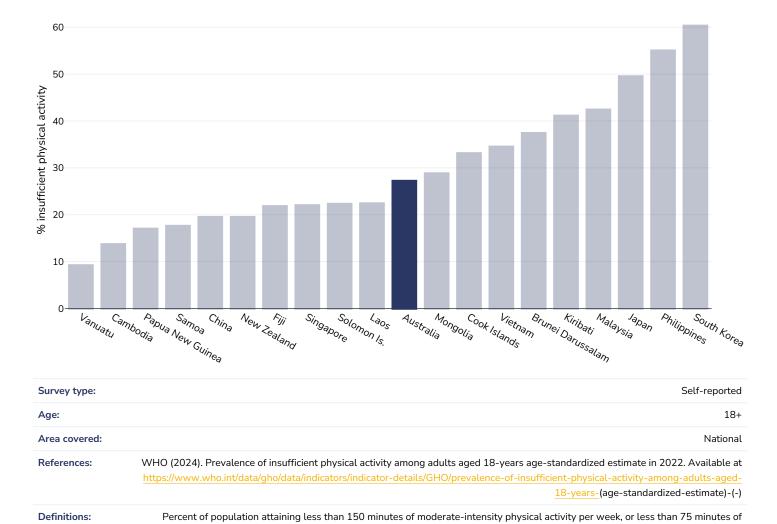
Men, 2022



vigorous-intensity physical activity per week, or equivalent.

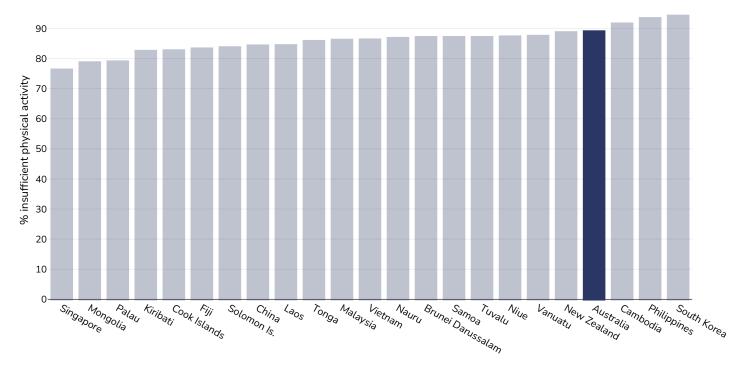


Women, 2022





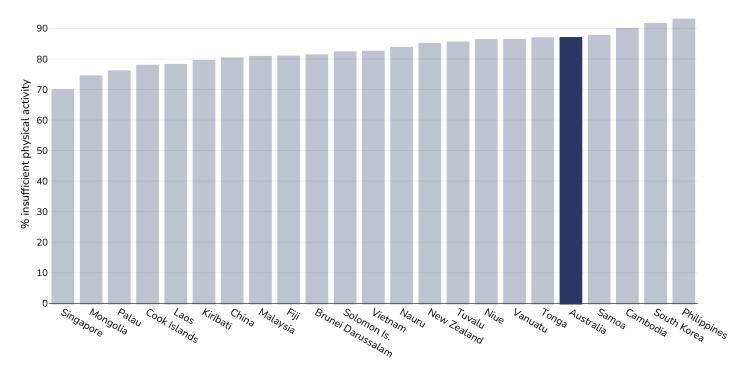
Children, 2016



Survey type:	Self-reported
Age:	11-17
References:	Global Health Observatory data repository, World Health Organisation, https://apps.who.int/gho/data/node.main.A893ADO?lang=en (last accessed 16.03.21)
Notes:	% of school going adolescents not meeting WHO recommendations on Physical Activity for Health, i.e. doing less than 60 minutes of moderate- to vigorous-intensity physical activity daily.
Definitions:	% Adolescents insufficiently active (age standardised estimate)



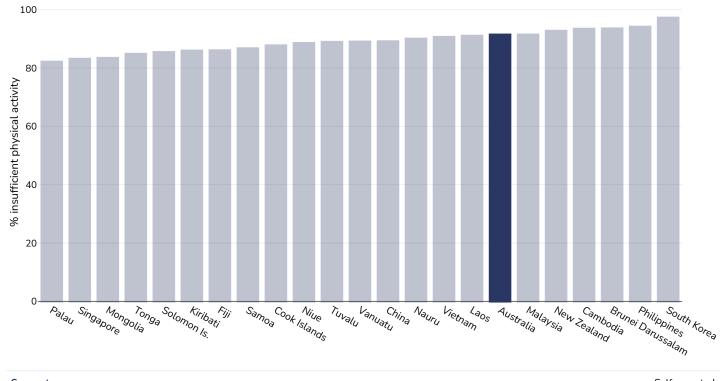
Boys, 2016



Survey type:	Self-reported
Age:	11-17
References:	Global Health Observatory data repository, World Health Organisation, https://apps.who.int/gho/data/node.main.A893ADO?lang=en (last accessed 16.03.21)
Notes:	% of school going adolescents not meeting WHO recommendations on Physical Activity for Health, i.e. doing less than 60 minutes of moderate- to vigorous-intensity physical activity daily.
Definitions:	% Adolescents insufficiently active (age standardised estimate)



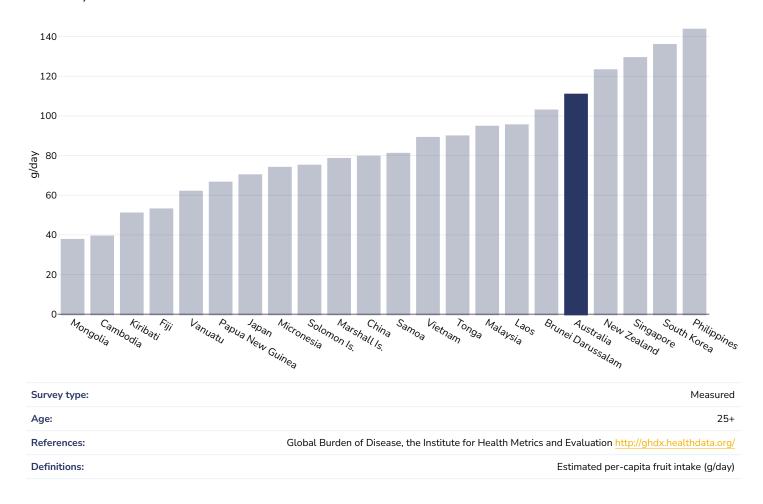
Girls, 2016



Survey type:	Self-reported
Age:	11-17
References:	Global Health Observatory data repository, World Health Organisation, https://apps.who.int/gho/data/node.main.A893ADO?lang=en (last accessed 16.03.21)
Notes:	% of school going adolescents not meeting WHO recommendations on Physical Activity for Health, i.e. doing less than 60 minutes of moderate- to vigorous-intensity physical activity daily.
Definitions:	% Adolescents insufficiently active (age standardised estimate)

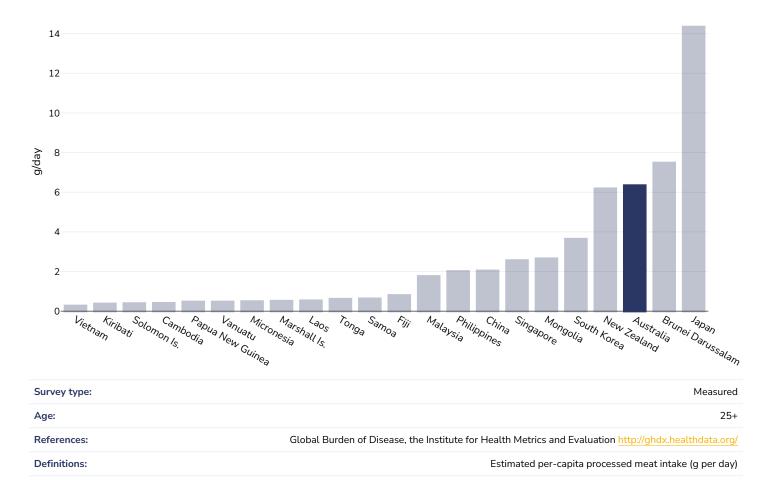


Estimated per capita fruit intake



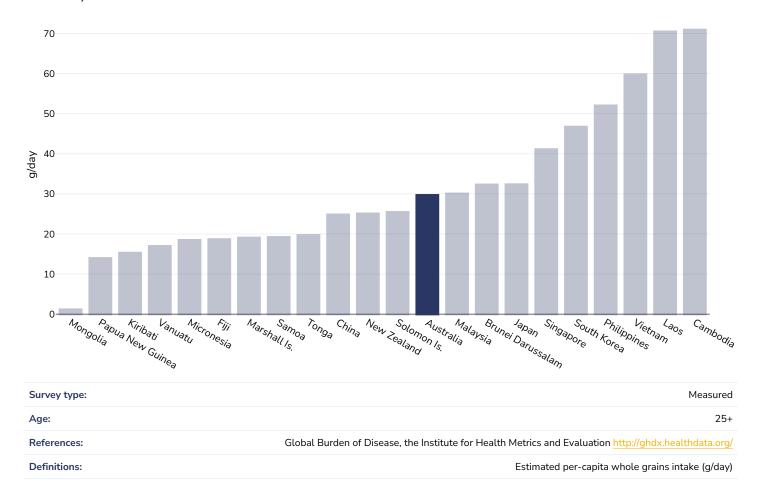


Estimated per-capita processed meat intake



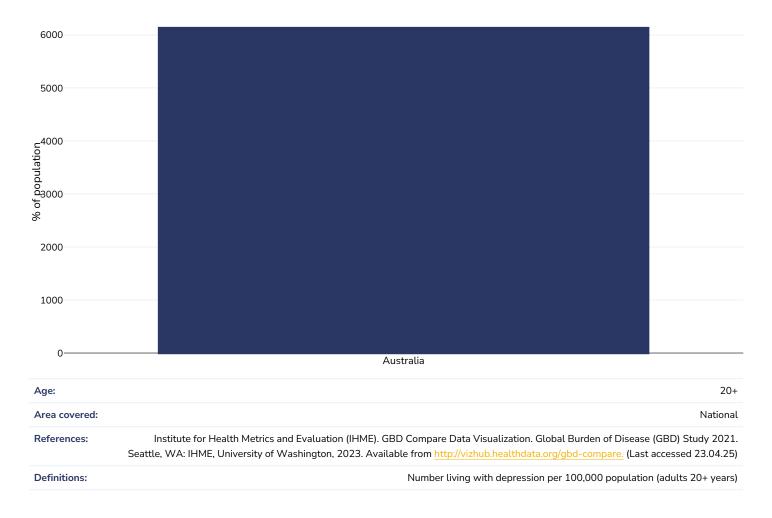


Estimated per capita whole grains intake



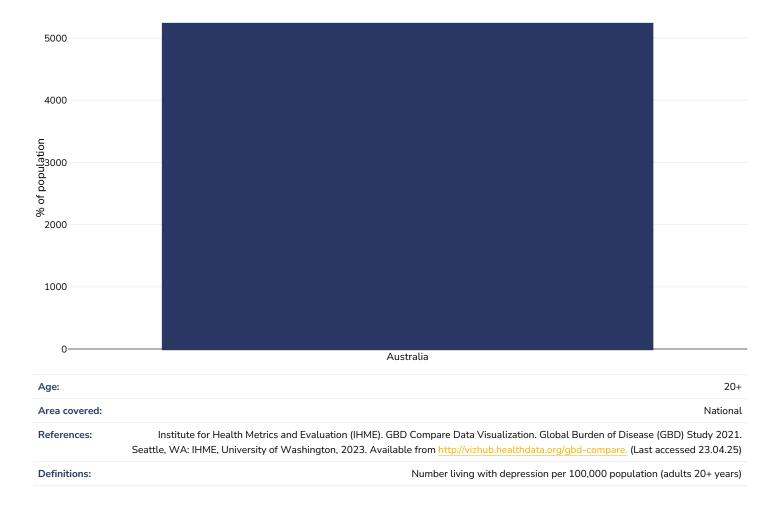


Mental health - depression disorders





Men, 2021



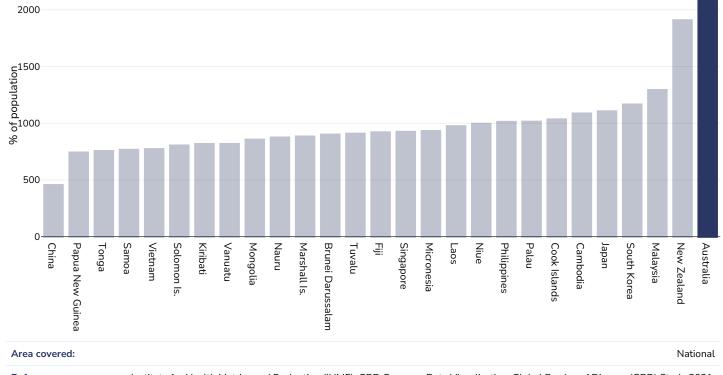


Women, 2021





Children, 2021



References:

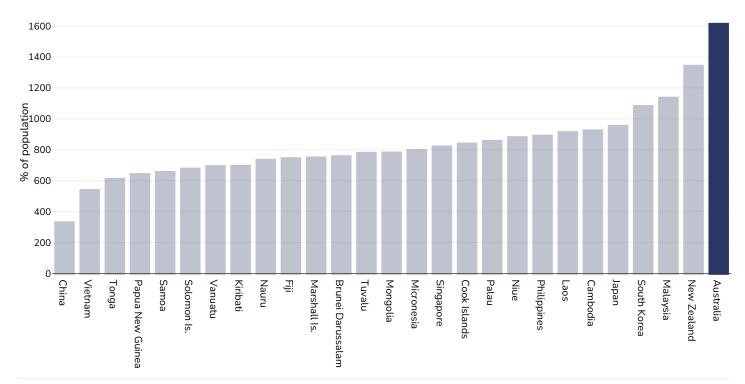
Institute for Health Metrics and Evaluation (IHME). GBD Compare Data Visualization. Global Burden of Disease (GBD) Study 2021. Seattle, WA: IHME, University of Washington, 2023. Available from http://vizhub.healthdata.org/gbd-compare. (Last accessed 23.04.25)

Definitions:

Number living with depressive disorder per 100,000 population (Under 20 years of age) $\,$



Boys, 2021



Area covered: National

References:

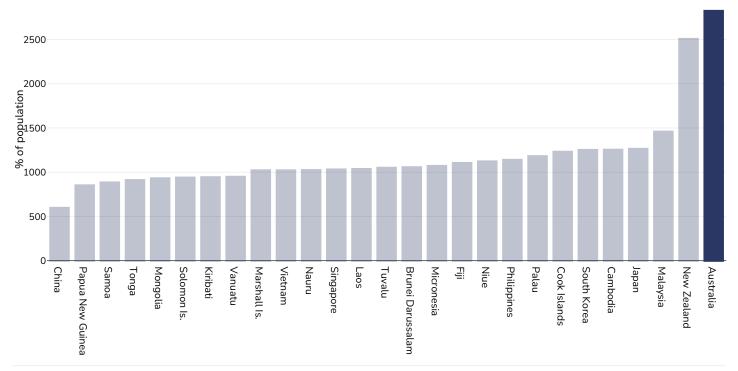
Institute for Health Metrics and Evaluation (IHME). GBD Compare Data Visualization. Global Burden of Disease (GBD) Study 2021. Seattle, WA: IHME, University of Washington, 2023. Available from http://vizhub.healthdata.org/gbd-compare. (Last accessed 23.04.25)

Definitions:

Number living with depressive disorder per 100,000 population (Under 20 years of age) $\,$



Girls, 2021



Area covered: National

References:

Institute for Health Metrics and Evaluation (IHME). GBD Compare Data Visualization. Global Burden of Disease (GBD) Study 2021. Seattle, WA: IHME, University of Washington, 2023. Available from http://vizhub.healthdata.org/gbd-compare. (Last accessed 23.04.25)

Definitions:

Number living with depressive disorder per 100,000 population (Under 20 years of age) $\,$



Mental health - anxiety disorders





Men, 2021

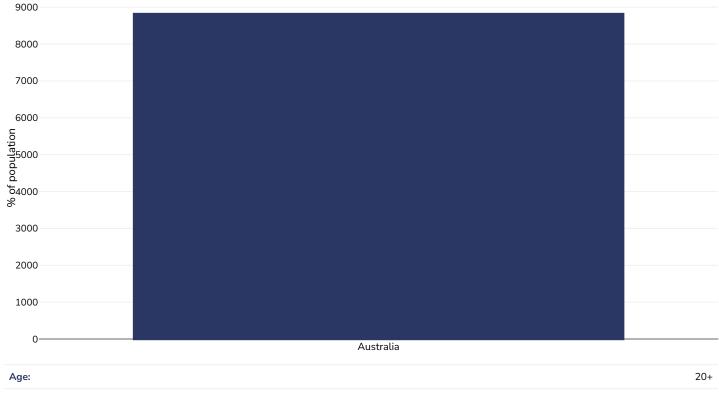


References: Institute for Health Metrics and Evaluation (IHME). GBD Compare Data Visualization. Global Burden of Disease (GBD) Study 2021. Seattle, WA: IHME, University of Washington, 2023. Available from http://vizhub.healthdata.org/gbd-compare. (Last accessed 23.04.25).

Definitions:Number living with anxiety per 100,000 population



Women, 2021



References:

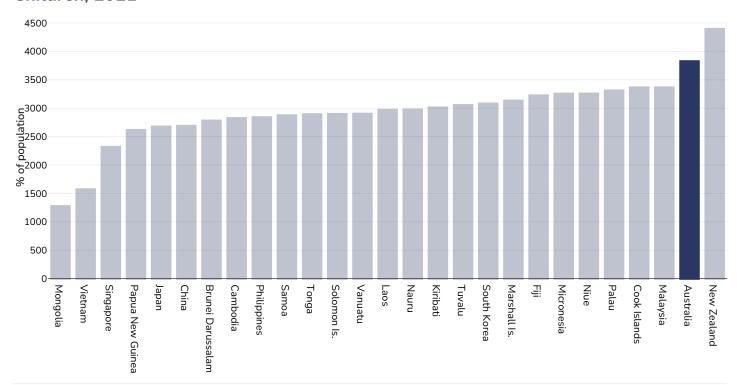
Institute for Health Metrics and Evaluation (IHME). GBD Compare Data Visualization. Global Burden of Disease (GBD) Study 2021. Seattle, WA: IHME, University of Washington, 2023. Available from http://vizhub.healthdata.org/gbd-compare. (Last accessed 23.04.25).

Definitions:

Number living with anxiety per 100,000 population



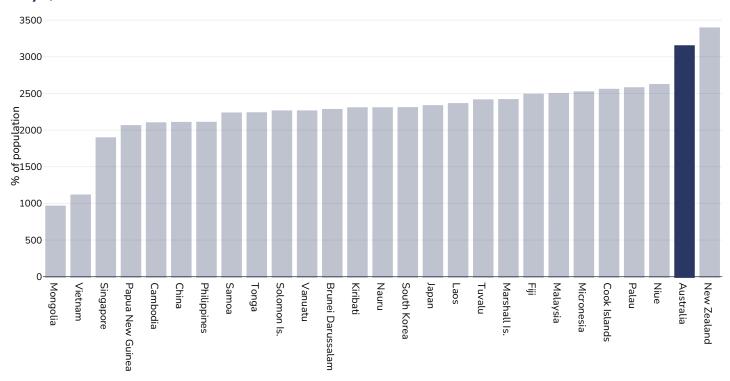
Children, 2021



References:

Institute for Health Metrics and Evaluation (IHME). GBD Compare Data Visualization. Global Burden of Disease (GBD) Study 2021. Seattle, WA: IHME, University of Washington, 2023. Available from http://vizhub.healthdata.org/gbd-compare. (Last accessed 23.04.25)

Boys, 2021

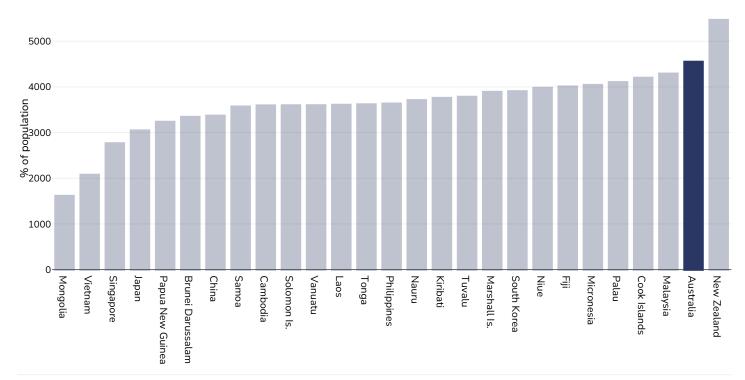


References:

Institute for Health Metrics and Evaluation (IHME). GBD Compare Data Visualization. Global Burden of Disease (GBD) Study 2021. Seattle, WA: IHME, University of Washington, 2023. Available from http://vizhub.healthdata.org/gbd-compare. (Last accessed 23.04.25)



Girls, 2021



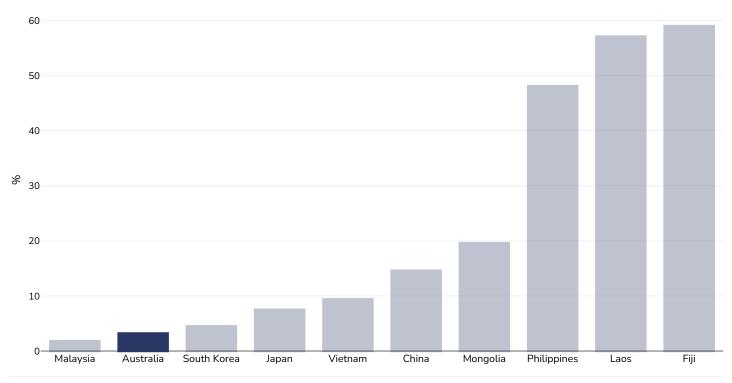
References:

Institute for Health Metrics and Evaluation (IHME). GBD Compare Data Visualization. Global Burden of Disease (GBD) Study 2021. Seattle, WA: IHME, University of Washington, 2023. Available from http://vizhub.healthdata.org/gbd-compare. (Last accessed 23.04.25)



Percent of population who cannot afford a healthy diet

Adults, 2022



Area covered: National

References:

The Food Systems Dashboard. The Global Alliance for Improved Nutrition (GAIN), The Columbia Climate School, and Cornell University

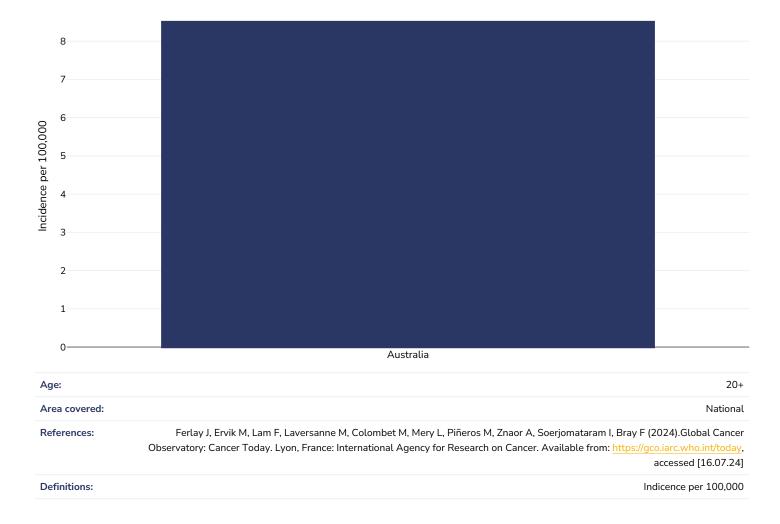
College of Agriculture and Life Sciences. 2024. Geneva, Switzerland. https://www.foodsystemsdashboard.org. DOI:

https://doi.org/10.36072/db.



Oesophageal cancer

Men, 2022





Women, 2022

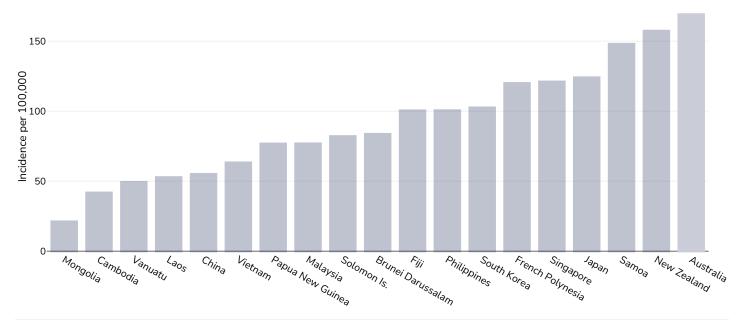




Breast cancer

Women, 2022





Area covered: National

References:

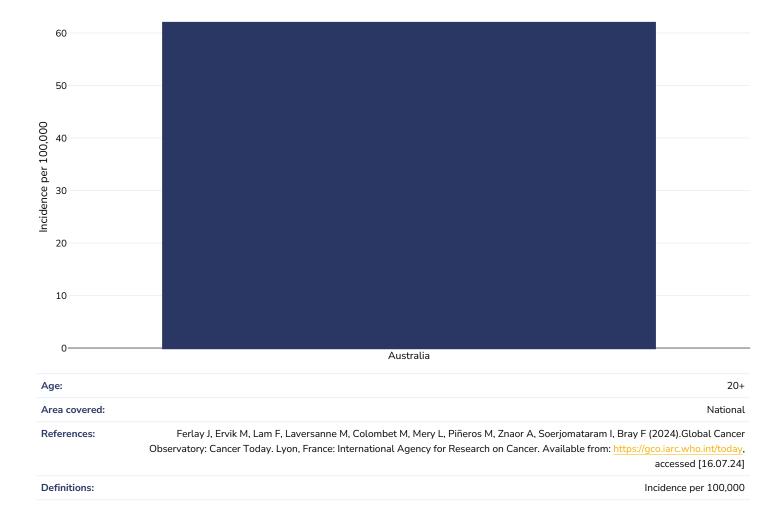
Ferlay J, Ervik M, Lam F, Laversanne M, Colombet M, Mery L, Piñeros M, Znaor A, Soerjomataram I, Bray F (2024). Global Cancer Observatory: Cancer Today. Lyon, France: International Agency for Research on Cancer. Available from: https://gco.iarc.who.int/today, accessed [16.07.24]

Definitions: Incidence per 100,000



Colorectal cancer

Men, 2022





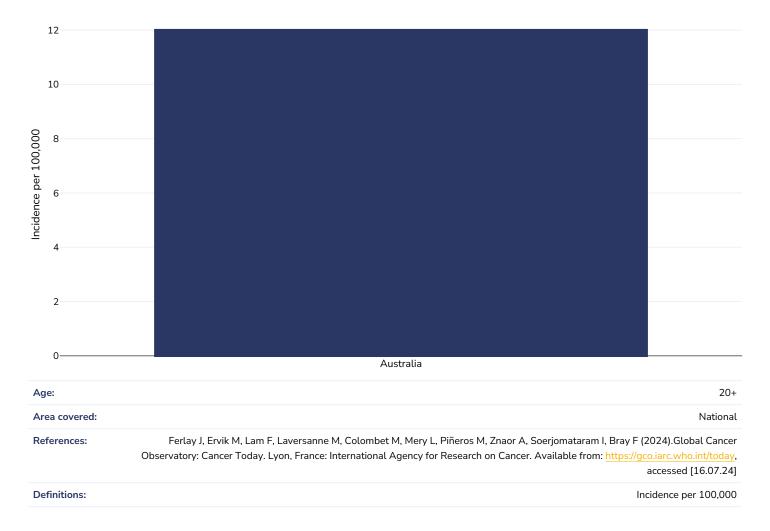
Women, 2022





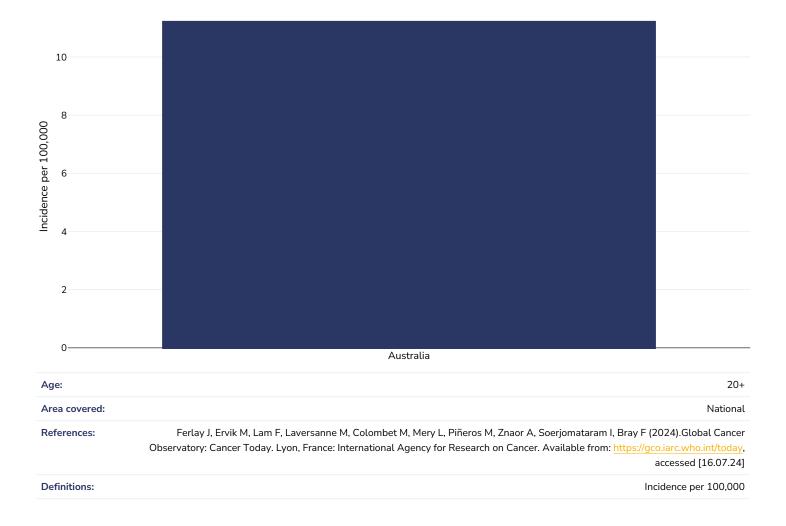
Pancreatic cancer

Men, 2022





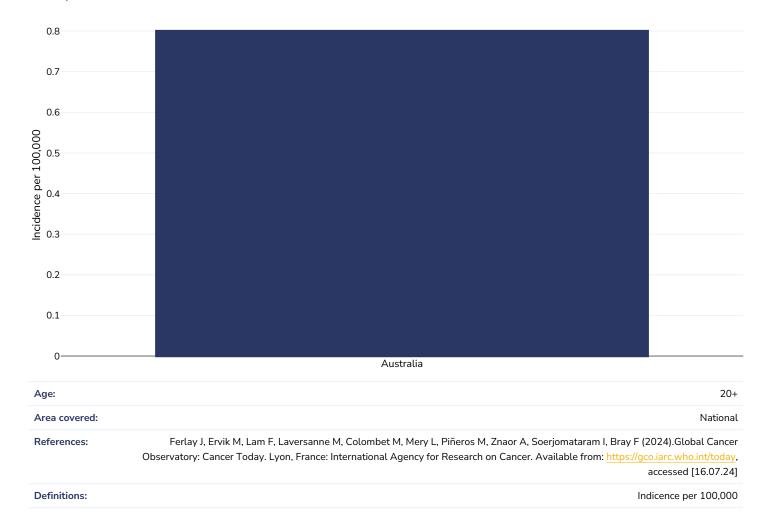
Women, 2022





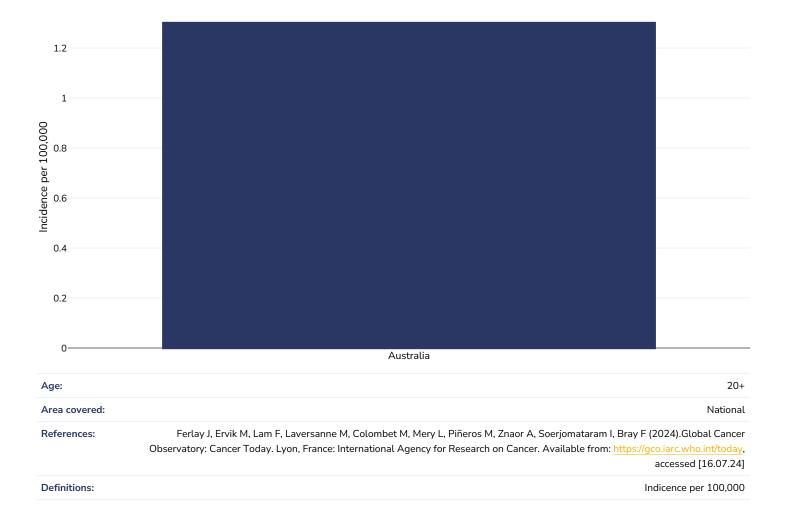
Gallbladder cancer

Men, 2022





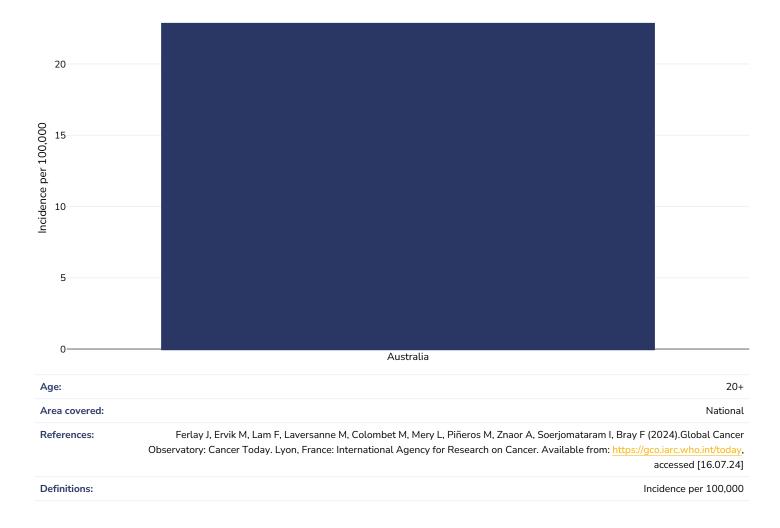
Women, 2022





Kidney cancer

Men, 2022





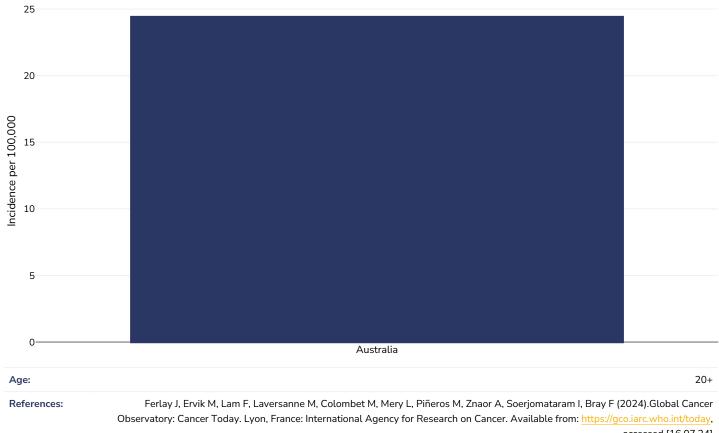
Women, 2022





Cancer of the uterus

Women, 2022



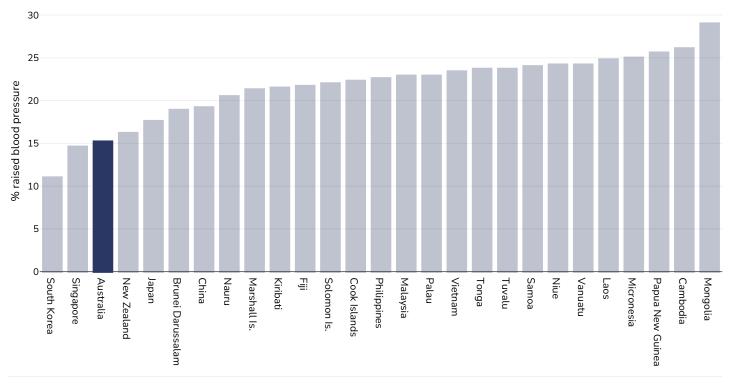
accessed [16.07.24]

Definitions: Incidence per 100,000



Raised blood pressure

Adults, 2015



References:

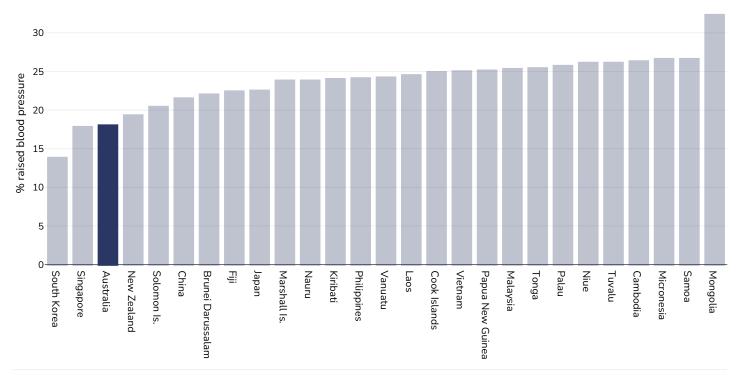
 ${\bf Global\ Health\ Observatory\ data\ repository,\ World\ Health\ Organisation,\ \underline{{\bf http://apps.who.int/gho/data/node.main.} A875?lang=en}}$

Definitions:

Age Standardised estimated % Raised blood pressure 2015 (SBP>=140 OR DBP>=90).



Men, 2015



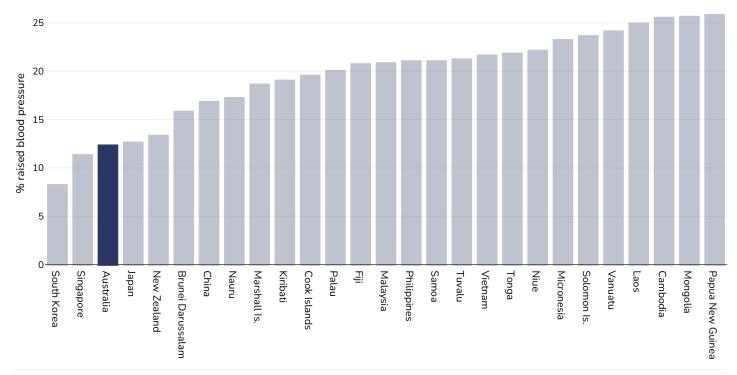
References:

Global Health Observatory data repository, World Health Organisation, http://apps.who.int/gho/data/node.main.A875?lang=en

Definitions:

Age Standardised estimated % Raised blood pressure 2015 (SBP>=140 OR DBP>=90).





References:

Global Health Observatory data repository, World Health Organisation, http://apps.who.int/gho/data/node.main.A875?lang=en

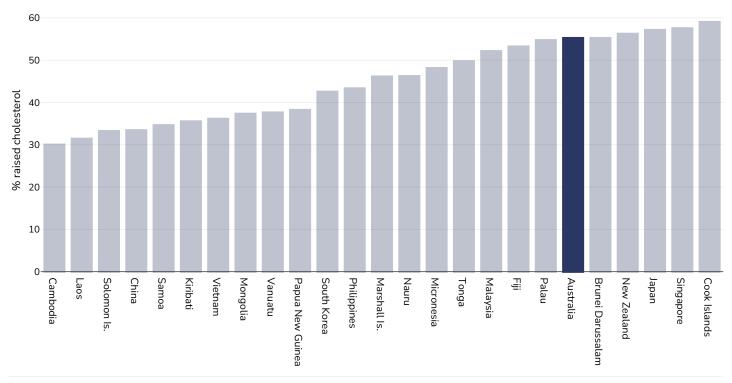
Definitions:

Age Standardised estimated % Raised blood pressure 2015 (SBP>=140 OR DBP>=90).



Raised cholesterol

Adults, 2008



References:

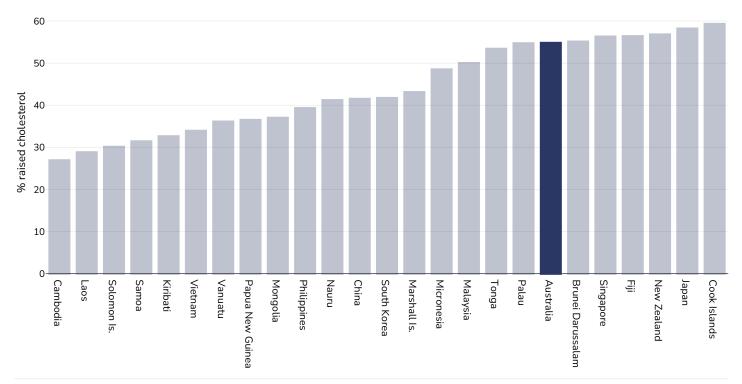
Global Health Observatory data repository, World Health Organisation, http://apps.who.int/gho/data/node.main.A885

Definitions:

% Raised total cholesterol (>= 5.0 mmol/L) (age-standardized estimate).



Men, 2008



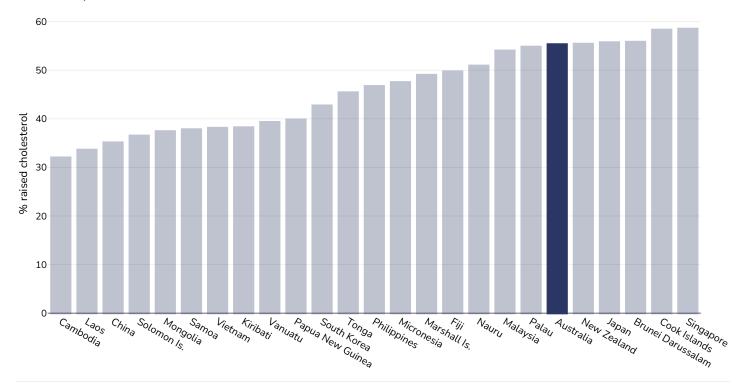
References:

 ${\bf Global\ Health\ Observatory\ data\ repository,\ World\ Health\ Organisation,\ \underline{http://apps.who.int/gho/data/node.main.A885}}$

Definitions:

% Raised total cholesterol (>= 5.0 mmol/L) (age-standardized estimate).





References:

 ${\sf Global\ Health\ Observatory\ data\ repository,\ World\ Health\ Organisation,\ } \underline{{\sf http://apps.who.int/gho/data/node.main.} A885}$

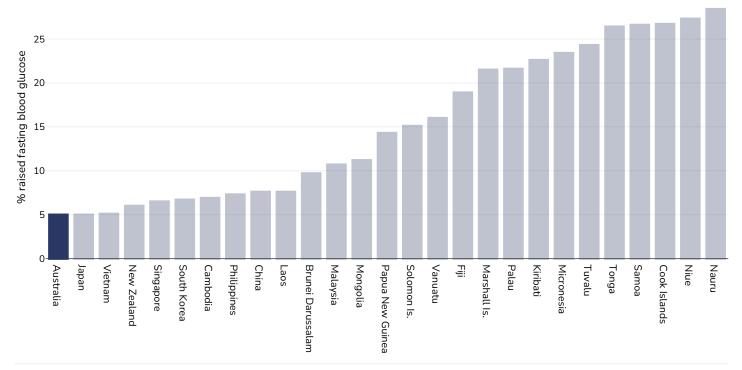
Definitions:

% Raised total cholesterol (>= 5.0 mmol/L) (age-standardized estimate).



Raised fasting blood glucose

Men, 2014



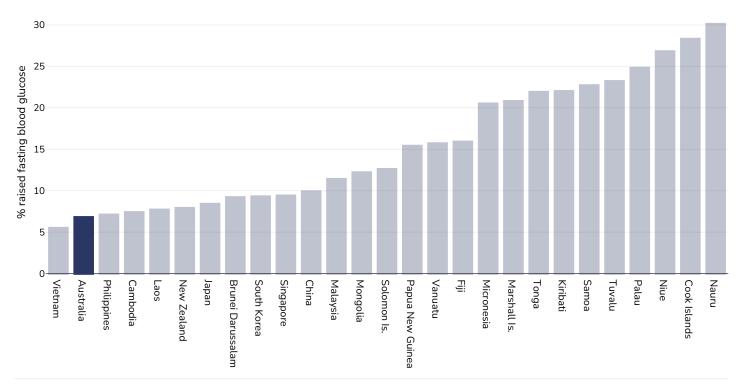
References:

Global Health Observatory data repository, World Health Organisation, http://apps.who.int/gho/data/node.main.A869?lang=en

Definitions:

Age Standardised % raised fasting blood glucose (>= 7.0 mmoVL or on medication).





References:

Global Health Observatory data repository, World Health Organisation, http://apps.who.int/gho/data/node.main.A869?lang=en

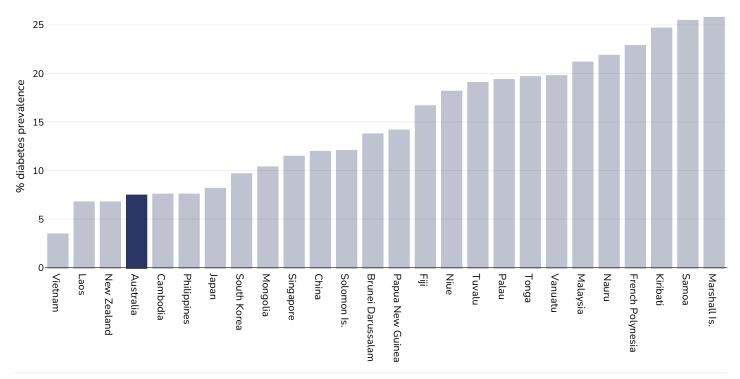
Definitions:

Age Standardised % raised fasting blood glucose (>= 7.0 mmol/L or on medication).



Diabetes prevalence

Adults, 2024



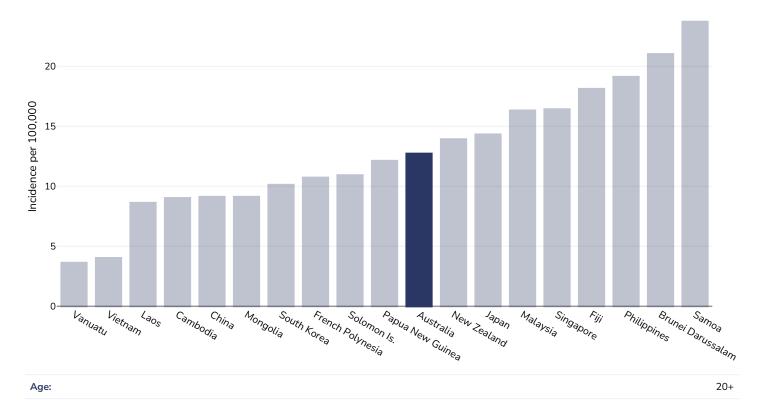
References:

Reproduced with kind permission International Diabetes Federation. IDF Diabetes Atlas, 11th edn. Brussels, Belgium:International Diabetes Federation, 2025. http://www.diabetesatlas.org



Ovarian Cancer

Women, 2022



References:

Ferlay J, Ervik M, Lam F, Laversanne M, Colombet M, Mery L, Piñeros M, Znaor A, Soerjomataram I, Bray F (2024). Global Cancer Observatory: Cancer Today. Lyon, France: International Agency for Research on Cancer. Available from: https://gco.iarc.who.int/today, accessed [16.07.24]

Definitions: Incidence per 100,000



Leukemia

Men, 2022											
4											
3											
2											
1											
0———											
⁻¹ _1	0	1	2	3	4	5	6				
Age: Area covered:							20+ National				
References:	Ferlay J, Ervik M, Lam F, Laversanne M, Colombet M, Mery L, Piñeros M, Znaor A, Soerjomataram I, Bray F (2024).Global Cancer Observatory: Cancer Today. Lyon, France: International Agency for Research on Cancer. Available from: https://gco.iarc.who.int/today , accessed [16.07.24]										
Definitions:						Incidence pe					
	Unless oth	nerwise noted, overw	veight refers to a BMI	between 25kg and 29	9.9kg/m², obesity refers	to a BMI greater than	30kg/m².				

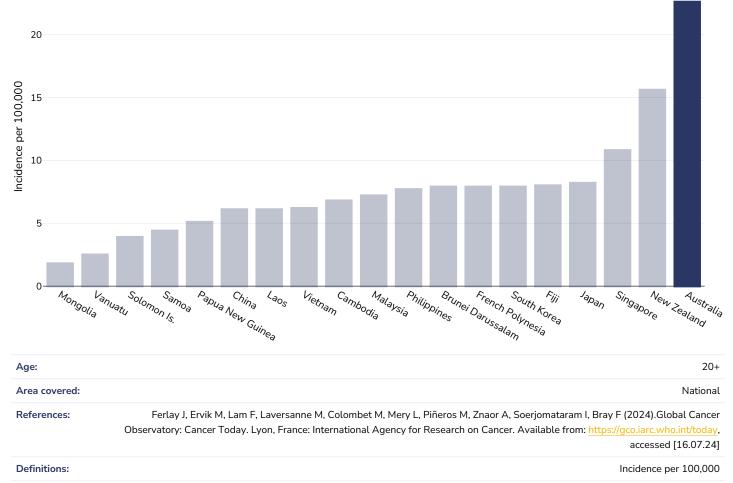


Women, 20	022						
4							
3							
2							
1							
0							
⁻¹ 1	0	1	2	3	4	5	6
Age:							20+
Area covered:							National
References:					'naor A, Soerjomatarar n Cancer. Available fron	m: https://gco.iarc.who	
Definitions:						Incidence pe	er 100,000
	Unless oth	nerwise noted, overw	veight refers to a BMI	between 25kg and 29	0.9kg/m², obesity refers	s to a BMI greater than	1 30kg/m².



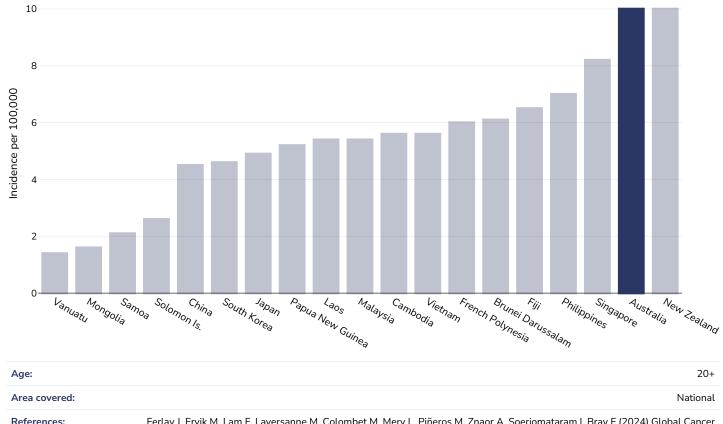
Leukemia

Men, 2022



Unless otherwise noted, overweight refers to a BMI between 25kg and 29.9kg/m², obesity refers to a BMI greater than 30kg/m².





References: Ferlay J, Ervik M, Lam F, Laversanne M, Colombet M, Mery L, Piñeros M, Znaor A, Soerjomataram I, Bray F (2024).Global Cancer Observatory: Cancer Today. Lyon, France: International Agency for Research on Cancer. Available from: https://gco.iarc.who.int/today,

accessed [16.07.24]

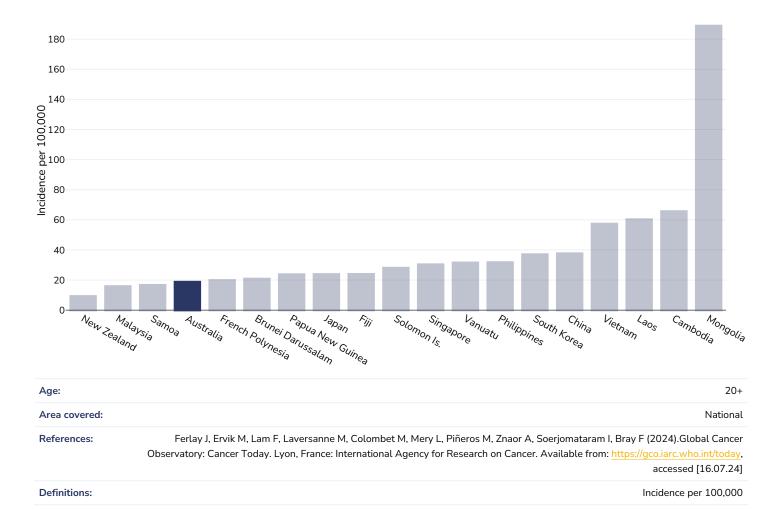
Definitions: Incidence per 100,000

 $Unless \ otherwise \ noted, overweight \ refers \ to \ a \ BMI \ between \ 25kg \ and \ 29.9kg/m^2, \ obesity \ refers \ to \ a \ BMI \ greater \ than \ 30kg/m^2.$

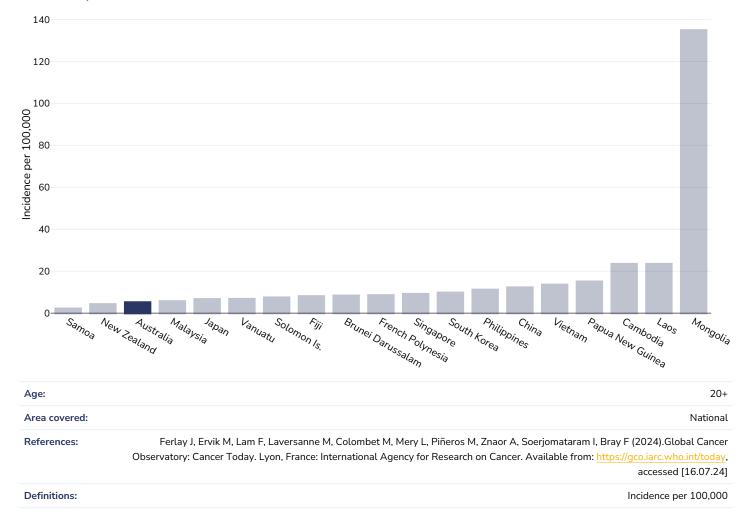


Liver and intrahepatic bile duct Cancer

Men, 2022



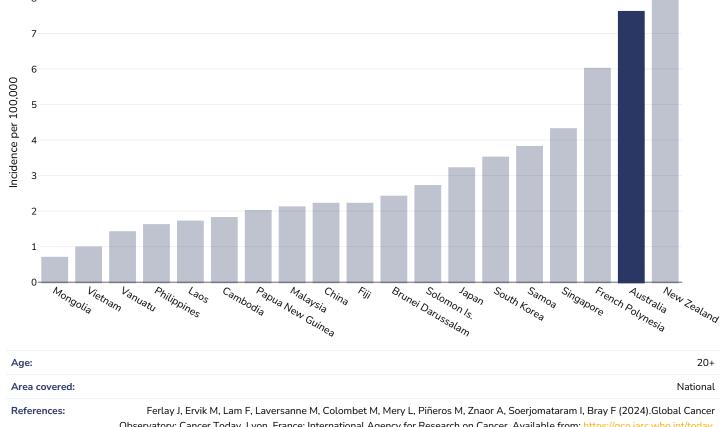






Multiple Myeloma

Men, 2022



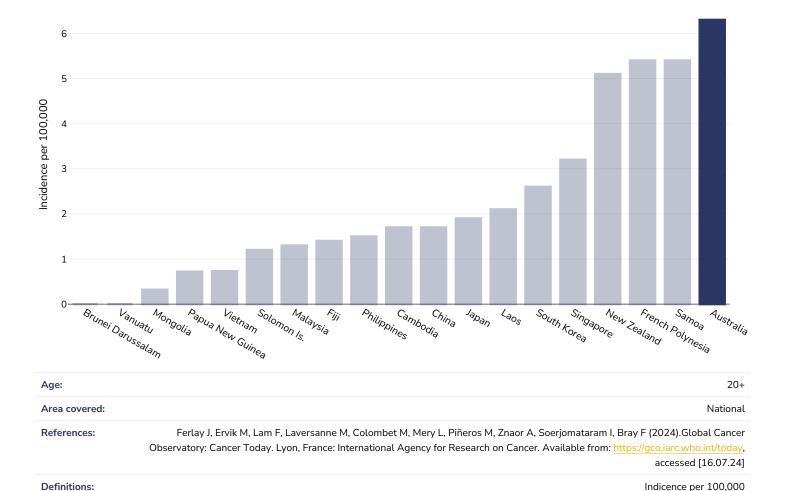
Observatory: Cancer Today. Lyon, France: International Agency for Research on Cancer. Available from: https://gco.iarc.who.int/today, accessed [16.07.24]

Definitions:

Indicence per 100,000

Unless otherwise noted, overweight refers to a BMI between 25kg and 29.9kg/m², obesity refers to a BMI greater than 30kg/m².



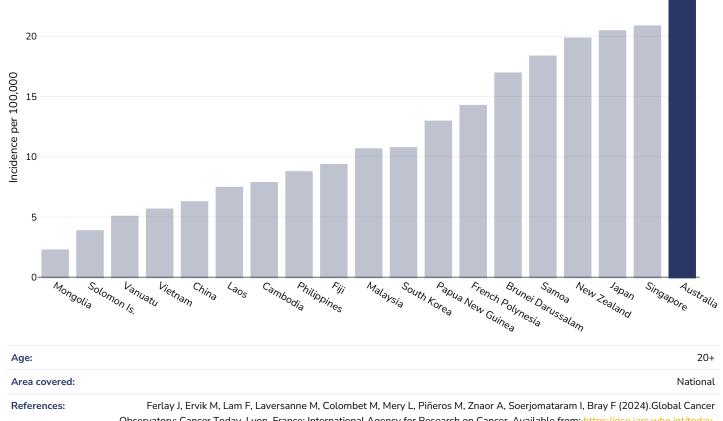


 $Unless \ otherwise \ noted, overweight \ refers \ to \ a \ BMI \ between \ 25kg \ and \ 29.9kg/m^2, \ obesity \ refers \ to \ a \ BMI \ greater \ than \ 30kg/m^2.$



Non Hodgkin Lymphoma

Men, 2022



Observatory: Cancer Today. Lyon, France: International Agency for Research on Cancer. Available from: https://gco.iarc.who.int/today,

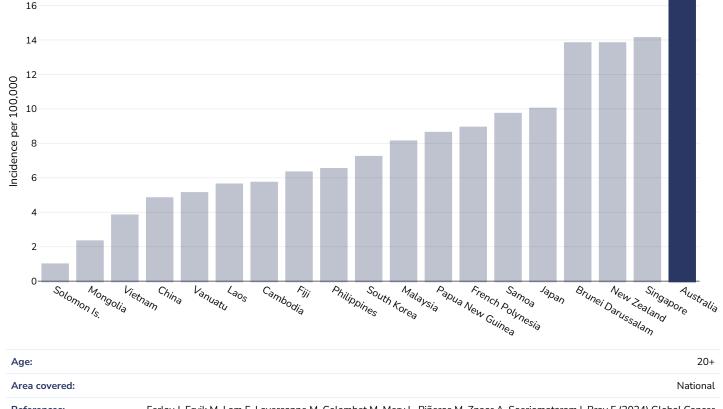
accessed [16.07.24]

Definitions:

Incidence per 100,000

Unless otherwise noted, overweight refers to a BMI between 25kg and 29.9kg/m², obesity refers to a BMI greater than 30kg/m².





References: Ferlay J, Ervik M, Lam F, Laversanne M, Colombet M, Mery L, Piñeros M, Znaor A, Soerjomataram I, Bray F (2024).Global Cancer

Observatory: Cancer Today. Lyon, France: International Agency for Research on Cancer. Available from: https://gco.iarc.who.int/today, accessed [16.07.24]

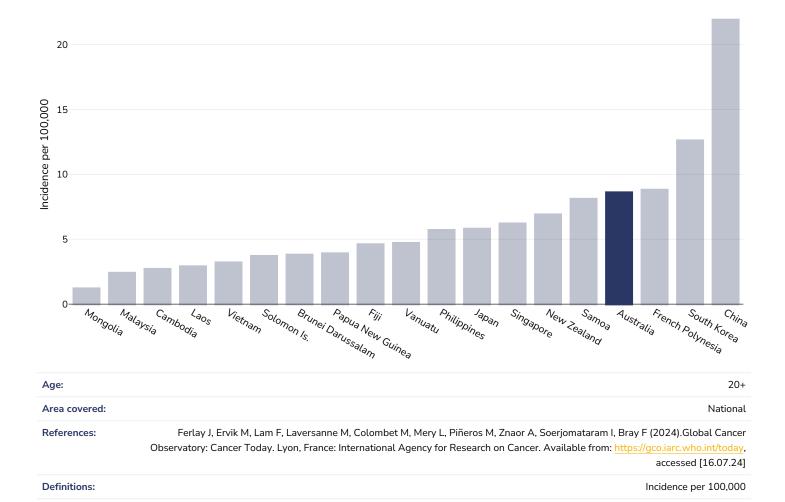
Definitions: Incidence per 100,000

 $Unless \ otherwise \ noted, overweight \ refers \ to \ a \ BMI \ between \ 25kg \ and \ 29.9kg/m^2, obesity \ refers \ to \ a \ BMI \ greater \ than \ 30kg/m^2.$

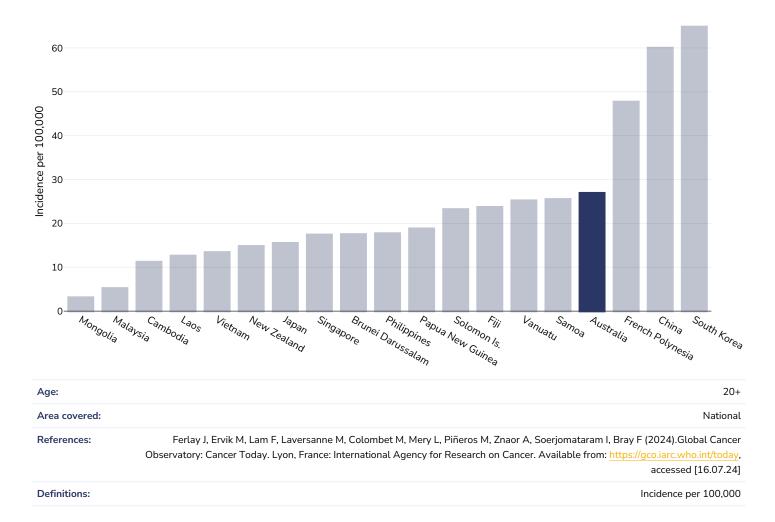


Thyroid Cancer

Men, 2022







PDF created on July 14, 2025