# Report card

## Jordan

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Obesity prevalence

Women, 2017-2018

Survey type: Measured

Age: 15-49

Sample size: 10,787

Area covered: National


Notes: Demographic Health Survey data includes ever married women aged 15-49 years only and may include males aged 15-59.

Unless otherwise noted, overweight refers to a BMI between 25kg and 29.9kg/m², obesity refers to a BMI greater than 30kg/m².
Children, 2015-2016

Survey type: Measured
Age: 6-17
Sample size: 2702
Area covered: National


Notes: 85th and 95th centile cut-offs used, Note: Data for 15-18 year-olds available: Musaiger et al. 2016. Prevalence of overweight and obesity among adolescents in eight Arab countries: comparison between two international standards (ARABEAT-2). Nutrici/an Hospitalaria. 33(5). pp.1062-1065

Cutoffs: WHO
% Adults living with obesity in Jordan 2002-2017

Survey type: Measured
References: For full details of references visit https://data.worldobesity.org/
Notes: Adults aged 15-49

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

Different methodologies may have been used to collect this data and so data from different surveys may not be strictly comparable. Please check with original data sources for methodologies used.
% Adults living with overweight or obesity in Jordan 2002-2017

Survey type: Measured
References: For full details of references visit https://data.worldobesity.org/
Notes: Adults aged 15-49

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

Different methodologies may have been used to collect this data and so data from different surveys may not be strictly comparable. Please check with original data sources for methodologies used.
Overweight/obesity by education

Women, 2017-2018

Survey type: Measured
Age: 15-49
Sample size: 10,787
Area covered: National


Notes: Demographic Health Survey data includes ever married women aged 15-49 years only and may include males aged 15-59.

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

## Women, 2017-2018

![Chart showing overweight/obesity by age in women for different age groups](chart)

<table>
<thead>
<tr>
<th>Age 15-19</th>
<th>Age 20-29</th>
<th>Age 30-39</th>
<th>Age 40-49</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overweight</td>
<td>Obese</td>
<td>Overweight</td>
<td>Obese</td>
</tr>
<tr>
<td>20%</td>
<td>10%</td>
<td>30%</td>
<td>40%</td>
</tr>
</tbody>
</table>

**Survey type:** Measured

**Sample size:** 10,787

**Area covered:** National


**Notes:** Demographic Health Survey data includes ever married women aged 15-49 years only and may include males aged 15-59.

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 region

Women, 2017-2018

Survey type: Measured
Age: 15-49
Sample size: 10,787
Area covered: National


Notes: Demographic Health Survey data includes ever married women aged 15-49 years only and may include males aged 15-59.

Unless otherwise noted, overweight refers to a BMI between 25kg and 29.9kg/m², obesity refers to a BMI greater than 30kg/m².
### Children, 2007

**Survey type:** Measured  
**Age:** 13-16  
**Sample size:** 1355  
**Area covered:** Irbid (North West Jordan)


**Notes:** Overweight and obesity were categorized according to age–sex specific percentiles of BMI using the Centers for Disease Control BMI-for-age growth charts [7]: underweight (BMI < 5th percentile); normal weight (BMI 5th–< 85th percentile), overweight (BMI 85th–< 95th percentile) or obesity (BMI ≥ 95th percentile). Low income ≤ 200 Jordanian dinars (JD) per month; medium income 201–600 JD per month; high income ≥ 600 JD per month.

**Cutoffs:** CDC
Overweight/obesity by socio-economic group

Women, 2017-2018

Survey type: Measured
Age: 15-49
Sample size: 10,787
Area covered: National

Notes: Demographic Health Survey data includes ever married women aged 15-49 years only and may include males aged 15-59.

Unless otherwise noted, overweight refers to a BMI between 25kg and 29.9kg/m², obesity refers to a BMI greater than 30kg/m².
Children, 2007

Survey type: Measured
Age: 13-16
Sample size: 1355
Area covered: Irbid (North West Jordan)


Notes: Overweight and obesity were categorized according to age–sex specific percentiles of BMI using the Centers for Disease Control BMI-for-age growth charts [7]: underweight (BMI < 5th percentile); normal weight (BMI 5th–< 85th percentile), overweight (BMI 85th–< 95th percentile) or obesity(BMI ≥ 95th percentile). Low income ≤ 200 Jordanian dinars (JD) per month; medium income 201–600 JD per month; high income ≥ 600 JD per month.

Cutoffs: CDC
Insufficient physical activity

Adults, 2016

Men, 2016

**Children, 2010**

**Age:** 11-17


**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, 2010

Age: 11-17


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, 2010

Age: 11-17


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

### Adults, 2017

<table>
<thead>
<tr>
<th>Country</th>
<th>Per-capita Fruit Intake (g/day)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Djibouti</td>
<td>25</td>
</tr>
<tr>
<td>Somalia</td>
<td>50</td>
</tr>
<tr>
<td>Afghanistan</td>
<td>100</td>
</tr>
<tr>
<td>Pakistan</td>
<td>150</td>
</tr>
<tr>
<td>Iraq</td>
<td>200</td>
</tr>
<tr>
<td>Yemen</td>
<td>250</td>
</tr>
<tr>
<td>South Sudan</td>
<td>300</td>
</tr>
<tr>
<td>Sudan</td>
<td>350</td>
</tr>
<tr>
<td>Palestine</td>
<td>400</td>
</tr>
<tr>
<td>Syria</td>
<td>450</td>
</tr>
<tr>
<td>Jordan</td>
<td>500</td>
</tr>
<tr>
<td>Libya</td>
<td>550</td>
</tr>
<tr>
<td>Kuwait</td>
<td>600</td>
</tr>
<tr>
<td>Saudi Arabia</td>
<td>650</td>
</tr>
<tr>
<td>Tunisia</td>
<td>700</td>
</tr>
<tr>
<td>UAE</td>
<td>750</td>
</tr>
<tr>
<td>Lebanon</td>
<td>800</td>
</tr>
<tr>
<td>Egypt</td>
<td>850</td>
</tr>
<tr>
<td>Morocco</td>
<td>900</td>
</tr>
<tr>
<td>Bahrain</td>
<td>950</td>
</tr>
<tr>
<td>Iran</td>
<td>1000</td>
</tr>
<tr>
<td>Qatar</td>
<td>1050</td>
</tr>
<tr>
<td>Oman</td>
<td>1100</td>
</tr>
</tbody>
</table>

**Survey type:** Measured

**Age:** 25+

**References:** Global Burden of Disease, the Institute for Health Metrics and Evaluation [http://ghdx.healthdata.org/](http://ghdx.healthdata.org/)

**Definitions:** Estimated per-capita fruit intake (g/day)
Estimated per-capita processed meat intake

Adults, 2017

Survey type: Measured
Age: 25+
References: Global Burden of Disease, the Institute for Health Metrics and Evaluation [http://ghdx.healthdata.org/]
Definitions: Estimated per-capita processed meat intake (g per day)
Estimated per-capita whole grains intake

Adults, 2017

Survey type: Measured

Age: 25+


Definitions: Estimated per-capita whole grains intake (g/day)
Mental health - depression disorders

Adults, 2015


Definitions: % of population with depression disorders
Mental health - anxiety disorders

Adults, 2015


Definitions: % of population with anxiety disorders
Oesophageal cancer

Men, 2018

Age: 20+

References: Global Cancer Observatory, Cancer incidence rates [http://gco.iarc.fr/] (last accessed 30th June 2020)

Definitions: Estimated age-standardized incidence rates (World) in 2018, oesophagus, adults ages 20+. ASR (World) per 100,000
Women, 2018

Age: 20+


Definitions: Estimated age-standardized incidence rates (World) in 2018, oesophagus, adults ages 20+. ASR (World) per 100,000
Breast cancer
Women, 2018


Definitions: Estimated age-standardized incidence rates (World) in 2018, breast, females, ages 20+. ASR (World) per 100,000
Colorectal cancer

Men, 2018


Definitions: Estimated age-standardized incidence rates (World) in 2018, colorectum, adults, ages 20+. ASR (World) per 100,000
**Women, 2018**

![Bar chart showing incidence rates per 100,000 for colorectal cancer among women in various countries, with the highest rates in Lebanon, followed by Jordan and Syria.](chart.png)

**Age:** 20+


**Definitions:** Estimated age-standardized incidence rates (World) in 2018, colorectum, adults, ages 20+. ASR (World) per 100,000
Pancreatic cancer

Men, 2018

Age: 20+


Definitions: Estimated age-standardized incidence rates (World) in 2018, pancreas, adults, ages 20+. ASR (World) per 100,000
Women, 2018

Incidence per 100,000

Age: 20+


Definitions: Estimated age-standardized incidence rates (World) in 2018, pancreas, adults, ages 20+. ASR (World) per 100,000
Gallbladder cancer

Men, 2018

Age: 20+


Definitions: Estimated age-standardized incidence rates (World) in 2018, gallbladder, adults, ages 20+. ASR (World) per 100,000
### Women, 2018

![Graph showing incidence per 100,000 for various countries.]

**Age:** 20+


**Definitions:** Estimated age-standardized incidence rates (World) in 2018, gallbladder, adults, ages 20+. ASR (World) per 100,000
Kidney cancer

Men, 2018

Age: 20+


Definitions: Estimated age-standardized incidence rates (World) in 2018, kidney, adults, ages 20+. ASR (World) per 100,000
**Women, 2018**

<table>
<thead>
<tr>
<th>Country</th>
<th>Incidence per 100,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yemen</td>
<td>0.1</td>
</tr>
<tr>
<td>South Sudan</td>
<td>1.0</td>
</tr>
<tr>
<td>Bahrain</td>
<td>1.1</td>
</tr>
<tr>
<td>Morocco</td>
<td>1.2</td>
</tr>
<tr>
<td>Sudan</td>
<td>1.3</td>
</tr>
<tr>
<td>Pakistan</td>
<td>1.4</td>
</tr>
<tr>
<td>Afghanistan</td>
<td>1.5</td>
</tr>
<tr>
<td>Djibouti</td>
<td>1.6</td>
</tr>
<tr>
<td>Egypt</td>
<td>1.7</td>
</tr>
<tr>
<td>Iraq</td>
<td>1.8</td>
</tr>
<tr>
<td>Oman</td>
<td>1.9</td>
</tr>
<tr>
<td>Kuwait</td>
<td>2.0</td>
</tr>
<tr>
<td>Tunisia</td>
<td>2.1</td>
</tr>
<tr>
<td>Libya</td>
<td>2.2</td>
</tr>
<tr>
<td>Iran</td>
<td>2.3</td>
</tr>
<tr>
<td>Syria</td>
<td>2.4</td>
</tr>
<tr>
<td>Saudi Arabia</td>
<td>2.5</td>
</tr>
<tr>
<td>Jordan</td>
<td>2.6</td>
</tr>
<tr>
<td>Lebanon</td>
<td>2.7</td>
</tr>
<tr>
<td>Palestine</td>
<td>2.8</td>
</tr>
<tr>
<td>Qatar</td>
<td>2.9</td>
</tr>
<tr>
<td>UAE</td>
<td>4.5</td>
</tr>
</tbody>
</table>

**References:**

**Definitions:**
Estimated age-standardized incidence rates (World) in 2018, kidney, adults, ages 20+. ASR (World) per 100,000
Cancer of the uterus

Women, 2018

Age:


Definitions: Estimated age-standardized incidence rates (World) in 2018, cervix uteri, females, ages 20+. ASR (World) per 100,000
Raised blood pressure

Adults, 2015


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


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

% raised blood pressure


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

Adults, 2008


Definitions: % Raised total cholesterol (>= 5.0 mmol/L) (age-standardized estimate).
Men, 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).
Women, 2008


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 mmol/L or on medication).
Women, 2014

References:

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

Adults, 2017


Definitions: Diabetes age-adjusted comparative prevalence (%).
Health systems

**Economic classification: Upper Middle Income**

**Health systems summary**

Jordan has a mixed healthcare system, made up of a public sector, private sector and an international/charity sector. The health system has been renowned for delivering high-quality care and as a result has been a major health tourism destination in the Middle Eastern region.

Care in the public sector is delivered by the Ministry of Health and the Royal Medical Services. Groups eligible for free insurance in the public sector include those aged 60 and over and 6 and under and those considered impoverished by the Ministry of Social Development. The private sector consists of hospitals and various clinics, but it considered to be fragmented. A recent census estimated that 70% and 55% of Jordanians and the overall population respectively had health insurance, with 80% of Jordanians having public insurance as opposed to private. There are calls for health insurance to be made mandatory to improve coverage. Out-of-pocket expenditure was estimated to be 28.8% of total health expenditure in 2013.

Jordan’s health system has been challenged by the geopolitical crises in neighbouring Syria and Palestine. Large numbers of refugees have stretched services and has exacerbated the impact of an ageing population and the rise in non-communicable diseases. Several humanitarian agencies support healthcare delivery to many of the displaced people.

**Indicators**

<table>
<thead>
<tr>
<th>Question</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where is the country’s government in the journey towards defining ‘Obesity as a disease’?</td>
<td>Some progress</td>
</tr>
<tr>
<td>Where is the country’s healthcare provider in the journey towards defining ‘Obesity as a disease’?</td>
<td>No</td>
</tr>
<tr>
<td>In practice, how is obesity treatment largely funded?</td>
<td>Out of pocket</td>
</tr>
<tr>
<td>Is there specialist training available dedicated to the training of health professionals to prevent, diagnose, treat and manage obesity?</td>
<td>No</td>
</tr>
<tr>
<td>Have any taxes or subsidies been put in place to protect/assist/inform the population around obesity?</td>
<td>No</td>
</tr>
<tr>
<td>Are there adequate numbers of trained health professionals in specialties relevant to obesity in urban areas?</td>
<td>Partial</td>
</tr>
<tr>
<td>Are there adequate numbers of trained health professionals in specialties relevant to obesity in rural areas?</td>
<td>No</td>
</tr>
</tbody>
</table>
Are there any obesity-specific recommendations or guidelines published for adults?  Yes
Are there any obesity-specific recommendations or guidelines published for children?  Yes

Perceived barriers to treatment

- Lack of political will, interest and action
- High cost of out of pocket payments
- Lack of (of failure to follow) treatment guidelines or pathway
- Stigma
- Poor health literacy & behaviour
- Obesity considered aesthetic issue and/or a sign of wealth
- Lack of evidence, monitoring and research

Summary of stakeholder feedback

It is reported that while obesity is accepted as a major health issue in Jordan, it is not yet recognised or treated as a disease by the government or health professionals. Specifically, it was noted that insufficient efforts are being made in prevention, treatment and research.

Stakeholders reported that treatment is rarely covered by insurance (there appears to be exceptions for bariatric surgery at a high BMI), and so in practice, obesity treatment in Jordan is mostly paid for out of pocket. This reflects the overall poor financial investment into obesity. Due to the long waiting lists for surgery in the public sector, it is reported that it is commonplace for people to seek treatment privately where there are no waiting lists. Bariatric surgery in the private sector however has been criticised for not using multidisciplinary approaches and for not having clear pathways up to surgery. Unlike other Middle Eastern countries, it appears that that the Jordanian population are hesitant to have bariatric surgery - one stakeholder reported that his patients refrain for attending support groups because they are reluctant to admit that they had surgery and would prefer to attribute weight loss to personal efforts.

The Jordanian Society for Obesity Surgery published bariatric surgery guidelines in 2018 for adults and children. These appear to be the only guidelines that exist in Jordan. Stakeholders reported there to be no obesity-specific training, except a sole fellowship available for bariatric surgery.

Based on interviews/survey returns from 4 stakeholders

Last updated: June 2020