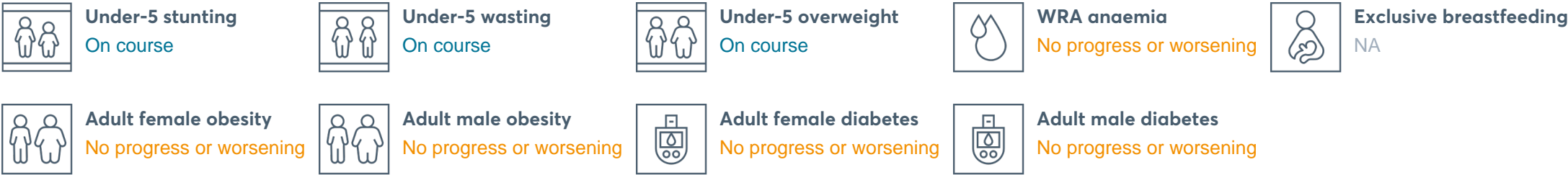# Kuwait

GLOBAL NUTRITION REPORT

Overview

Burden classification

The Global Nutrition Report classifies this country as experiencing two forms of malnutrition – overweight and anaemia

Sources: UNICEF/WHO/World Bank Group: Joint child malnutrition estimates, NCD Risk Factor Collaboration, WHO Global Health Observatory.
Notes: Thresholds for a country having the form or not: stunting in children aged under 5 years ≥20%; anaemia in women of reproductive age ≥20%; overweight (body mass index ≥25) in adult women aged ≥18 years ≥35%.

Progress against global nutrition targets 2018

Under-5 stunting On course	**Under-5 wasting** On course	**Under-5 overweight** On course
WRA anaemia No progress or worsening	**Exclusive breastfeeding** NA	
Adult female obesity No progress or worsening	**Adult male obesity** No progress or worsening	**Adult female diabetes** No progress or worsening
Adult male diabetes No progress or worsening		

Sources: UNICEF/WHO/World Bank Group: Joint child malnutrition estimates, UNICEF global databases: Infant and Young Child Feeding, NCD Risk Factor Collaboration, WHO Global Health Observatory.
Notes: The methodologies for tracking differ between targets. Data on the adult indicators are based on modelled estimates. See Appendix 1 of the *2018 Global Nutrition Report* for details of the methods and sources used to assess progress towards global nutrition targets.
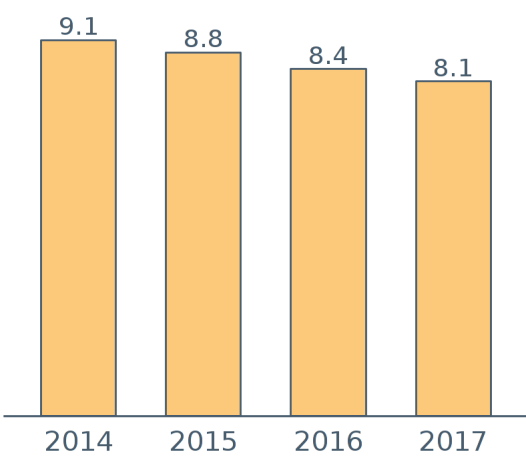
Economics and demography

Poverty rates (%) and GDP (PPP$)

- GDP per capita

2014	2015	2016	2017
70,832	68,476	68,862	65,531
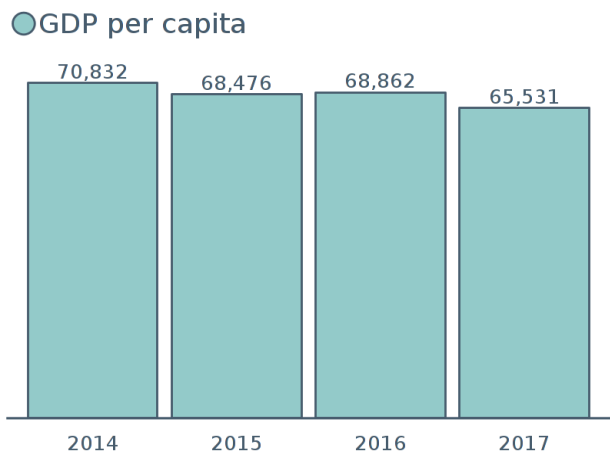
Source: World Bank 2018.
Note: GDP = gross domestic product. PPP = purchasing power parity.

Under-5 mortality (per 000 live births)

2014	2015	2016	2017
9.1	8.8	8.4	8.1

Source: UN Inter-agency Group for Child Mortality Estimation 2018.

Income inequality

Gini index score[1]	Gini index rank[2]	Year
NA	NA	NA

Source: World Bank 2018.
Notes: 0 = perfect equality, 100 = perfect inequality.[1] Countries are ranked from most equal (1) to most unequal (155).[2]
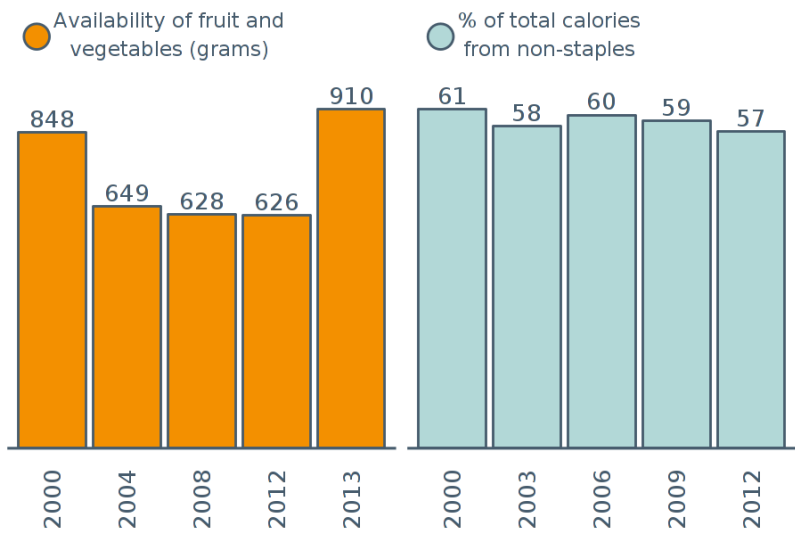
Population

Population (000)	4,137	2017
Under-5 population (000)	324	2018
Rural (%)	0	2017
>65 years (000)	106	2018

Source: UN Population Division 2017.

Underlying determinants

Food supply

- Availability of fruit and vegetables (grams)
- % of total calories from non-staples

2000	2004	2008	2012	2013
848	649	628	626	910

2000	2003	2006	2009	2012
61	58	60	59	57

Source: FAOSTAT 2018.

Gender-related determinants

|		
Early childbearing: births by age 18 (%)[1]	NA	NA
Gender Inequality Index (score*)[2]	0.27	2017
Gender Inequality Index (country rank)[2]	57	2017

Sources: UNICEF 2018;[1] UNDP 2018.[2]
Note: *0 = low inequality, 1 = high inequality.

Population density of health workers per 1,000 people

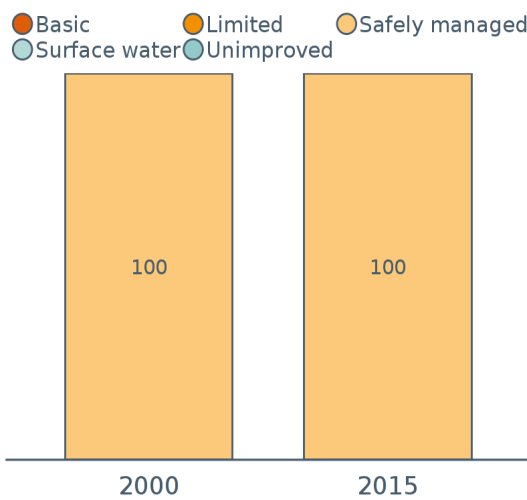|		
Physicians	2.61	2015
Nurses and midwives	7.05	2015
Community health workers	NA	NA

Source: WHO's Global Health Workforce Statistics, OECD, supplemented by country data.

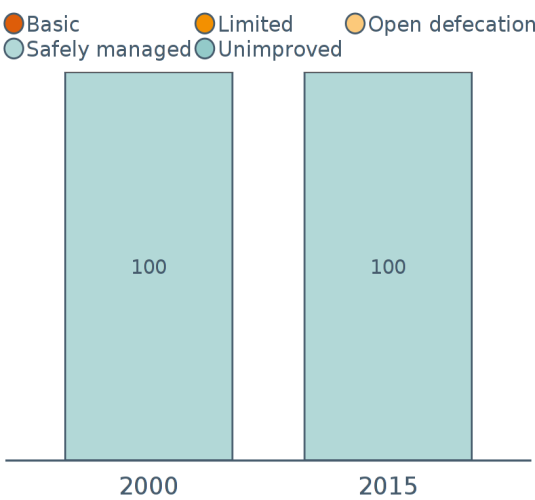### Female secondary education enrolment (net, % population)

2012	2013	2014	2015
88	87	86	89
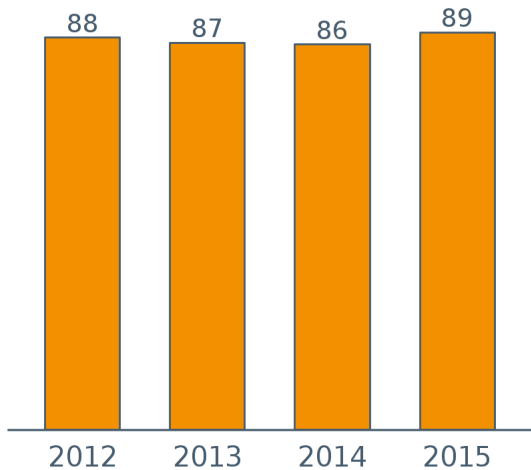
Source: UNESCO Institute for Statistics 2018.

Drinking water coverage (% population)

- Basic
- Limited
- Safely managed
- Surface water
- Unimproved

2000	2015
100	100

Source: WHO/UNICEF Joint Monitoring Programme 2017.

Sanitation coverage (% population)

- Basic
- Limited
- Open defecation
- Safely managed
- Unimproved

2000	2015
100	100

Source: WHO/UNICEF Joint Monitoring Programme 2017.

Government expenditures (% total)

- Agriculture
- Education
- Health
- Social protection

	2000	2010	2012
Agriculture	19	8	11
Health	8	7	7
Social protection	23	22	23
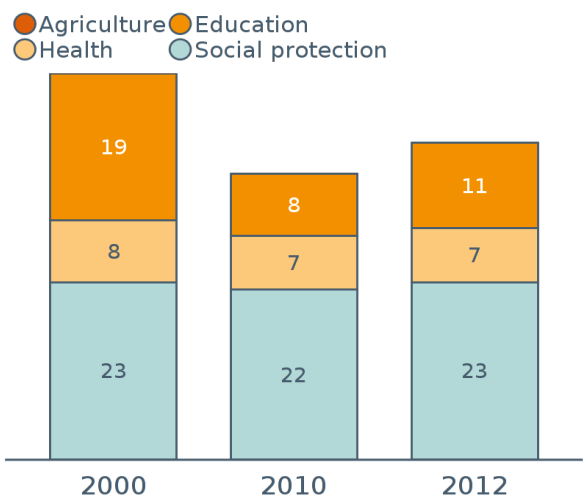
Source: IFPRI 2015.

Children (under 5) nutrition status

Under 5 by gender: wasting (%)

- Girls
- Boys
- Both

3.1

2015
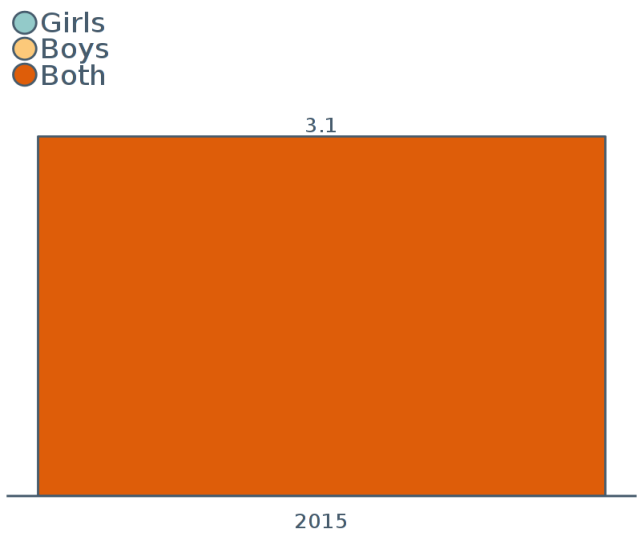
Sources: UNICEF/WHO/World Bank Group: Joint child malnutrition estimates.

Under 5 by gender: stunting (%)

4

4,9

2004   2008   2012
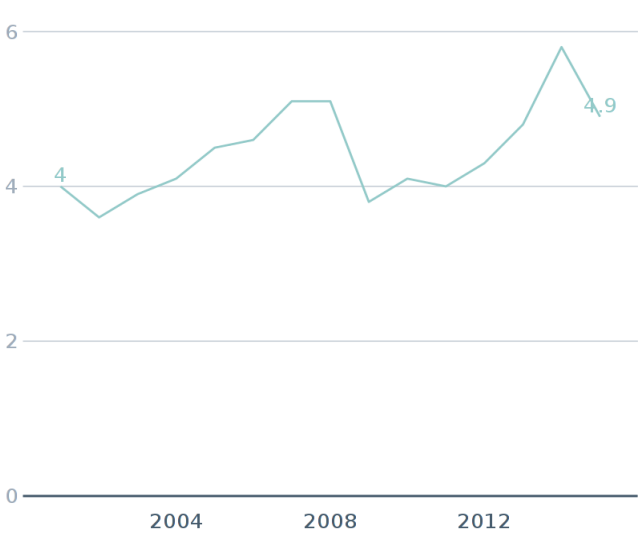
Under 5 by gender: overweight (%)

11

6

2004   2008   2012
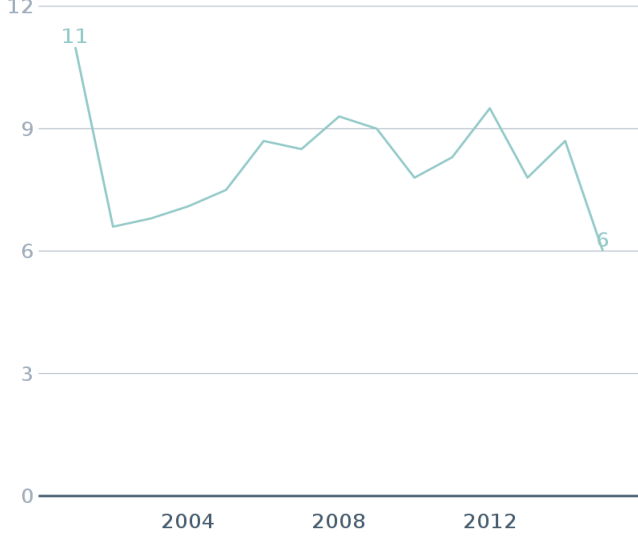
Under 5 by household income: wasting (%)

No data

Under 5 by household income: stunting (%)

No data

Under 5 by household income: overweight (%)

No data

Sources: UNICEF/WHO/World Bank Group: Joint child malnutrition estimates.

Under 5 by household location: wasting (%)
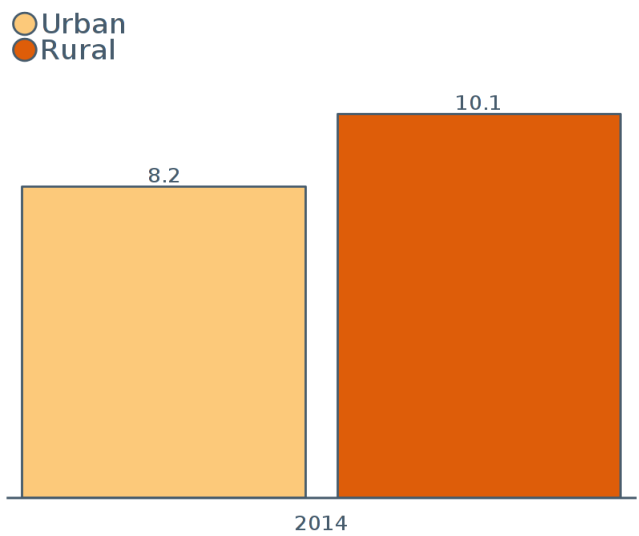
- Urban
- Rural

8.2

10.1

2014

Sources: UNICEF/WHO/World Bank Group: Joint child malnutrition estimates.

Under 5 by household location: stunting (%)

No data

Under 5 by household location: overweight (%)

No data

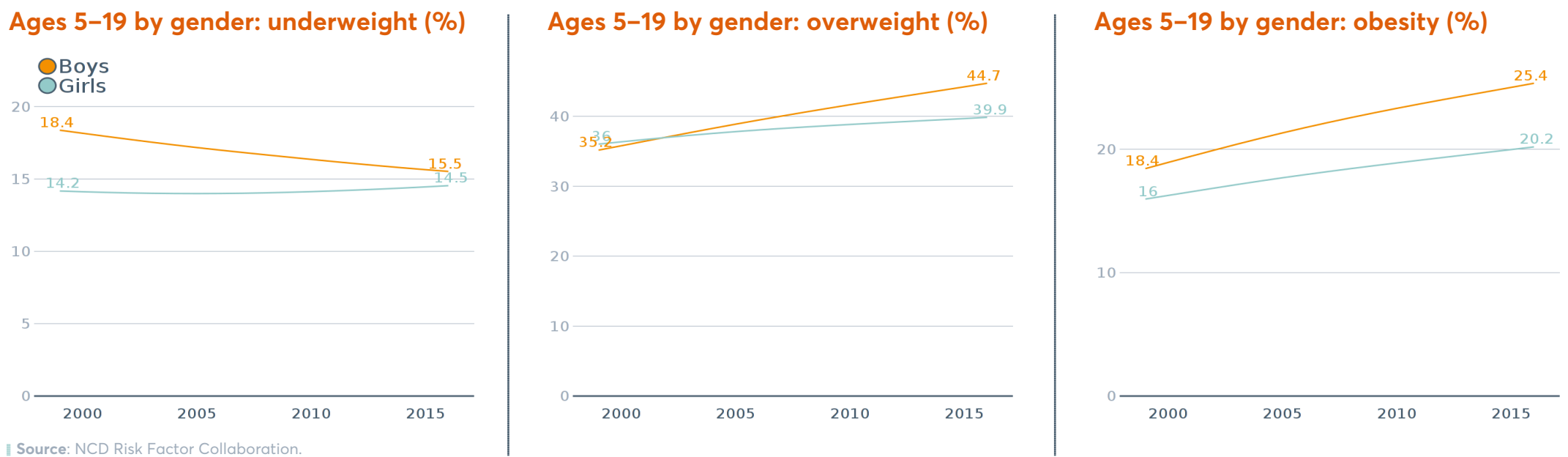### Under-5 coexistence of wasting, stunting and overweight

No data

Sources: UNICEF, Division of Data Research and Policy (2018), Global UNICEF Global Databases: Overlapping Stunting, Wasting and Overweight, New York, May 2018.
Notes: Percentage of children under 5 years of age who experience different and overlapping forms of malnutrition.
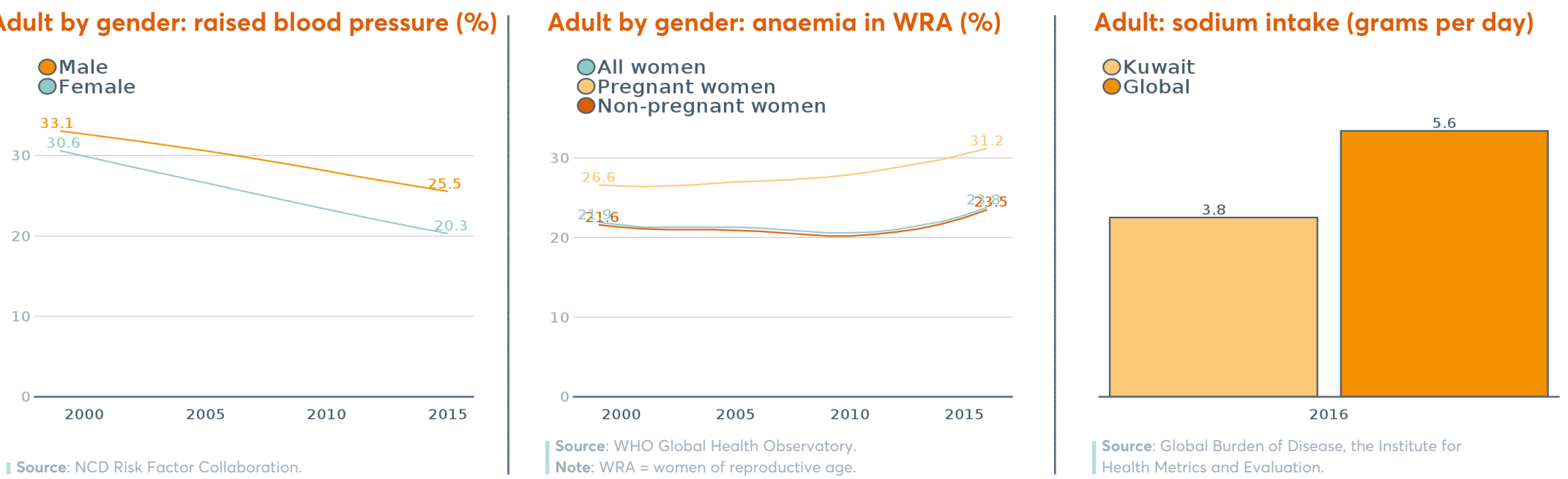
Kuwait

Child feeding practices

No data

Children and adolescent (aged 5–19) nutrition status

Ages 5–19 by gender: underweight (%)

- Boys
- Girls

18.4
14.2
15.5
14.5

Ages 5–19 by gender: overweight (%)

36
35.2
44.7
39.9

Ages 5–19 by gender: obesity (%)

18.4
16
25.4
20.2

Adult nutrition status

Adult by gender: diabetes (%)

- Male
- Female

15.5
15.1
19.7
19.6

Adult by gender: overweight (%)

70.3
63.2
75.1
72.4

Adult by gender: obesity (%)

39.2
23.7
45.6
33.3

Adult by gender: raised blood pressure (%)

- Male
- Female

33.1
30.6
25.5
20.3

Adult by gender: anaemia in WRA (%)

- All women
- Pregnant women
- Non-pregnant women

26.6
22
21.6
31.2
23.5
22.3

Adult: sodium intake (grams per day)

- Kuwait
- Global

3.8
5.6

2016

Kuwait

Dietary needs

Midpoint of TMREL

	0%/0g of TMREL	200% of TMREL

Legend:
- ○ Kuwait
- ○ Asia
- ○ Global

Left column:
- Calcium — 1.3g
- Fruit — 250g
- Legumes — 60g
- Milk — 435g
- Nuts and seeds — 20.5g
- Omega 3 — 0.3g
- Polyunsaturated fat — 11%

Right column:
- Processed meat — 2g
- Red meat — 22.5g
- Salt — 2g (5 5)
- Saturated fat — 7%
- Sugar-sweetened beverages — 2.5g (84 95 99)
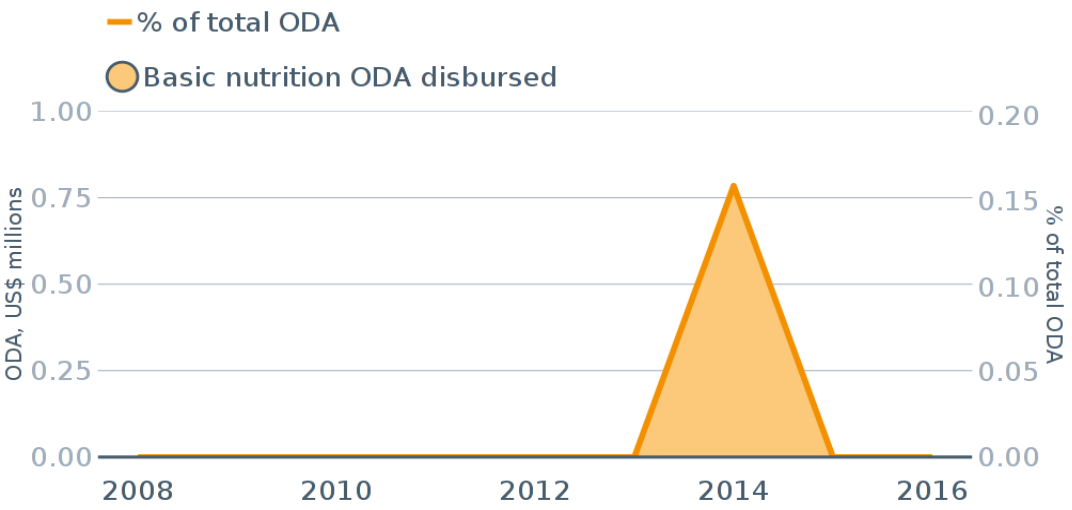- Trans fat — 0.5%
- Vegetables — 360g
- Whole grain — 125g

Source: Global Burden of Disease, the Institute for Health Metrics and Evaluation.
Notes: Men and women aged 25 and older. TMREL = theoretical minimum risk exposure level.

Financial resources and policy, legislation and institutional arrangements

Development assistance

— % of total ODA
○ Basic nutrition ODA disbursed

(Chart: ODA, US$ millions vs % of total ODA, years 2008–2016)

Sources: Development Initiatives based on OECD Development Assistance Committee (DAC) Creditor Reporting System (CRS).
Notes: ODA = official development assistance. Amounts based on gross ODA disbursements, constant 2016 prices. Figure includes ODA grants and loans, but excludes other official flows and private grants.

National policies

Mandatory legislation for salt iodisation	Yes
Sugar-sweetened beverage tax	No
Food-based dietary guidelines	NA
Multisectoral comprehensive nutrition plan	Yes

Sources: Global Fortification Data Exchange 2018; Sugar-sweetened data prepared using data from the NOURISHING database, academic references and market reports; FAO 2018; WHO Global database on the Implementation of Nutrition Action (GINA), 2nd Global Nutrition Policy Review.

Targets included in national (nutrition or other) plan

Stunting	Anaemia	Low birth weight	Child overweight	Exclusive breastfeeding	Wasting	Salt intake	Overweight adults and adolescents
No	No	No	Yes	No	No	No	Yes

Sources: WHO Global database on the Implementation of Nutrition Action (GINA), 2nd Global Nutrition Policy Review.

Intervention coverage

Coverage/practice indicator	%	Male	Female	Year
Children 0–59 months with diarrhoea who received zinc treatment	NA	NA	NA	NA
Children 6–59 months who received vitamin A supplements in last 6 months	NA	NA	NA	NA
Children 6–59 months given iron supplements in past 7 days	NA	NA	NA	NA
Women with a birth in last five years who received iron and folic acid during their most recent pregnancy	NA		NA	NA
Household consumption of any iodised salt	NA	NA	NA	NA

Sources: Kothari M. and Huestis A., based on *2016 Global Nutrition Report* and UNICEF global databases, 2018.
Notes: Data is compiled using STATcompiler and taken from country Demographic and Health Surveys for 2005–2017.