
QATAR

Health at a glance

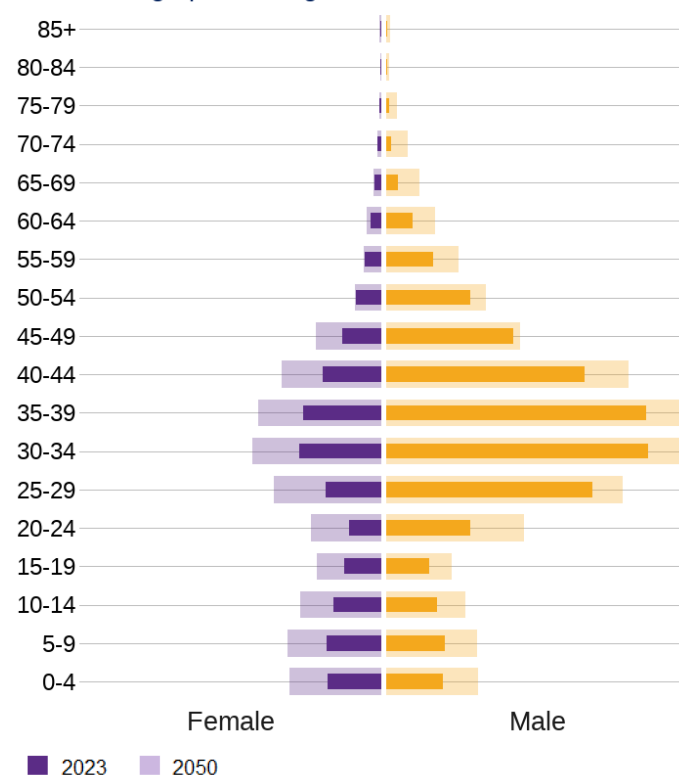
Overview

In Qatar, the population as of 2023 is 2 979 082 with a projected increase of 40% to 4 164 461 by 2050.

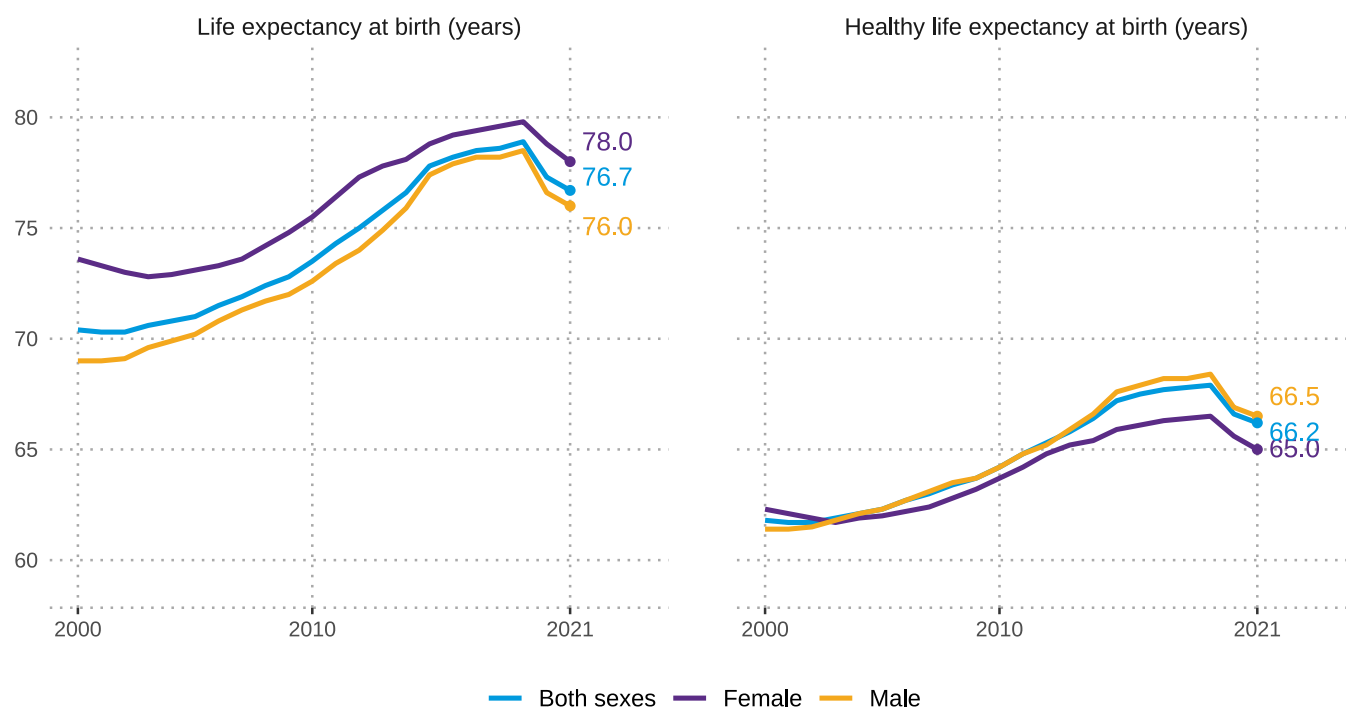
Life expectancy at birth (years) has improved by 8.5 years from 70.4 [70 - 71.1] years in 2000 to 78.9 [78.2 - 79.6] years in 2019. Since 2019, life expectancy has decreased to 76.7 [76.2 - 77.4] years.

Qatar had 4 816 total deaths in 2021; 62% of deaths were from noncommunicable diseases; 18% were from communicable, maternal, perinatal and nutritional conditions; 15% were from injuries; and 5% were from other COVID-19 pandemic-related outcomes.

Demographic change, 2023-2050

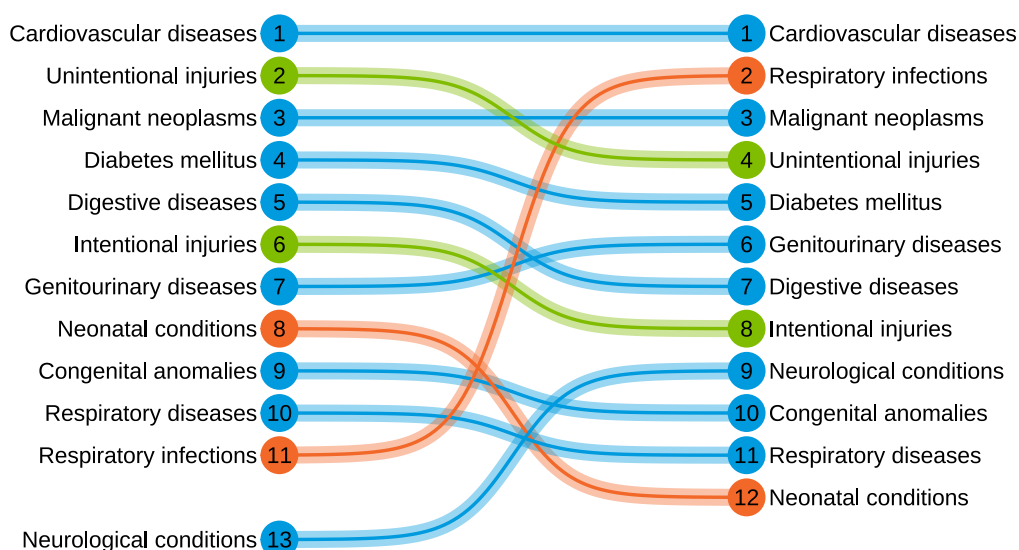


Life expectancy and healthy life expectancy by sex, 2000-2021

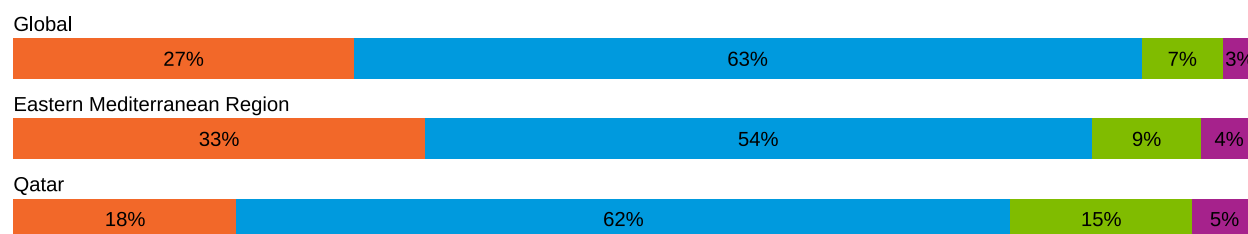


■ Communicable diseases
 ■ Noncommunicable diseases
 ■ Injuries
 ■ Other COVID-19 pandemic-related outcomes

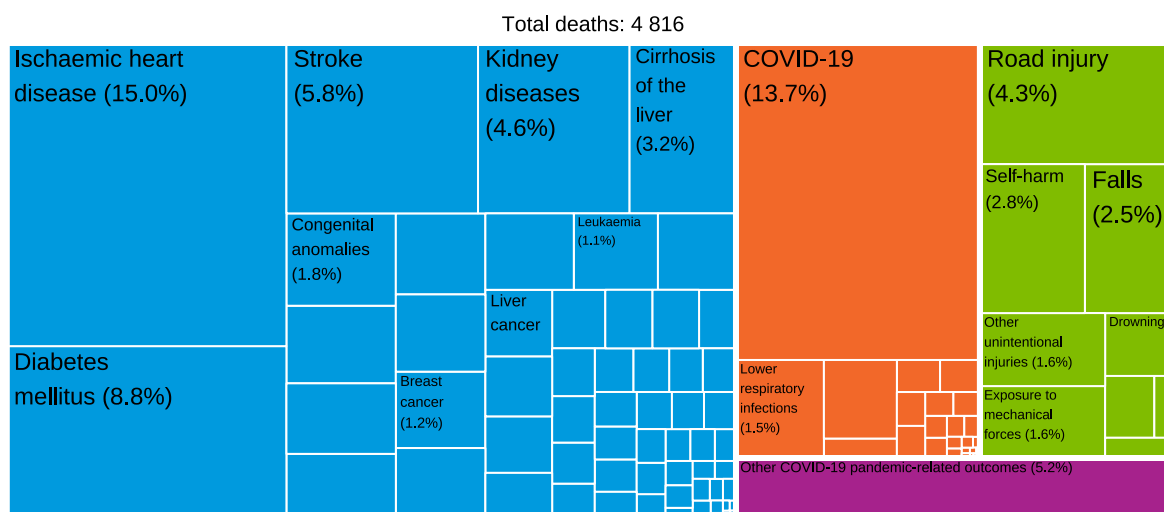
Top 10 level 2 causes of death, 2000-2021



Overall causes of death, 2021



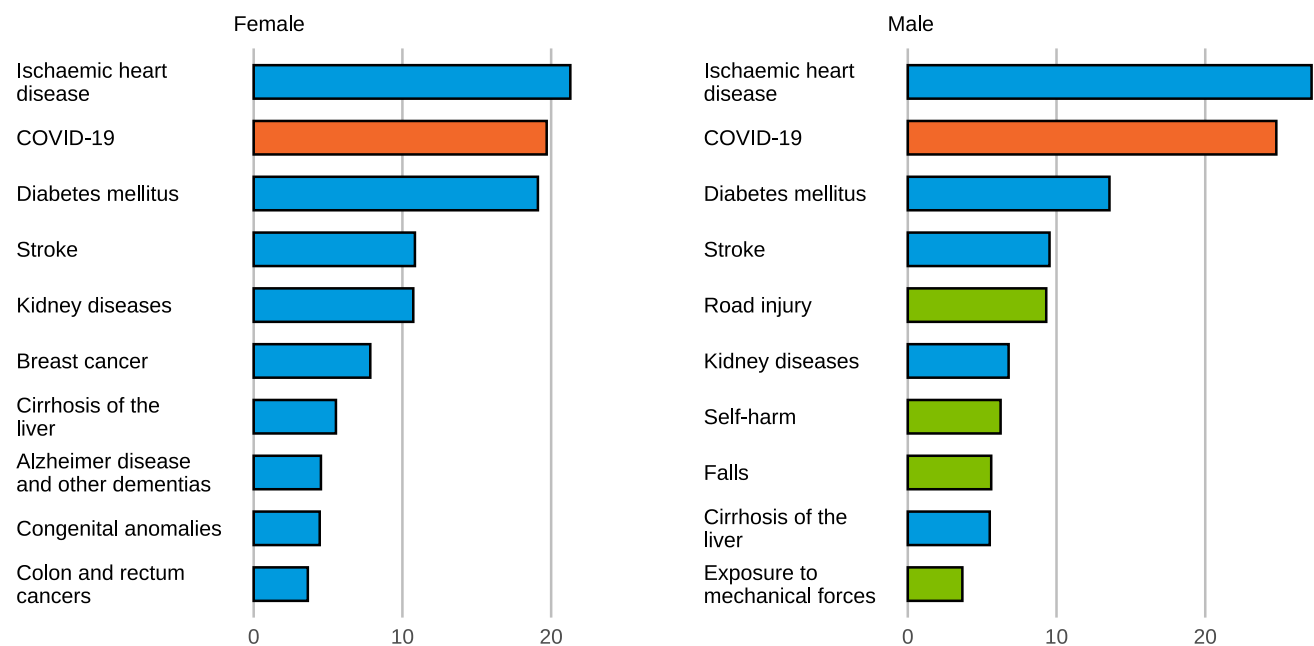
Detailed causes of death, 2021



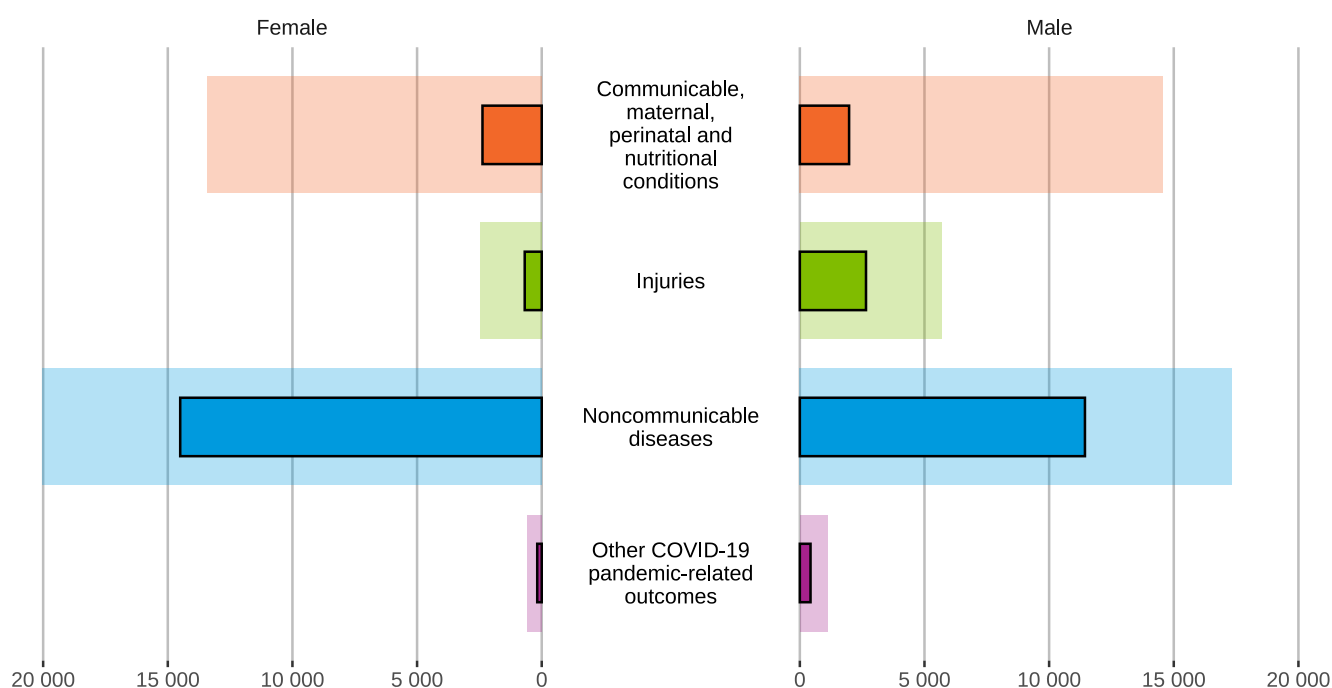
Note: Communicable diseases includes maternal, perinatal and nutritional conditions.

■ Communicable diseases
 ■ Noncommunicable diseases
 ■ Injuries
 ■ Other COVID-19 pandemic-related outcomes

Top 10 detailed causes of death by sex, 2021 (deaths per 100 000 population)



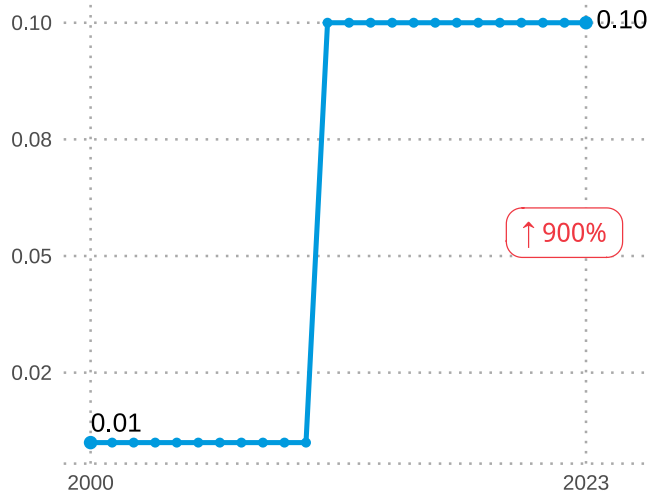
Disability adjusted life-years (DALYs) by sex, 2021 (DALYs per 100 000 population)



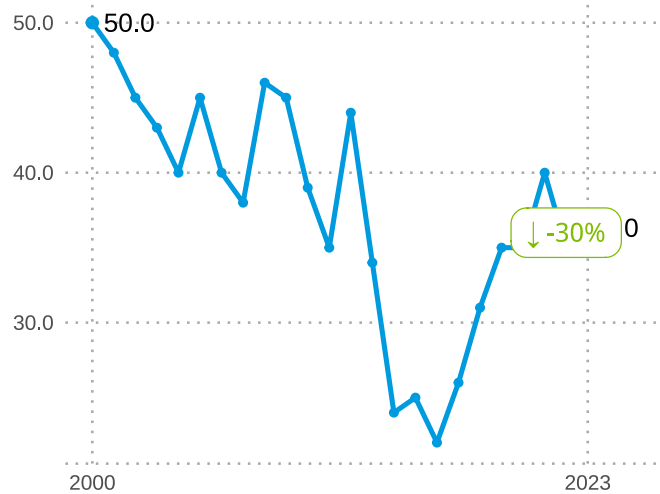
Eastern Mediterranean Region are the lightly shaded bars.

Health Statistics: Health Status

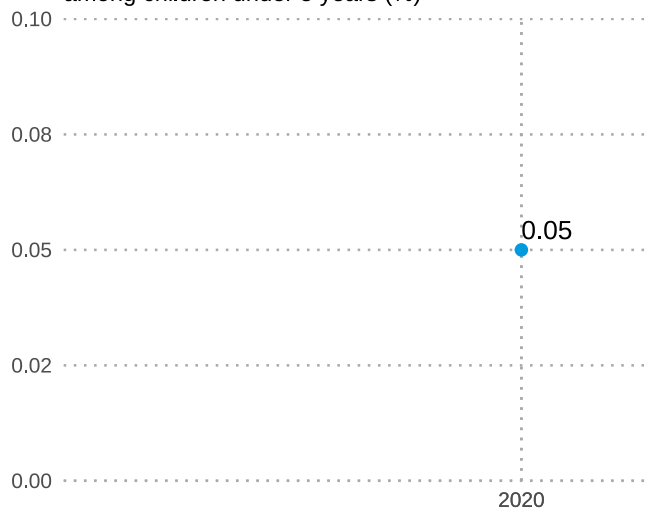
New HIV infections (per 1000 uninfected population)



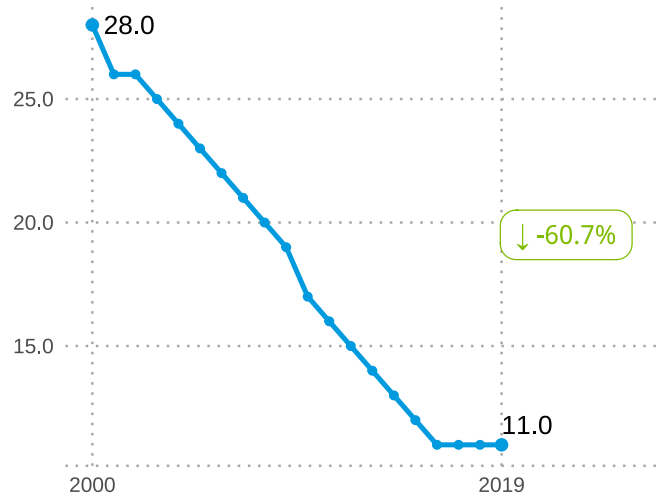
Tuberculosis incidence (per 100 000 population)



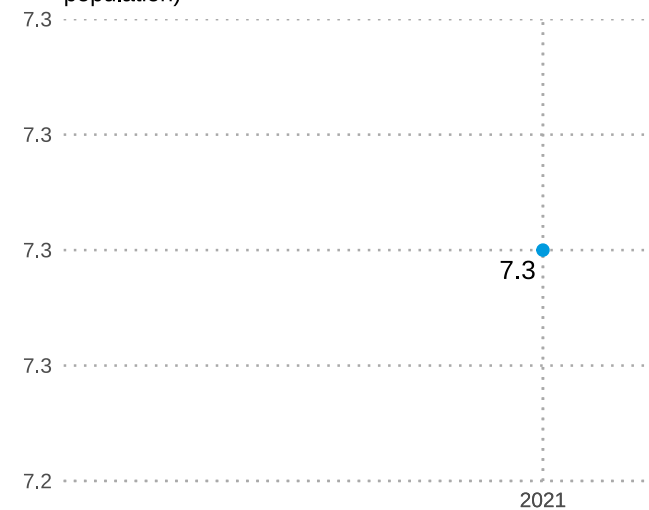
Hepatitis B surface antigen (HBsAg) prevalence among children under 5 years (%)



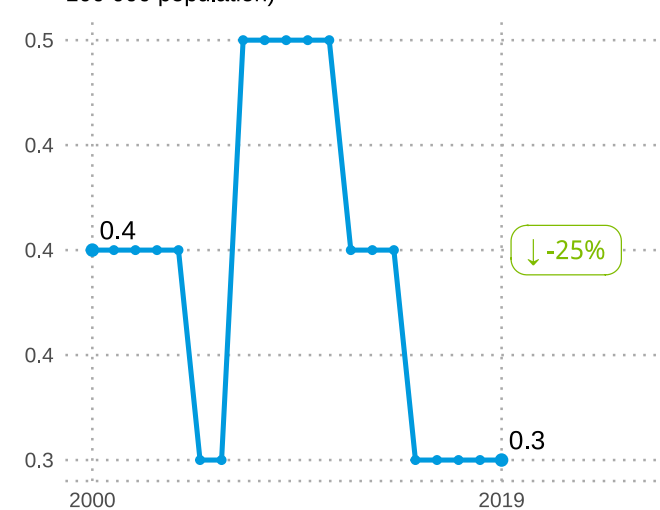
Probability of premature mortality from NCDs (%)



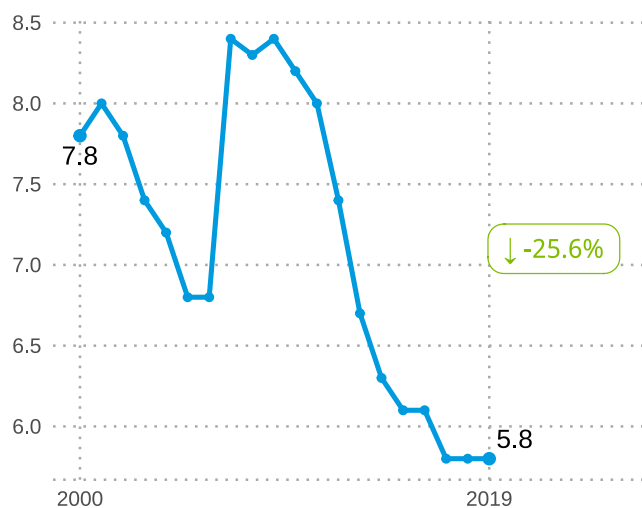
Road traffic mortality rate (per 100 000 population)



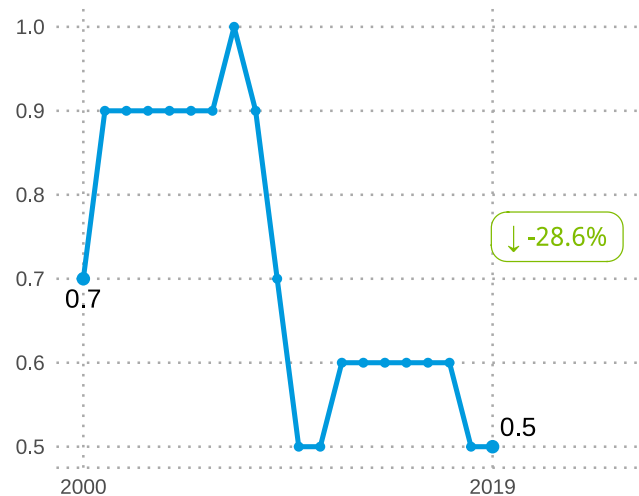
Mortality rate from unintentional poisoning (per 100 000 population)



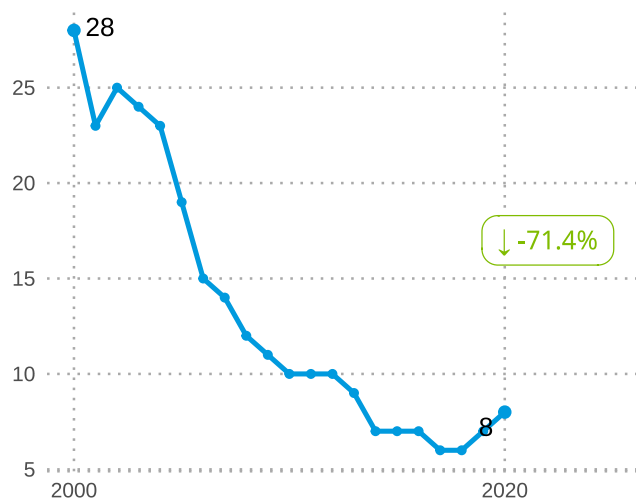
Suicide mortality rate (per 100 000 population)



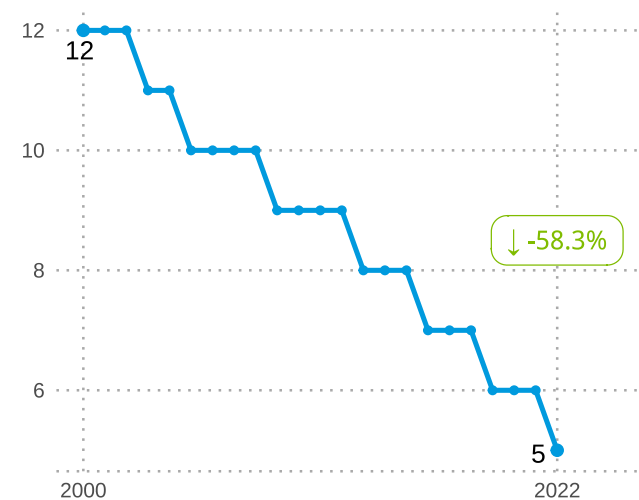
Mortality rate due to homicide (per 100 000 population)



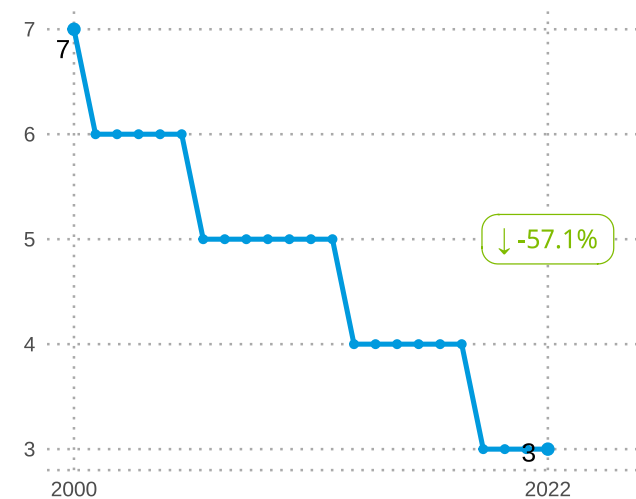
Maternal mortality ratio (per 100 000 live births)



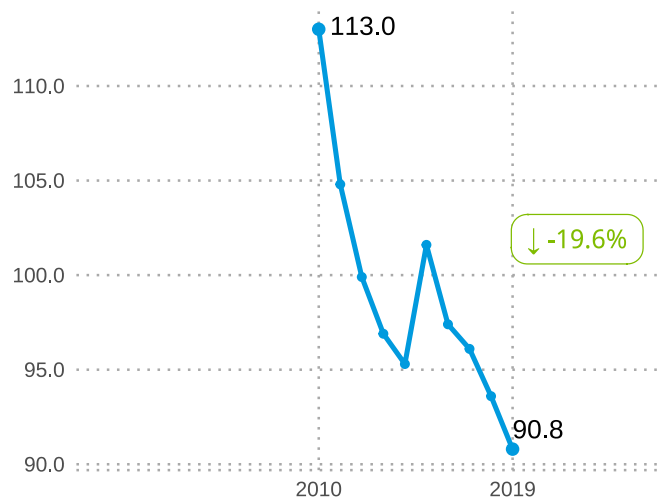
Under-five mortality rate (per 1000 live births)



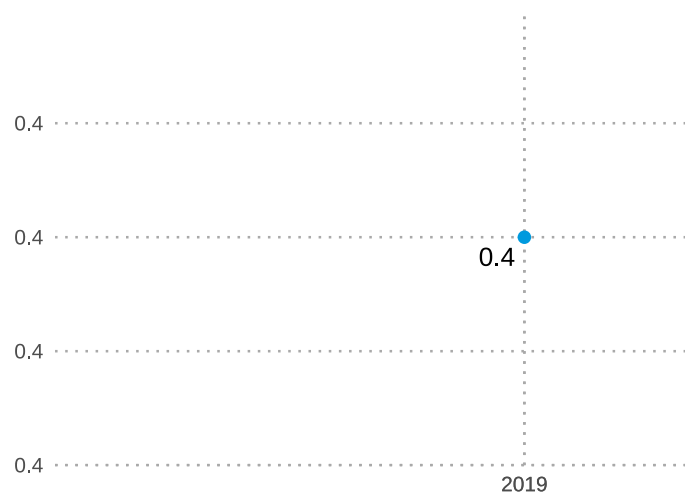
Neonatal mortality rate (per 1000 live births)



Age-standardized mortality rate attributed to household and ambient air pollution (per 100 000 population)

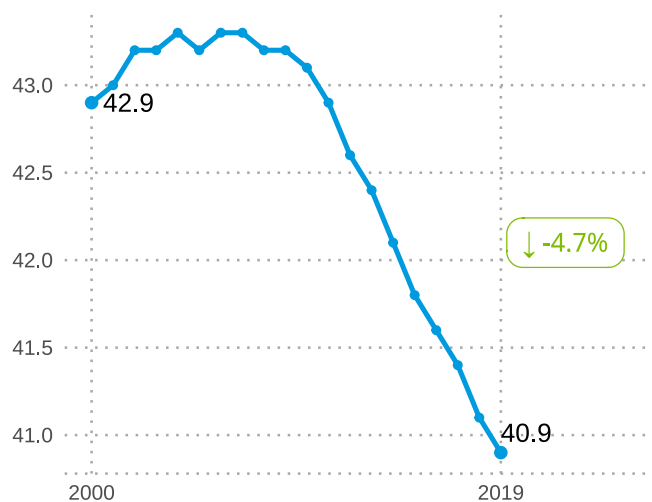


Mortality rate attributed to exposure to unsafe
WASH services (per 100 000 population)

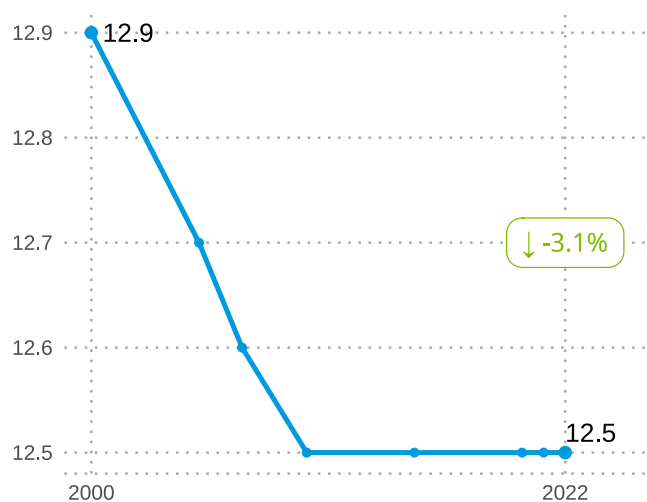


Health Statistics: Risk Factors

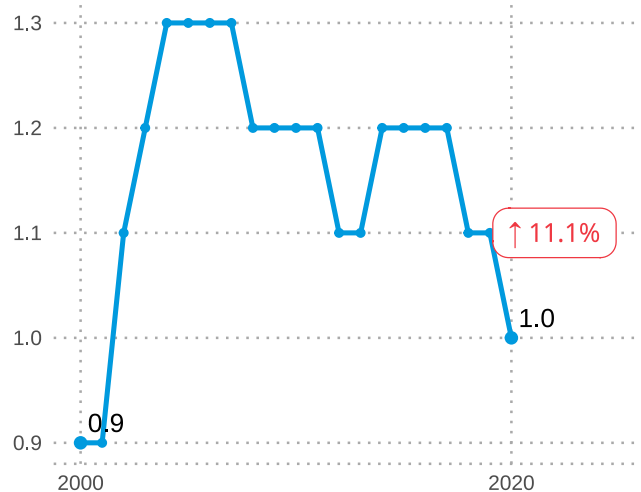
Age-standardized prevalence of hypertension among adults aged 30 to 79 years (%)



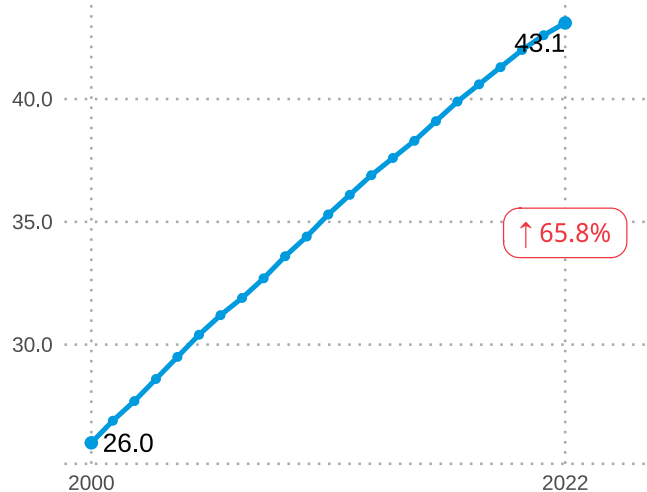
Age-standardized prevalence of tobacco use among persons 15 years and older (%)



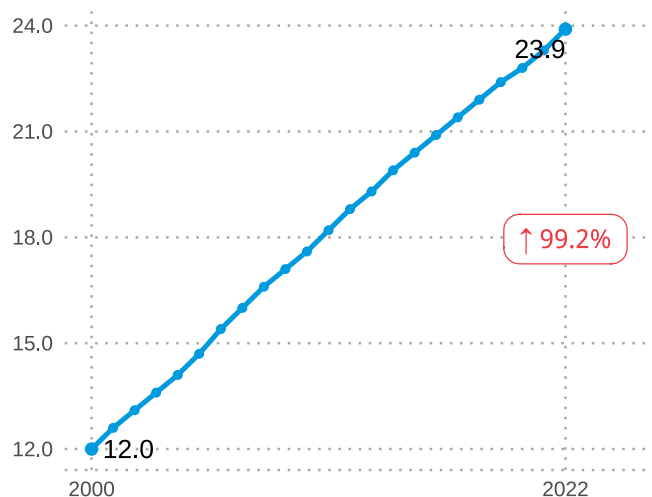
Total alcohol per capita (>= 15 years of age) consumption (litres of pure alcohol)



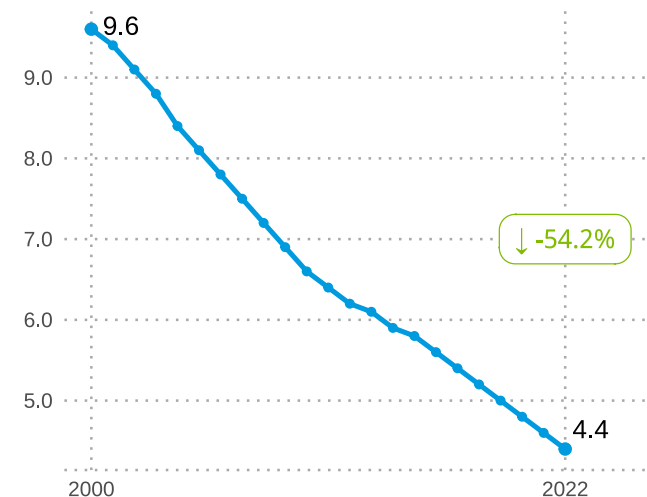
Age-standardized prevalence of obesity among adults (18+ years) (%)



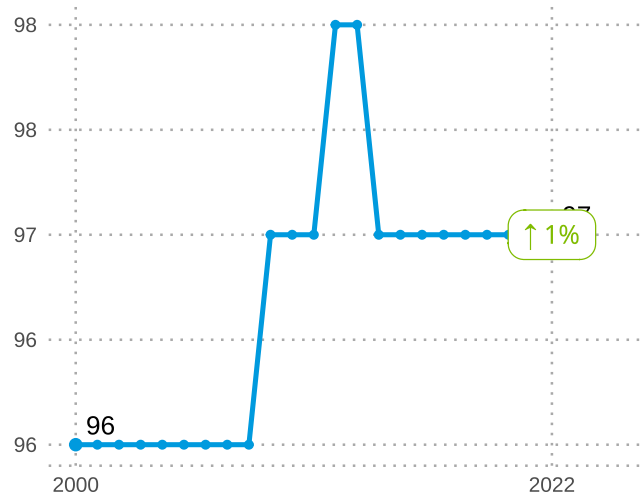
Prevalence of obesity among children and adolescents aged 5 to 19 years (%)



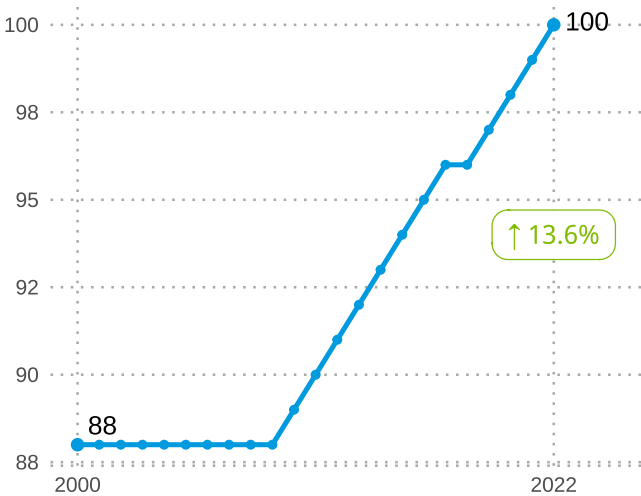
Prevalence of stunting in children under 5 (%)



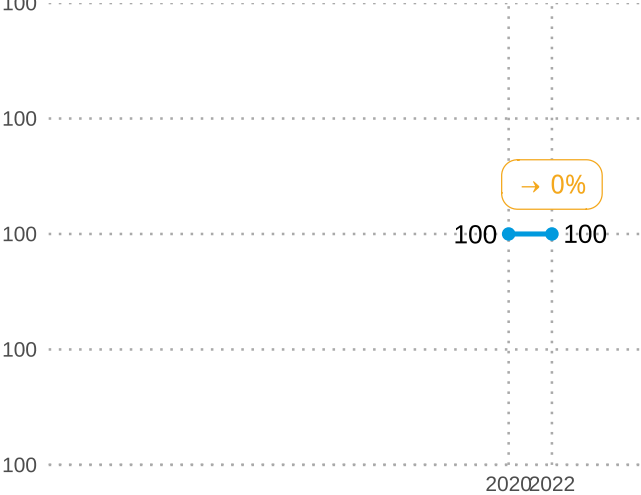
Proportion of population using safely managed drinking-water services (%)



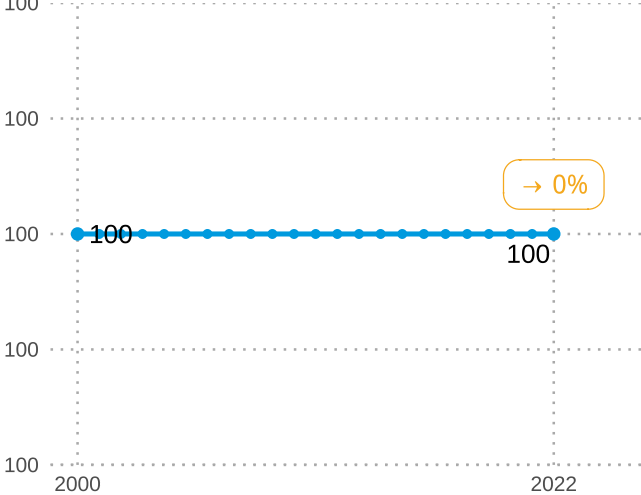
Proportion of population using safely managed sanitation services (%)



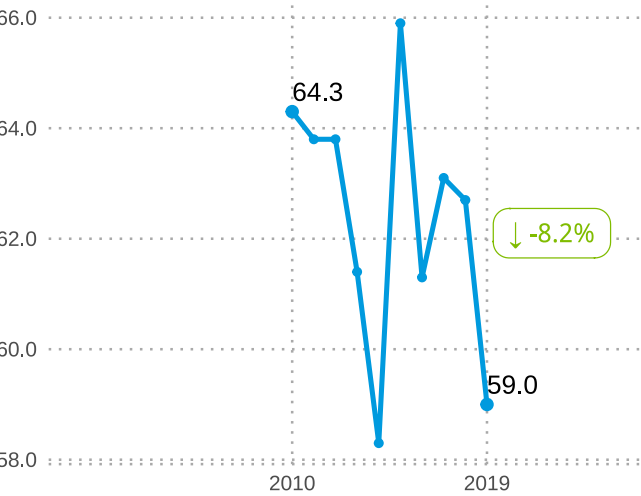
Proportion of safely treated domestic wastewater flows (%)



Proportion of population with primary reliance on clean fuels (%)

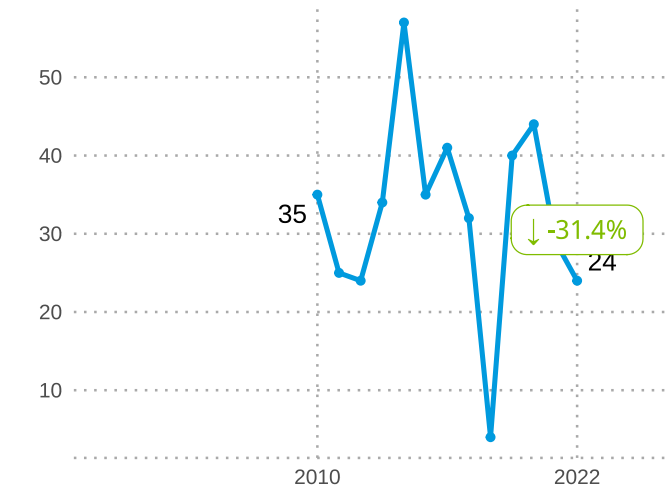


Annual mean concentrations of fine particulate matter (PM2.5) in urban areas (µg/m3)

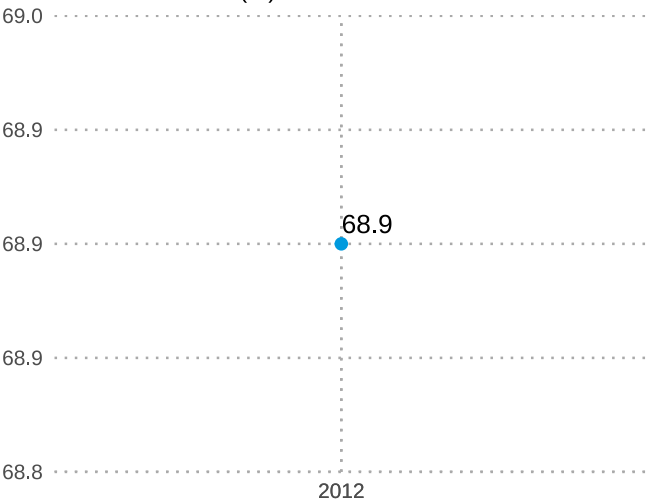


Health Statistics: Service Coverage

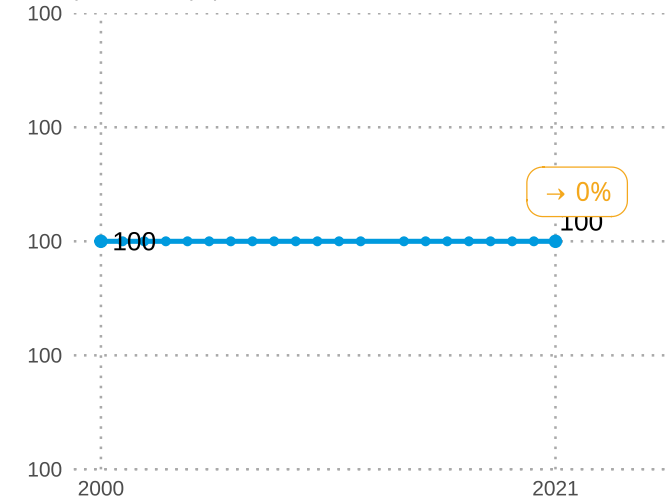
Reported number of people requiring interventions against Neglected Tropical Diseases



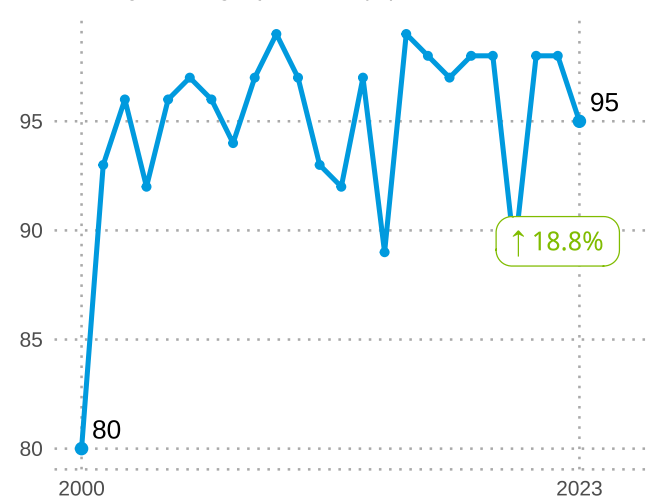
Proportion of women of reproductive age who have their need for family planning satisfied with modern methods (%)



Proportion of births attended by skilled health personnel (%)



Diphtheria-tetanus-pertussis (DTP3) immunization coverage among 1 year olds (%)

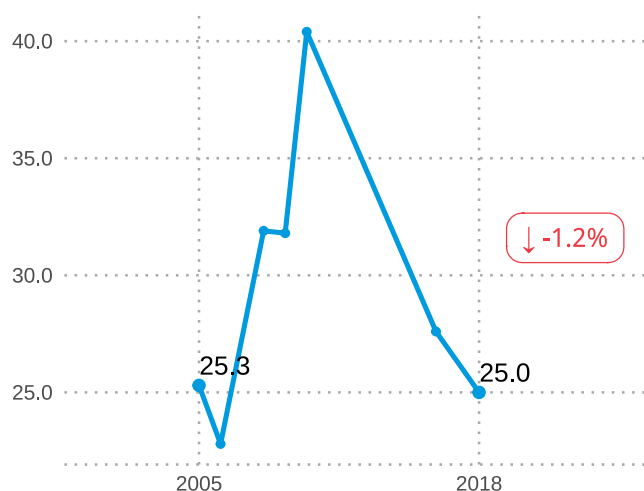


Health Statistics: Health Systems

Domestic general government health expenditure (GGHE-D) as percentage of general government expenditure (GGE) (%)



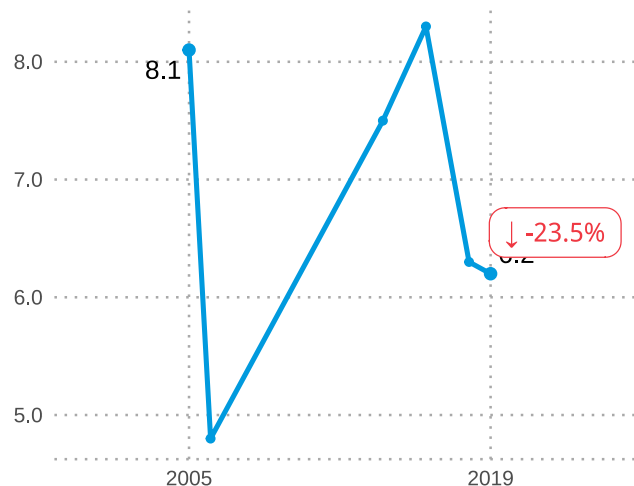
Density of physicians (per 10 000 population)



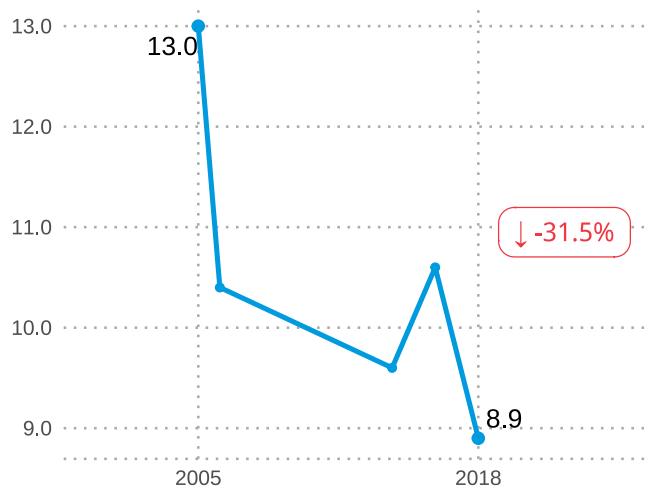
Density of nursing and midwifery personnel (per 10 000 population)



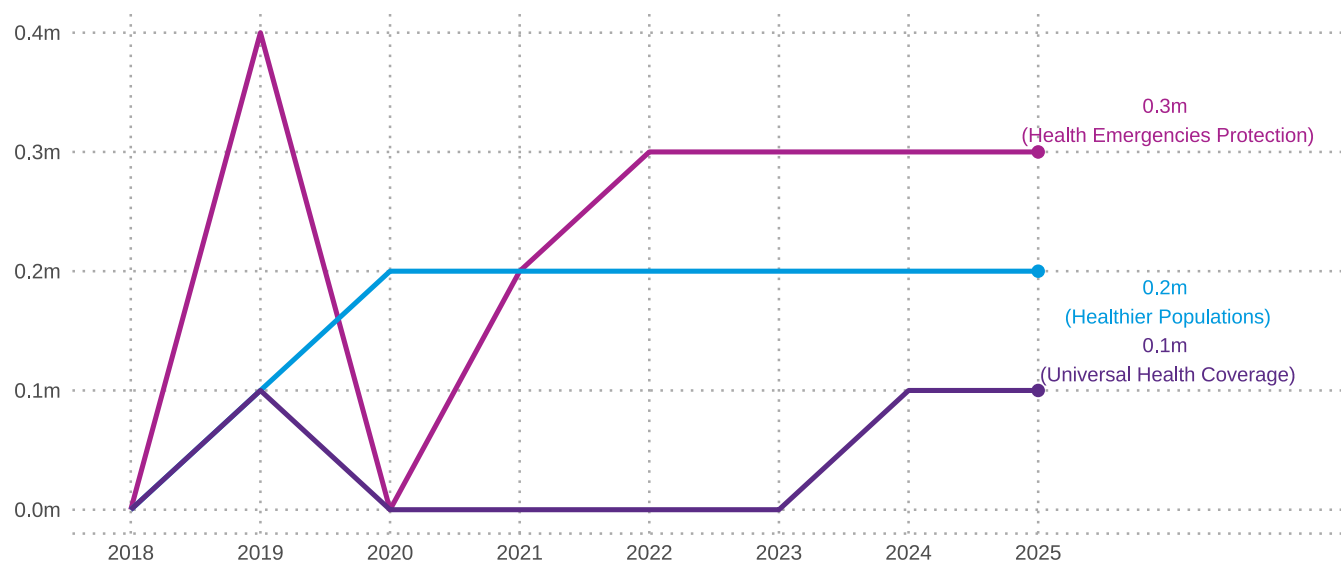
Density of dentistry personnel (per 10 000 population)



Density of pharmaceutical personnel (per 10 000 population)

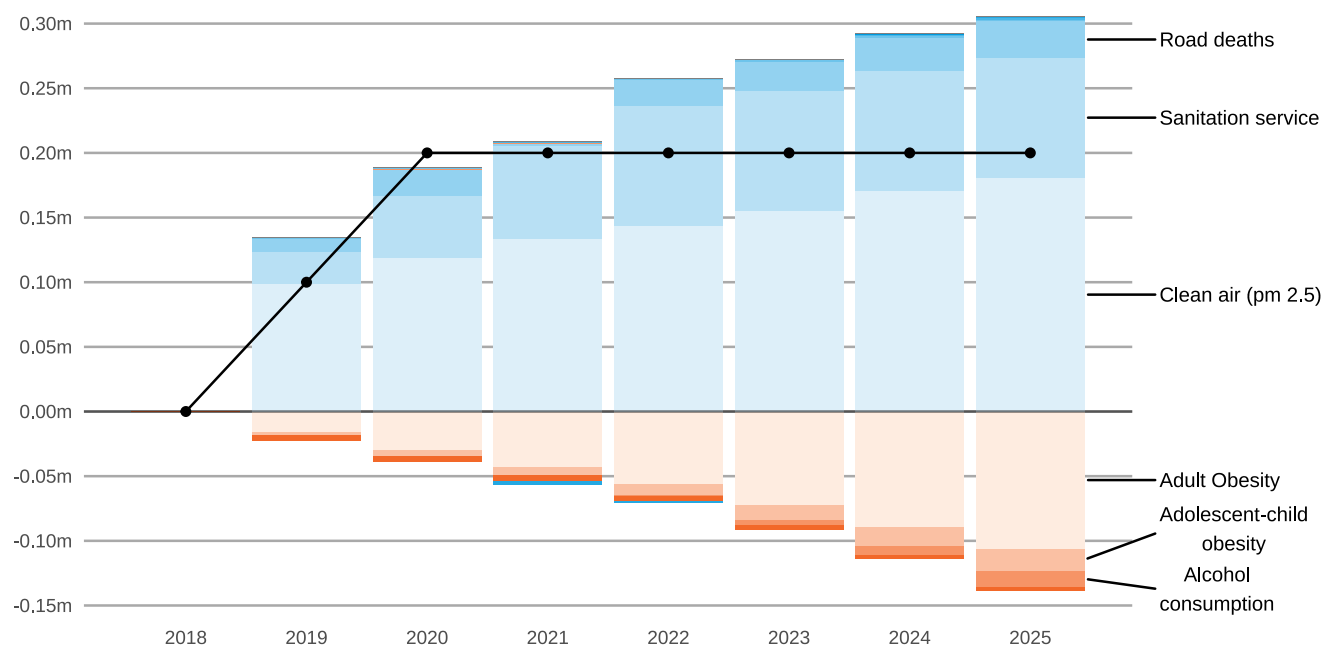


Triple Billions - Number of people affected (millions)



In Qatar, by 2025 the number of additional people projected to be: enjoying better health and wellbeing is 0.2 million; covered by essential services and not experiencing financial hardship is 0.1 million; and protected from health emergencies is 0.3 million.

Healthier Populations - individual indicator contributions (millions)



Other indicators below 1% of the total absolute contribution in 2025: Child violence, Child development, Clean fuel use, Partner violence, Trans-fat policy, Child wasting, Child overweight, Tobacco Use, Suicide mortality, Child stunting, Safe water.

Further Resources

[WHO Global country page](#)

[WHO Global website](#)

Data Sources

Population data	UNDESA population division, World Population Prospects 2022 Extracted: December 2024
Current Health Expenditure (CHE) as % of GDP	World Health Organization, Global Health Expenditure database Extracted: August 2024
Life expectancy and Healthy life expectancy (HALE)	World Health Organization, Global Health Estimates Extracted: December 2024
Causes of death	World Health Organization, Global Health Estimates Extracted: December 2024
Disease Burden	World Health Organization, Global Health Estimates, Burden of Disease Extracted: December 2024
Sustainable Development Goals (SDG) Indicators	World Health Organization, The Global Health Observatory
Triple Billion	World Health Organization, Global Progress Dashboard, Triple Billion targets

Date created: 11/12/2024
<https://data.who.int/countries/634>

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