Nutrition, Physical Activity and Obesity

Georgia

Demographic Data

- Total population: 4,497,600
- Median age (years): 39.3
- Life expectancy at birth (years) female: 78.6, male: 70.2
- GDP per capita (US$): 3230.7
- GDP spent on health (%): 10.1

Monitoring and surveillance

Overweight and obesity in three age groups

Adults (18/20 years and over)

Intercountry comparable overweight and obesity estimates from 2008 (1) show that 54.1% of the adult population (≥ 20 years old) in Georgia were overweight and 22.1% were obese. The prevalence of overweight was lower among men (51.4%) than women (56.6%). The proportion of men and women that were obese was 16.2% and 27.0%, respectively.

Nationally representative data collected in 2010 show that 58.6% of men and 54.2% of women aged 18–64 years were overweight (based on measured height and weight). The proportion of men and women that were obese was 21.8% and 28.5%, respectively (2). It should be taken into account that these data do not allow for comparability across countries due to sampling and methodological differences.

Notes:
The country codes refer to the ISO 3166-1 Alpha-3 country codes. Data ranking for obesity is intentionally the same as for the overweight data. BMI: body mass index.

Source: WHO Global Health Observatory Data Repository (1).
Adulthood obesity prevalence forecasts (2010–2030) predict that in 2020, 54% of men and 36% of women will be obese. By 2030, the model predicts that 82% of men and 53% of women will be obese.¹

Adolescents (10–19 years)
No data are available from the Health Behaviour in School-aged Children (HBSC) survey (2009/2010).

Children (0–9 years)
No prevalence figures are available for overweight and obesity in schoolchildren based on measured intercountry comparable data. Georgia is not yet participating in the WHO European Childhood Obesity Surveillance Initiative (COSI).

However, nationally representative data (based on measurements of height and weight) among children aged 0–5 years collected in 2009 (3) show that 19.9% were overweight (23.3% boys, 19.2% girls) and 6.8% were obese (10.3% boys, 6.6% girls).² It should be taken into account that these national data do not allow for comparisons across countries due to sampling and other methodological differences.

Exclusive breastfeeding until 6 months of age
Nationally representative data from 2005 show that the prevalence of exclusive breastfeeding under 6 months of age was 10.9% in Georgia,³ while, according to the 2009 National Nutrition Survey (3) the prevalence of exclusive breastfeeding under 6 months was 54.8%.

Saturated fat intake
No data are available.

Fruit and vegetable supply
Georgia had a fruit and vegetable supply of 280 grams per capita per day, according to 2009 FAO estimates (4). According to the 2010 Noncommunicable Diseases Risk Factor Survey (2), the mean number of servings of fruit consumed on average per day by adults aged 18–64 years was 1.8 and the mean number of servings of vegetables consumed on average per day was 2.2. The proportion of the population who ate fewer than five servings of fruit and/or vegetables on average per day was 69.6%. It should be taken into account that the latter consumption data do not allow for comparability across countries due to sampling and other methodological differences.

¹ Report on modelling adulthood obesity across the WHO European Region, prepared by consultants (led by T. Marsh and colleagues) for the WHO Regional Office for Europe in 2013.
² Based on 2006 WHO child growth standards.
³ WHO Regional Office for Europe grey literature from 2012 on breastfeeding.
Salt intake
No data are available.

Iodine status
According to the most recent estimates on iodine status, published in 2012, the proportion of the population with an iodine level lower than 100 µg/L was 4.4% \((6, 7)\).

Physical inactivity
In Georgia, 22.9% of the population aged 15 years and over were insufficiently active (men 21.3% and women 24.2%), according to estimates generated for 2008 by WHO \((1)\). According to the 2010 Noncommunicable Diseases Risk Factor Survey \((2)\), 21.6% of the population aged 18–64 years had low levels of physical activity (defined as < 600 metabolic equivalent (MET)-minutes per week) (men 20.9% and women 22.3%). It should be taken into account that these latter data do not allow for comparability across countries due to sampling and methodological differences.

Policies and actions
The table below displays (a) monitoring and evaluation methods of salt intake in Georgia; (b) the stakeholder approach toward salt reduction; and (c) the population approach in terms of labelling and consumer awareness initiatives \((5)\).

Salt reduction initiatives

<table>
<thead>
<tr>
<th>Monitoring &amp; evaluation</th>
<th>Stakeholder approach</th>
<th>Population approach</th>
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</thead>
<tbody>
<tr>
<td>Industry self-reporting</td>
<td>Industry involvement</td>
<td>Labelling</td>
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<tr>
<td>Salt content in food</td>
<td>Food reformulation</td>
<td>Brochure Print</td>
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<tr>
<td>Salt intake</td>
<td>Specific food category</td>
<td>TV Radio</td>
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<tr>
<td>Consumer awareness</td>
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<td>Web site Software</td>
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<tr>
<td>Behavioural change</td>
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<td>Education Schools</td>
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<tr>
<td>Urinary salt excretion (24 hrs)</td>
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<td>Health care facilities</td>
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<td></td>
<td></td>
<td>Conference Reporting</td>
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</tbody>
</table>

Note. **XX** partially implemented.
Source: WHO Regional Office for Europe \((5)\).
Marketing of food and non-alcoholic beverages to children (8)
No action has yet been taken regarding a reduction in the marketing of food and beverages to children.

<table>
<thead>
<tr>
<th>Physical activity (PA), national policy documents and action plans</th>
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<tbody>
<tr>
<td><strong>Sport</strong></td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td>Existence of national “sport for all” policy and/or national “sport for all” implementation programme</td>
</tr>
<tr>
<td>✓</td>
</tr>
</tbody>
</table>

* Clearly stated in a policy document, partially implemented or enforced. 
* Clearly stated in a policy document, entirely implemented and enforced.

Source: country reporting template on Georgia from 2009 developed in the context of a WHO/EC project on monitoring progress on improving nutrition and PA and preventing obesity in the European Union (EU).

Leadership, partnerships and professional networks on health-enhancing physical activity (HEPA)

<table>
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<tr>
<th>Existence of national coordination mechanism on HEPA promotion</th>
<th>Leading institution</th>
<th>Participating bodies</th>
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Source: country reporting template on Georgia from 2009 developed in the context of a WHO/EC project on monitoring progress on improving nutrition and PA and preventing obesity in the EU.

PA recommendations, goals and surveillance

<table>
<thead>
<tr>
<th>Existence of national recommendation on HEPA</th>
<th>Target groups addressed by national HEPA policy</th>
<th>PA included in the national health monitoring system</th>
</tr>
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</table>

Source: country reporting template on Georgia from 2009 developed in the context of a WHO/EC project on monitoring progress on improving nutrition and PA and preventing obesity in the EU.

References