



Gender Statistics in Lebanon

Current situation and Future needs

HEALTH

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Background and Objectives:

***Review and summarize** major issues on gender aspects of health in Lebanon in order to illustrate the data available on gender in CAS surveys and the Ministry of Public Health.*

***Identify** areas for greater attention to gender in the collection, tabulation, analysis and dissemination of statistical data and indicators for the future.*

***Illustrate** data and indicators showing gender differentials, the aim is to provide full and complete coverage of all available indicators by sex.*

Data Sources:

1- CAS Surveys:

- *The State of Children in Lebanon, 2000.*
- *The Lebanon Family Health Survey, 2004.*
- *The Living Conditions of the Households of 2004 and 2007.*
- *The Multiple Indicators Cluster Survey III, 2009.*

2- Ministry of Public Health (Admin data)

- *Yearly Statistical Bulletin*

Assets: CAS

- *Special Questionnaire, for the eligible Women (15 – 49), (MICS, PAPFAM).*
- *Module on the Chronic Disease.(LCHH, 2004).*
- *Module on the Disability (PAPFAM, LCHH, MICS).*
- *Module on Health Insurance (LCHH, 2004 and 2007).*
- *Questions on “Smoking” (PAPFAM, 2004).*
- *All the data can be aggregated by Sex, (All CAS surveys).*

Assets: MoPH

- *MoPH subsidized admissions by Sex*
- *HIV /AIDS incidence and Prevalence by Sex*
- *Immunization by Sex*

Limitations

Focus on Reproductive Health

- *Only one aspect of women's health*
- *Decreased in importance: fertility decline from 3.16 in 2000 to 2.8 in 2004.*
- *Little on General health*
 - *Men*
 - *Women*

Data Needs

Women's compared to men's health on:

- *Incidence of disease*
- *Access to care*
- *Quality and Outcome of care*

1- Non-reproductive Health

- *Disease, by sex and broad age groups,*
- *Disability and health*
- *Violence*
- *Access to health care:*
 - *hospital and clinic admissions*
 - *surgical procedures*
 - *availability of health insurance*
- **Quality of care, as reported**
- **mortality by cause of death**
- **Expectation of life at age 65**
- **Reported health status**

2- Reproductive health

Reproductive health can be assessed through:

1 - Mother's Health

2- Infant and Child Health

1 - Mother's Health

- *age at first birth*
- *age-specific fertility rate*
- *total fertility Rate*
- *maternal mortality*
- *maternal morbidity*
- *contraceptive use*

2- Infant and Child Health

- *Infant mortality by sex*
- *early childhood mortality by sex*
- *length of breastfeeding by sex*
- *introduction of solid foods by sex*
- *treatment of childhood illnesses by sex*
- *Underweight and overweight children, age 1-4, Ratio of boys to girls...*

Coverage

- *Maternal and child health indicators are well covered*
- *many aspects lacking for health and health care information on both men and women.*
- *Additional tabulations and analyses by sex can yield some useful gender indicators*

Key gaps - 1

- *Non-reproductive health are still at an early stage.*
- *From a general health perspective, health threatening behavior, such as obesity, alcohol and drug use, or lack of exercise appear poorly covered for both men and women.*

Key Gaps - 2

- *Similarly, access to care and the quality of care, where there may be significant gender differences, are not widely addressed in the CAS data reviewed.*
- *Violence also stands out as a large area where additional statistical information could have an important role to play.*

In all of these areas, carefully designed surveys would be required to provide needed information.

Examples of Gender indicators

Reproductive Statistics - 1

	2000 (MICS II)	2004 (PAPFAM)
Maternal Mortality Rate	-	86.3
Contraceptive Prevalence Rate	62.6	74.2

Source: CAS, Multiple Indicators Cluster Survey 2000.

States of Arab League CAS and MOSA, Pan Arabic Project for Family Health, 2004.

Boy Preference?

Indicators	2000 (MICS II)		2004 (PAPFAM)	
	Female	Male	Female	Male
Under Five Mortality Rate	30	40	22	14.8
Infant Mortality Rate	24	30	19.2	13.2

source: Arab States League, CAS and MOSA, Pan Arabic Project for Family Health, 2004

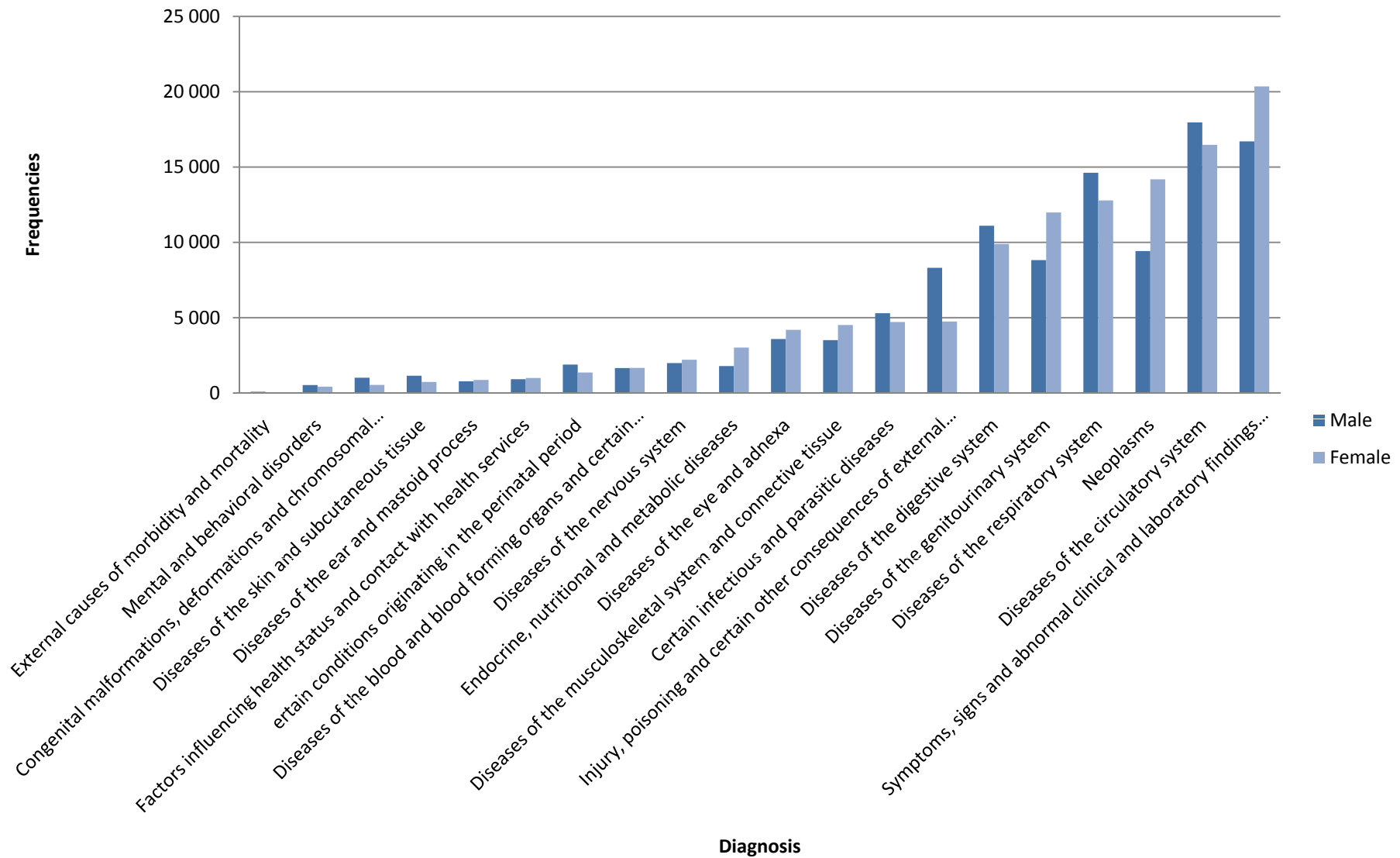
Indicators	Female	Male
Breastfeeding*	25.5	32.5
Supplementary food	47.2	53.4

*Breastfeeding for children under 6 month who breastfed 6 times or within the last 24 hours prior to the survey

Boys more likely to receive care of Diarrhea
Boys more likely to receive antibiotics

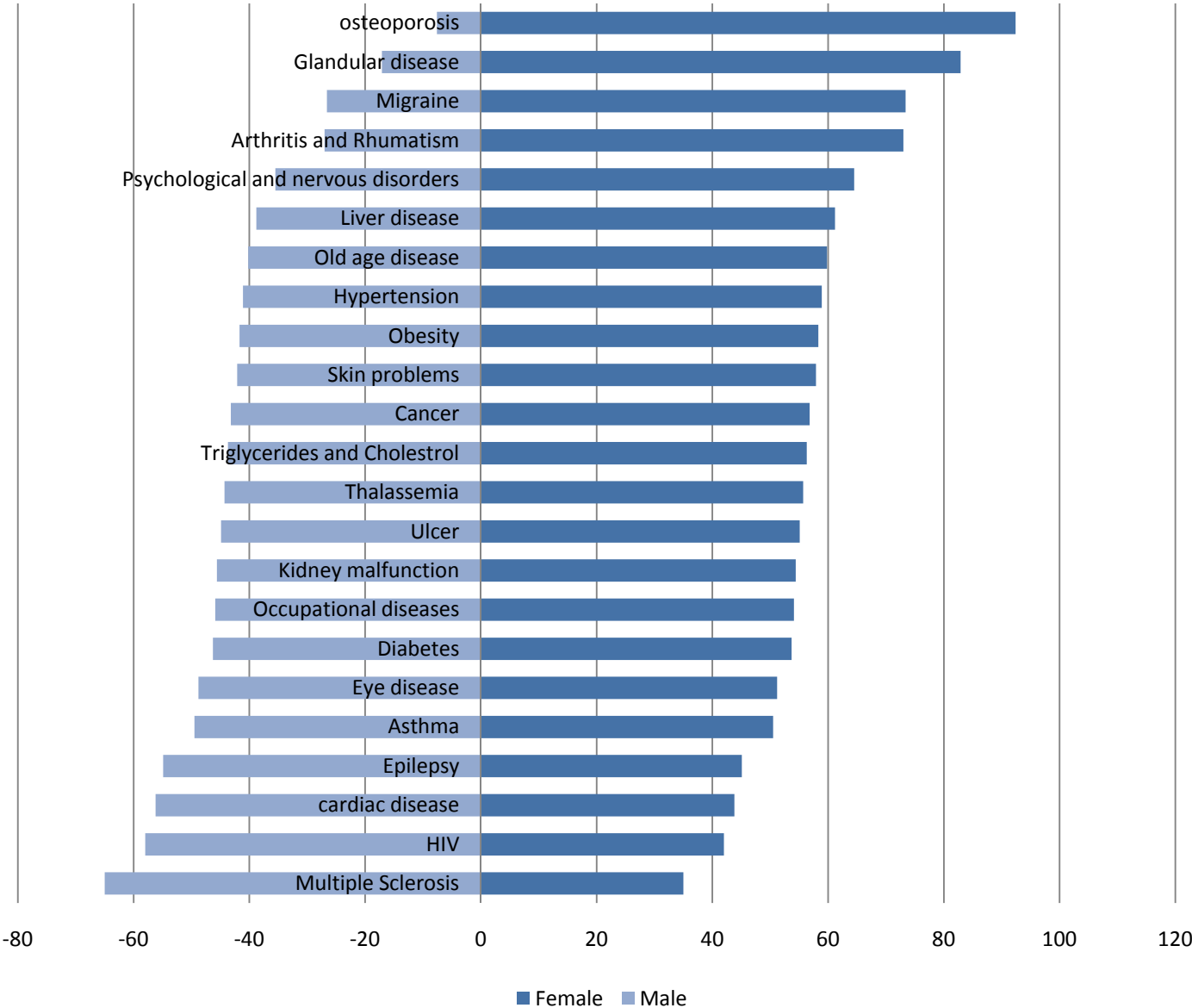
source: Arab States League, CAS and MOSA, Pan Arabic Project for Family Health, 2004

Ministry of Public Health subsidized hospital admissions by category of diagnosis and gender in 2008 (Frequencies)



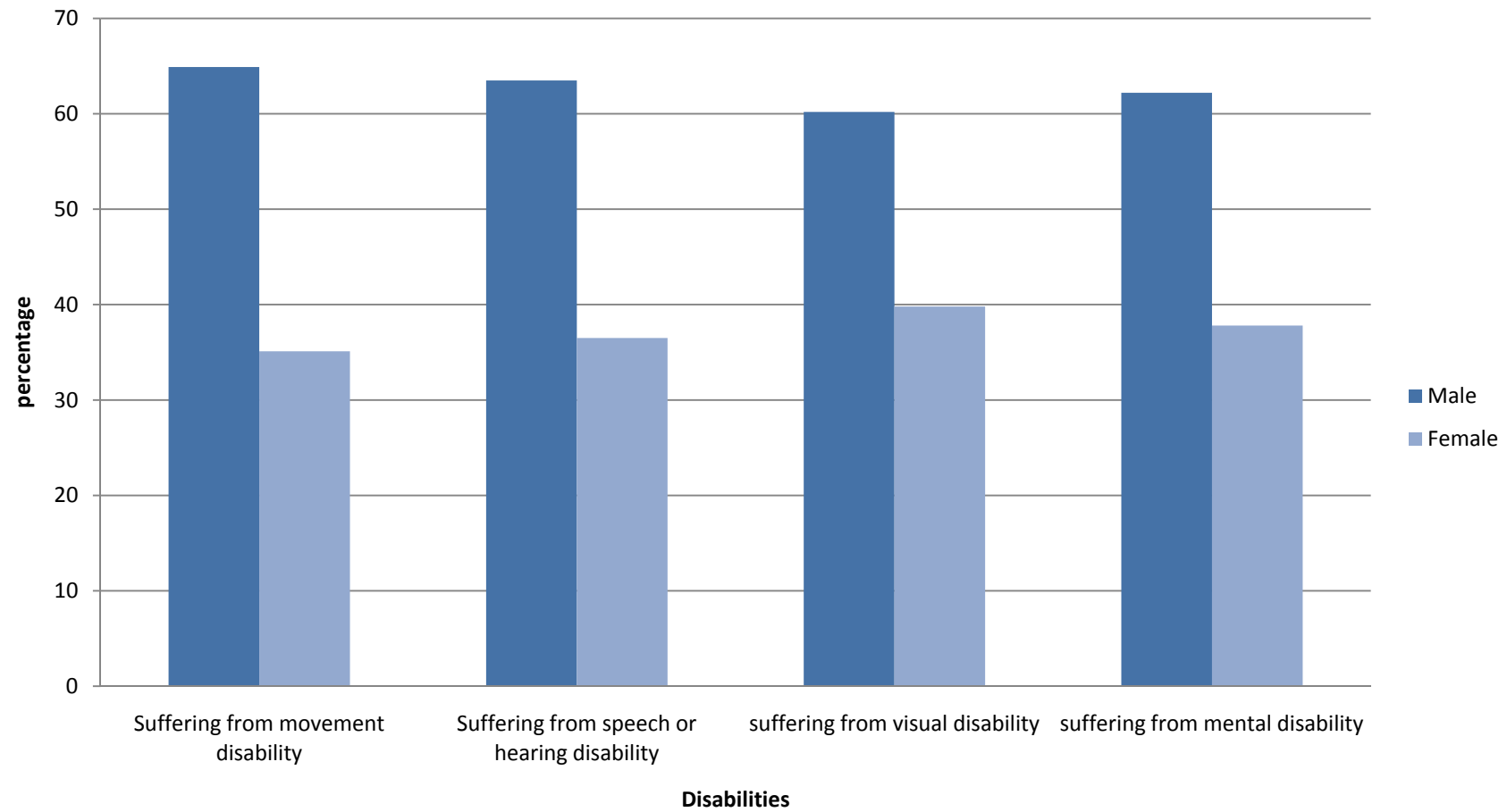
Source; Ministry of Public Health, Statistical Bulletin, 2008

Distribution of Individuals suffering from chronic Disease By Sex



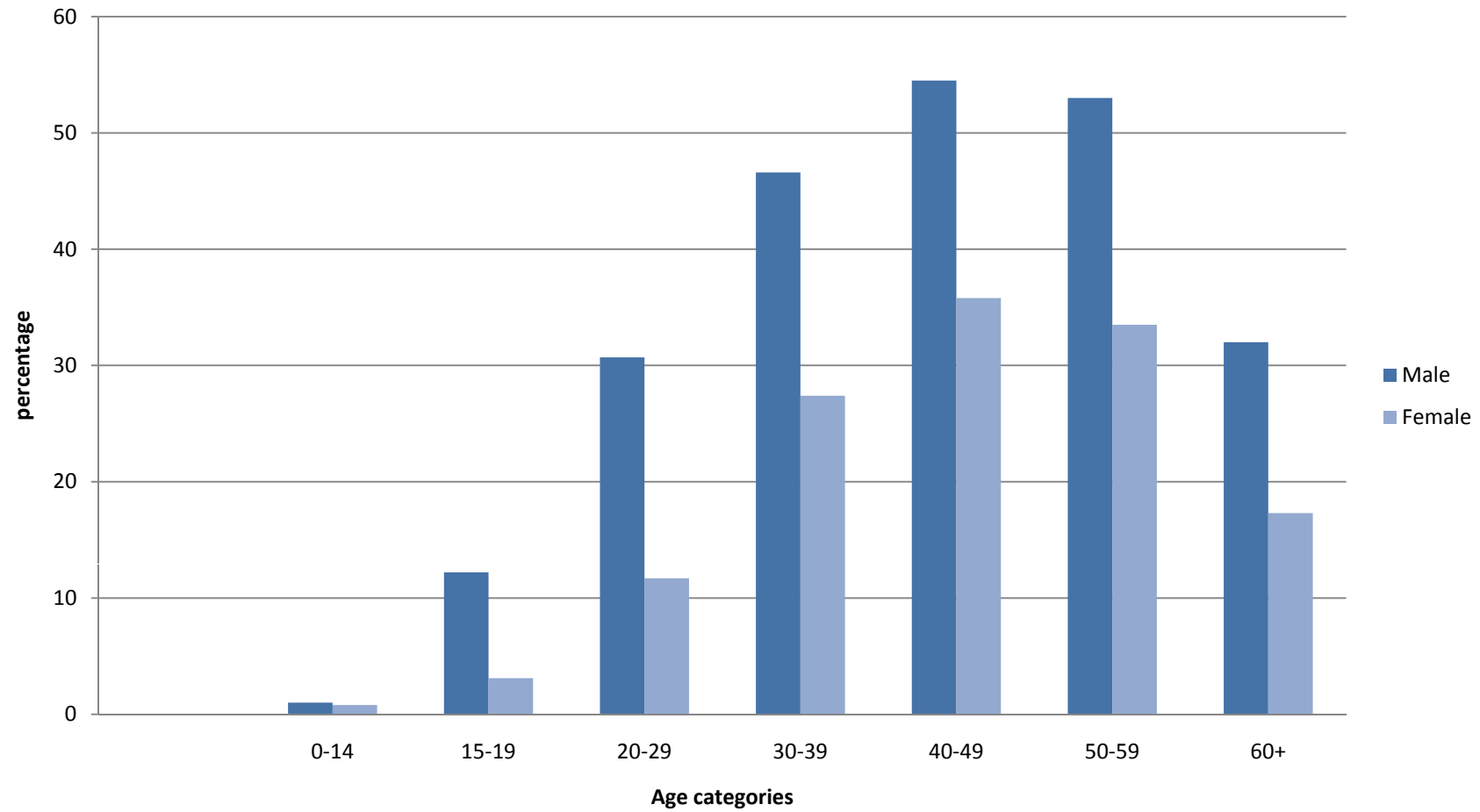
Source: CAS, Living Conditions of Households 2004.

percentage of disabled people according to type of disability and sex



Source, CAS, Living Conditions of Households 2004.

Percentage of Smokers By Sex



source: Arab States League, CAS and MOSA, Pan Arabic Project for Family Health, 2004

conclusion

- *More Gender Indicators can be constructed*
- *Much Remains to be done in general health statistics for both Men and Women.*

Thank you for your attention