

# Nutrition, Physical Activity and Obesity Albania



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This is one of the 53 country profiles covering developments in nutrition, physical activity and obesity in the WHO European Region. The full set of individual profiles and an overview report including methodology and summary can be downloaded from the WHO Regional Office for Europe web site: <http://www.euro.who.int/en/nutrition-country-profiles>.

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## DEMOGRAPHIC DATA

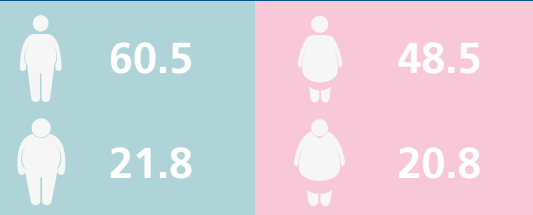
|  |             |
|--|-------------|
| Total population                               | 3 204 000   |
| Median age (years)                             | 30.0        |
| Life expectancy at birth (years) female   male | 80.4   74.2 |
| GDP per capita (US\$)                          | 3667.2      |
| GDP spent on health (%)                        | 6.5         |

## Monitoring and surveillance Overweight and obesity in three age groups

### Adults (20 years and over)

Intercountry comparable overweight and obesity estimates from 2008 (1) show that 54.4% of the adult population ( $\geq 20$  years old) in Albania were overweight and 21.3% were obese. The prevalence of overweight was higher among men (60.5%) than women (48.5%). The proportion of men and women that were obese was 21.8% and 20.8%, respectively. Adulthood obesity prevalence forecasts (2010–2030) predict that in 2020, 6% of men and 3% of women will be obese. By 2030, the model predicts that 5% of men and 1% of women will be obese.<sup>1</sup>

## PREVALENCE OF OVERWEIGHT AND OBESITY (%) AMONG ALBANIAN ADULTS BASED ON WHO 2008 ESTIMATES



Source: WHO Global Health Observatory Data Repository (1).

## PREVALENCE OF OBESITY (%) (BMI $\geq 30.0$ KG/M<sup>2</sup>) AMONG ADULTS IN THE WHO EUROPEAN REGION BASED ON WHO 2008 ESTIMATES



## PREVALENCE OF OVERWEIGHT (%) (BMI $\geq 25.0$ KG/M<sup>2</sup>) AMONG ADULTS IN THE WHO EUROPEAN REGION BASED ON WHO 2008 ESTIMATES

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).

<sup>1</sup> 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.

## Adolescents (10–19 years)

No data are available from the Health Behaviour in School-aged Children (HBSC) survey (2009/2010). However, according to data from the Albania Demographic and Health Survey (DHS) 2008–2009 (2), the prevalence of overweight was higher among boys aged 15–19 years (20.5%) than among girls of the same age (7.9%). The proportion of boys and girls aged 15–19 years that were obese was 1.3% and 1.4%, respectively. These data should be interpreted with caution as WHO criteria for adults were used to define overweight/obesity indicators in adolescents aged 15–19 years.

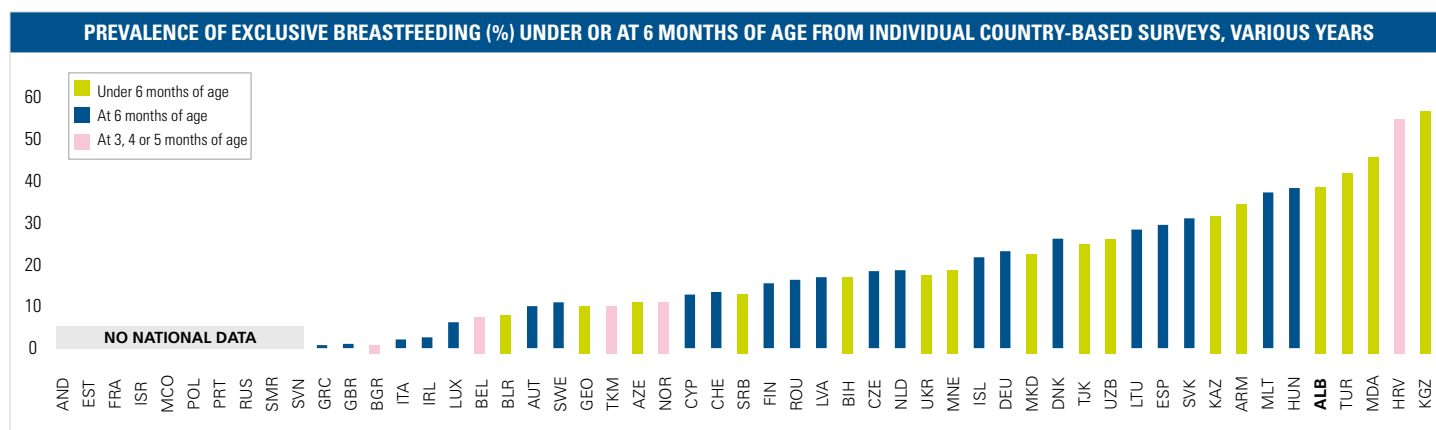
## Children (0–9 years)

No data are available from the WHO European Childhood Obesity Surveillance Initiative (COSI) 2007/2008 round. Albania, however, joined the third COSI data collection round during the school year 2012/2013.



## Exclusive breastfeeding until 6 months of age

The DHS 2008–2009 shows that the prevalence of exclusive breastfeeding under 6 months of age was 38.6% in Albania (2).<sup>2</sup>

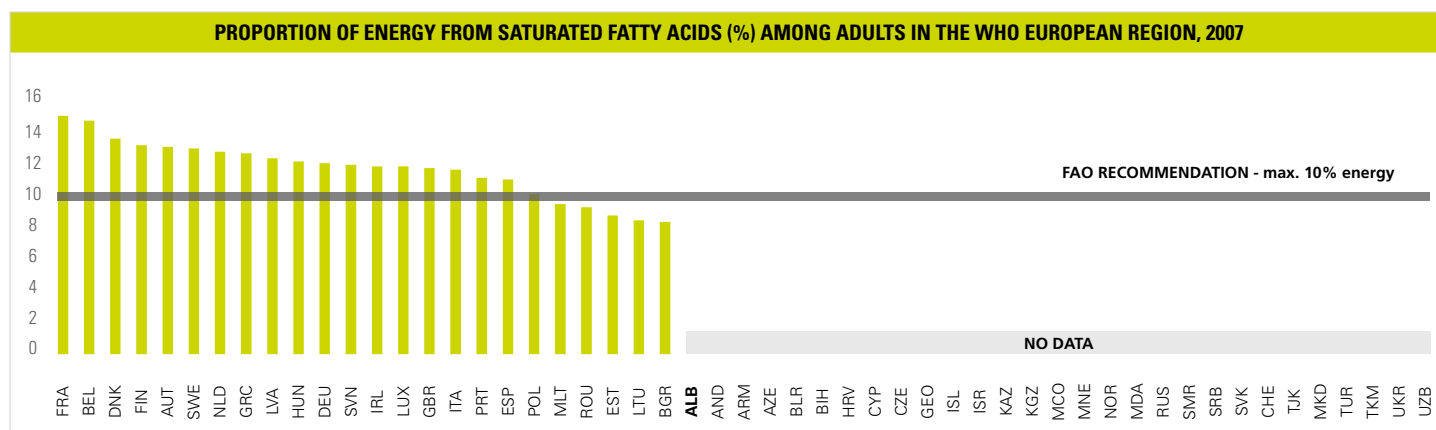


*Notes.* The country codes refer to the ISO 3166-1 Alpha-3 country codes. Data were derived from country-specific publications on surveys carried out in this field, not as part of a European-wide survey. Due to different data collection methods of the country-specific surveys, any comparisons between countries must be made with caution.

*Source:* WHO Regional Office for Europe grey literature from 2012 on breastfeeding.

## Saturated fat intake

No data are available.



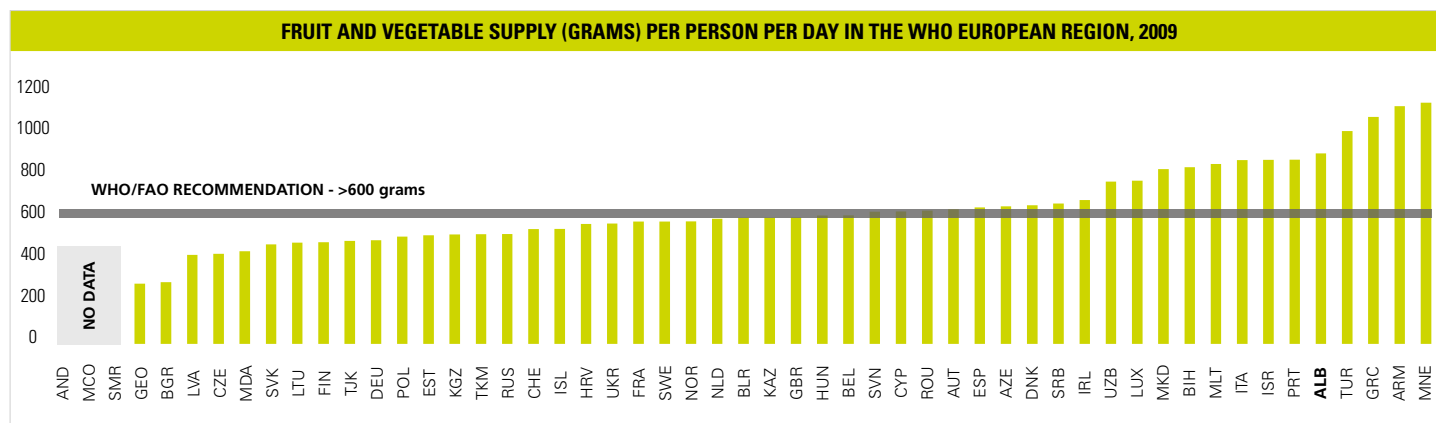
*Notes.* The country codes refer to the ISO 3166-1 Alpha-3 country codes. Ranking of data was carried out so that country data at the right-hand side of the graph – with values below the FAO recommendation – fall within the positive frame of the indicator. FAO: Food and Agriculture Organization of the United Nations.

*Source:* FAOSTAT (3).

<sup>2</sup> See also WHO Regional Office for Europe grey literature from 2012 on breastfeeding.

## Fruit and vegetable supply

Albania had a fruit and vegetable supply of 886 grams per capita per day, according to 2009 estimates (3).

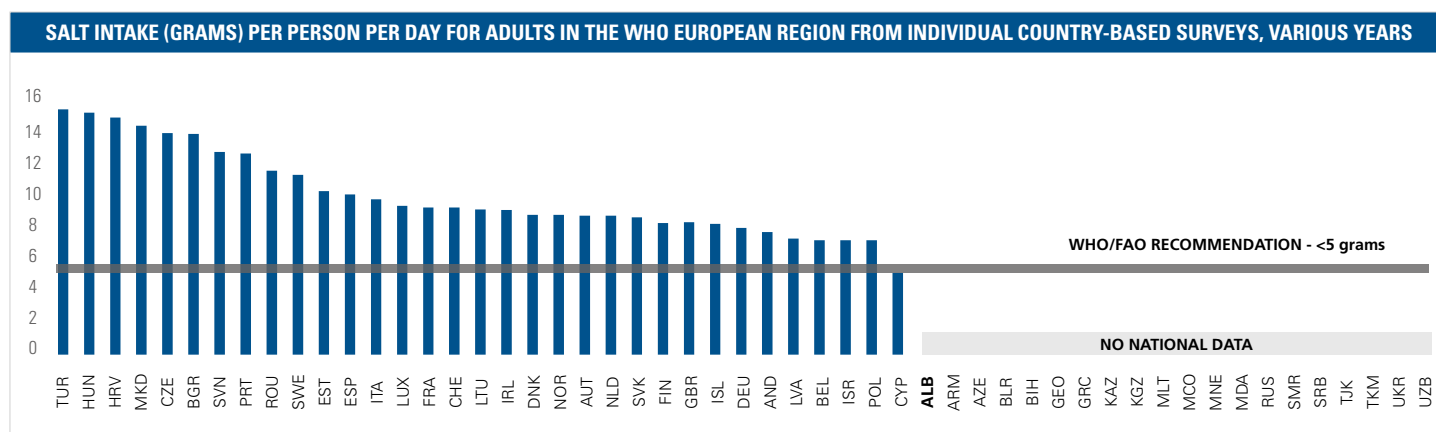


Notes. The country codes refer to the ISO 3166-1 Alpha-3 country codes. Ranking of data was carried out so that country data at the right-hand side of the graph – with values above the WHO/FAO recommendation – fall within the positive frame of the indicator.

Source: FAOSTAT (3).

## Salt intake

No data are available.



Notes. The country codes refer to the ISO 3166-1 Alpha-3 country codes. Data were derived from country-specific publications on surveys carried out in this field, not as part of a European-wide survey. Due to different data collection methods of the country-specific surveys, any comparisons between countries must be made with caution. Ranking of data was carried out so that country data at the right-hand side of the graph – with values below the WHO/FAO recommendation – fall within the positive frame of the indicator.

Source: WHO Regional Office for Europe (4).

## 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 57.1% (5, 6).

## Physical inactivity

No data are available for the adult population.

## Policies and actions

The table below displays (a) monitoring and evaluation methods of salt intake in Albania; (b) the stakeholder approach toward salt reduction; and (c) the population approach in terms of labelling and consumer awareness initiatives (4).

### Salt reduction initiatives

| Monitoring & evaluation         |  | Stakeholder approach |                    |                        | Population approach |                                |          |                   |                        |            |           |
|---------------------------------|--|----------------------|--------------------|------------------------|---------------------|--------------------------------|----------|-------------------|------------------------|------------|-----------|
|                                 |  |                      |                    |                        | Labelling           | Consumer awareness initiatives |          |                   |                        |            |           |
| Industry self-reporting         |  | Industry involvement | Food reformulation | Specific food category |                     | Brochure Print                 | TV Radio | Web site Software | Education              | Conference | Reporting |
| Salt content in food            |  |                      |                    |                        |                     |                                |          |                   | Schools                |            |           |
| Salt intake                     |  |                      |                    |                        |                     |                                |          |                   | Health care facilities |            |           |
| Consumer awareness              |  |                      |                    |                        |                     |                                |          |                   |                        |            |           |
| Behavioural change              |  |                      |                    |                        |                     |                                |          |                   |                        |            |           |
| Urinary salt excretion (24 hrs) |  |                      |                    |                        |                     |                                |          |                   |                        |            |           |

Source: WHO Regional Office for Europe (4).

## Trans fatty acids (TFA) policies

| Legislation | Type of legislation | Measure |
|-------------|---------------------|---------|
|             |                     |         |

Source: WHO Regional Office for Europe grey literature from 2012 on TFA and health, TFA policy and food industry approaches.

## Price policies (food taxation and subsidies)

| Taxes | School fruit schemes |
|-------|----------------------|
|       |                      |

Source: WHO Regional Office for Europe grey literature from 2012 on diet and the use of fiscal policy in the control and prevention of noncommunicable diseases.

## Marketing of food and non-alcoholic beverages to children (7)

No action has yet been taken regarding a reduction in the marketing of food and beverages to children. However, within the framework of bilateral collaboration between the Ministry of Health and the WHO Regional Office for Europe, it has been agreed that a policy on marketing of foods high in fat, sugar or salt to children will be developed during the biennium 2012–2013.

## Physical activity (PA), national policy documents and action plans

| Sport   | Target groups  | Health  | Education   |  | Transportation  |  |
|---|--|---|---|--|---|--|
| Existence of national "sport for all" policy and/or national "sport for all" implementation programme | Existence of specific scheme or programme for community interventions to promote PA in the elderly | Counselling on PA as part of primary health care activities | Mandatory physical education in primary and secondary schools | Inclusion of PA in general teaching training | National or subnational schemes promoting active travel to school | Existence of an incentive scheme for companies or employees to promote active travel to work |
| ✓ <sup>a</sup>  |  |   | ✓ <sup>a</sup>  |  |   |  |

<sup>a</sup> Clearly stated in a policy document, entirely implemented and enforced.

Source: country reporting template on Albania 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)

| Existence of national coordination mechanism on HEPA promotion | Leading institution | Participating bodies |
|--|---------------------|----------------------|
|  |                     |                      |

Source: country reporting template on Albania 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

| Existence of national recommendation on HEPA | Target groups addressed by national HEPA policy | PA included in the national health monitoring system |
|--|---|--|
|  |   |  |

Source: country reporting template on Albania 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

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