

OVERVIEW OF THE STATE OF HEALTH OF CHILDREN IN BELGIUM

DATA ON CHILDREN'S HEALTH REMAINS LIMITED IN BELGIUM

IN 2023, LESS THAN HALF OF CHILDREN AGED 3 TO 17 IN BELGIUM RECEIVED PREVENTIVE DENTAL CARE

Between 2013 and 2023, the **percentage of preventive dental care increased** by approximately 10 % across all age groups in Belgium

Younger children aged 3–4 had the **lowest coverage**, with only 16 % receiving preventive dental care, compared with approximately 50 % of children aged 5–17

Children in the **Flemish Region received more preventive dental care** than those in the Walloon and Brussels-Capital Regions

Source: Intermutualistic Agency (IMA)

VACCINATION COVERAGE FOR CHILDREN IS HIGH (>90%) THROUGHOUT BELGIUM

Disease **outbreaks** still occur due to **immunisation gaps** in the population

Vaccination coverage for children under 2 in the basic vaccination program is **similar across all** Belgian r**egions**

Vaccination coverage for children under 2 years in Belgium is high and **stable** over time

Immunity gaps exist for older children and adolescents, especially in Brussels and Wallonia

WHO **vaccination coverage targets** for adolescents for mumps, measles, rubella, and human papillomavirus are **not** being **met**

Source: Sciensano, Épidémiologie des maladies infectieuses

BETWEEN 2015 AND 2024, THE OVERALL PERCENTAGE OF CHILDREN AT RISK FOR POVERTY OR SOCIAL EXCLUSION HAS TENDED TO DECREASE

1 in 5 children under 17 in Belgium **are at risk of poverty or social exclusion** in 2024

Adolescents (aged 12–17) **were more likely to be at risk of poverty or social exclusion** than younger children (aged 0–11)

Children whose **parents** have **lower levels of education** are **more likely** to be at **risk of poverty or social exclusion**

Source: Statbel

IN 2022-2023, ONLY 5 OUT OF 10 CHILDREN AND 3 OUT OF 10 ADOLESCENTS MET THE WHO PHYSICAL ACTIVITY RECOMMENDATIONS

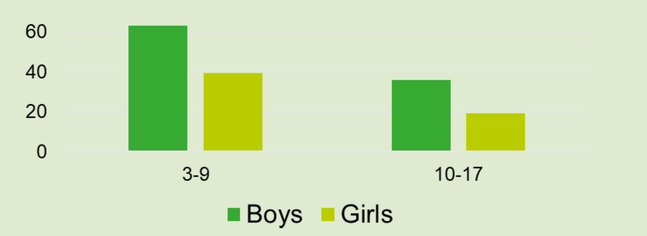
A **higher percentage of boys** than girls aged 3–17 met these recommendations

The percentage was **higher** in the **Flemish Region** than in the Walloon Region for children aged 3–9

From 2014–2015 to 2022–2023, meeting physical activity guidelines **increased** in **children** (3–9) but **remained stable** in **adolescents** (10–17) in Belgium

Children and adolescents (3–17) from **low-educated families** were **less likely** to meet WHO physical activity guidelines than those from medium- or high-educated families

Percentage of children meeting the WHO physical activity recommendations, by age and sex, 2022-2023, Belgium



Source: Sciensano, National Food Consumption Survey

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MORE THAN 3 IN 10 CHILDREN EXCEED THE SCREEN TIME RECOMMENDATIONS ON WEEKDAYS, RISING TO 8 IN 10 FOR ADOLESCENTS

3-4 years

43 % exceeded one hour per weekday

5-9 years

28 % exceeded two hours per weekday

10-17 years

81 % exceeded two hours per weekday

Exceeding recommended screen time was **less common** among children and adolescents whose parents **had higher educational levels**

From 2014–2015 to 2022–2023, **weekday screen time above recommendations remained stable** in children (3–9) but increased in adolescents (10–17)

Boys aged 5–17 were **more likely** than girls to go **beyond recommended** screen time **limits**

Source: Sciensano, National Food Consumption Survey

IN 2022-2023, ADOLESCENTS WERE LESS LIKELY TO EAT BREAKFAST DAILY THAN CHILDREN

1,4% of children aged 3–9 never ate breakfast

4,4% of adolescents aged 10-17 never ate breakfast

Among children aged 3–9, daily breakfast was **more common** in the **Flemish Region** than in the Brussels Capital Region

Daily breakfast consumption **remained stable** between 2014–2015 and 2022–2023

Daily breakfast consumption was **lower** among children and adolescents with **low parental education** (64%) than with mid (71%) or high (74%) parental education

Source: Sciensano, National Food Consumption Survey

MORE THAN ONE IN FIVE CHILDREN AND ADOLESCENTS NEVER HELP WITH MEAL PREPARATION IN 2022-2023

24 %

children and adolescents never helped with meal preparation

No regional differences were observed

17 % 31 %

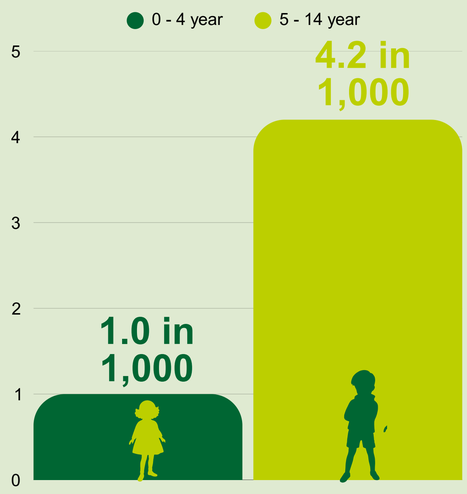
Boys were **more likely** than **girls** to **never help with meal preparation**

Children and adolescents from **low-educated families** were **less involved** in meal preparation

Source: Sciensano, National Food Consumption Survey

IN BELGIUM, FEWER THAN 2 PER 1,000 CHILDREN HAVE DIABETES IN 2022

Diabetes was **more common** in **children aged 5–14** than in those aged 0–4



Within the 5-14 age group, **girls** were **diagnosed more frequently** than boys

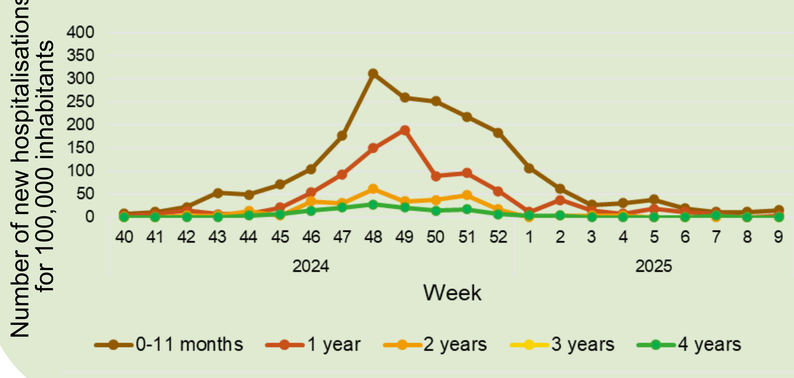
Between 2012 and 2022, diabetes cases among children aged 0-14 **remained stable**

Source:Belgian National Burden of Disease Study based on Intermutualistic Agency (IMA)

CHILDREN AGED 0 TO 4 YEARS CONSTITUTE THE AGE GROUP MOST EXPOSED TO ACUTE RESPIRATORY INFECTIONS

During the 2024–2025 season, **influenza-like illness** GP consultations were **highest** in **children aged 0–4**

The **RSV vaccine** effectively **reduced hospitalizations**, which were highest among children under 1 year of age.



Source: Sciensano, network of sentinel general practitioner and network of sentinel hospitals

BETWEEN 2018 AND 2022, THE AGE-STANDARDIZED MORTALITY RATE WAS 10.3 PER 100,000 BOYS AND 9.3 PER 100,000 GIRLS

Leading causes of children mortality (1-14 aged)

Ill-defined causes

Non-transport accidents

Central nervous system cancer

Congenital anomalies

Transport accidents

Non-transport accidents for **boys** and **central nervous system cancers** for **girls** were the leading causes of death

Child mortality has been **declining** between 2003 and 2022

Source: Statbel

READ MORE https://www.healthybelgium.be/en/health-status/children-health