

Overview

Burden classification

The Global Nutrition Report classifies this country as experiencing two forms of malnutrition – anaemia and stunting

Sources: UNICEF/WHO/World Bank Group: Joint child malnutrition estimates, NCD Risk Factor Collaboration, WHO Global Health Observatory.

Notes: Thresholds for a country having the form or not: stunting in children aged under 5 years \geq 20%; anaemia in women of reproductive age \geq 20%; overweight (body mass index \geq 25) in adult women aged \geq 18 years \geq 35%.

Progress against global nutrition targets 2018



Under-5 stunting Some progress



Under-5 wasting Some progress



Under-5 overweight On course



WRA anaemia

No progress or worsening



Exclusive breastfeeding No progress or worsening



Adult female obesity No progress or worsening



Adult male obesity No progress or worsening



Adult female diabetes No progress or worsening



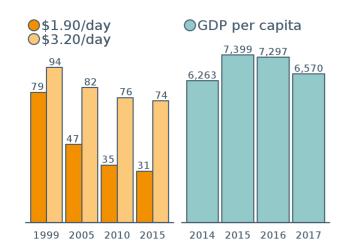
Adult male diabetes

No progress or worsening

Sources: UNICEF/WHO/World Bank Group: Joint child malnutrition estimates, UNICEF global databases: Infant and Young Child Feeding, NCD Risk Factor Collaboration, WHO Global Health Observatory. Notes: The methodologies for tracking differ between targets. Data on the adult indicators are based on modelled estimates. See Appendix 1 of the 2018 Global Nutrition Report for details of the methods and sources used to assess progress towards global nutrition targets.

Economics and demography

Poverty rates (%) and GDP (PPP\$)



Source: World Bank 2018.

Note: GDP = gross domestic product. PPP = purchasing power

Under-5 mortality (per 000 live births)



Source: UN Inter-agency Group for Child Mortality Estimation 2018.

rank)²

Income inequality

Gini index score ¹	Gini index rank ²	Year
29	18	2014

Source: World Bank 2018.

Notes: 0 = perfect equality, 100 = perfect inequality. Countries are ranked from most equal (1) to most unequal (155).

Population

9

NA

NA

1.3

0.01

2010

NA

NA

0.08 2011

2015

2004

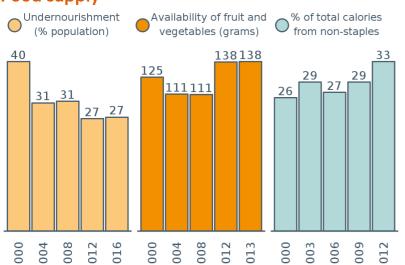
Population (000)	1,296	2017
Under-5 population (000)	210	2018
Rural (%)	70	2017
≥65 years (000)	48	2018

Source: UN Population Division 2017.

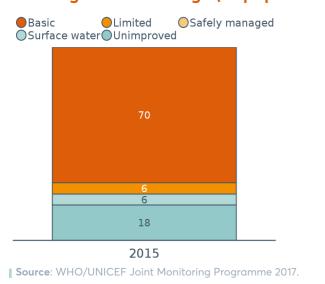
Underlying determinants

Food supply

| Source: FAOSTAT 2018.

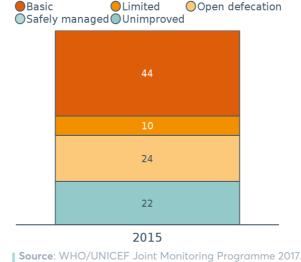


Drinking water coverage (% population)



Sanitation coverage (% population)

Community health workers



supplemented by country data.

Gender-related determinants

Early childbearing: births by age 18

Gender Inequality Index (score*)²

Gender Inequality Index (country

Population density of health workers

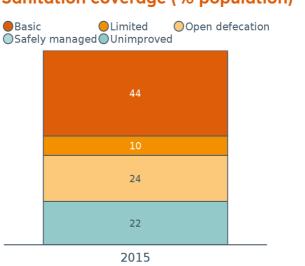
Source: WHO's Global Health Workforce Statistics, OECD,

Sources: UNICEF 2018; UNDP 2018.² Note: *0 = low inequality, 1 = high inequality.

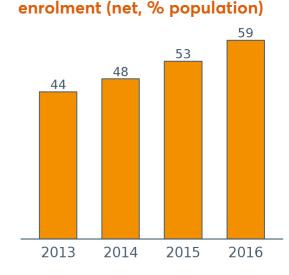
per 1,000 people

Nurses and midwives

Physicians

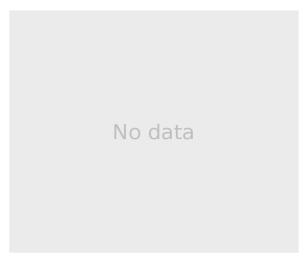


Female secondary education



| Source: UNESCO Institute for Statistics 2018.

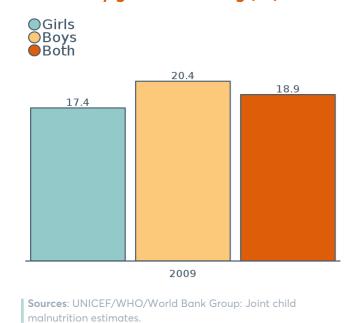
Government expenditures (% total)



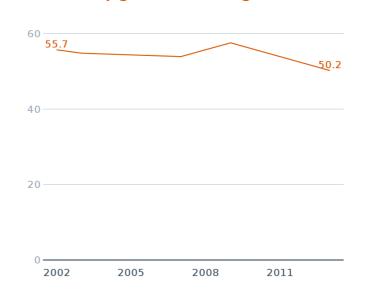
Source: IFPRI 2015.

Children (under 5) nutrition status

Under 5 by gender: wasting (%)



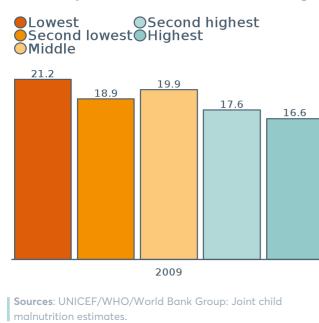
Under 5 by gender: stunting (%)



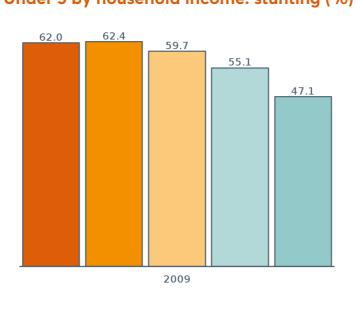
Under 5 by gender: overweight (%)



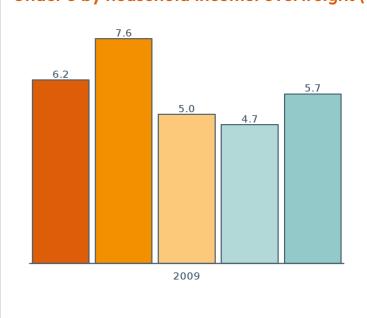
Under 5 by household income: wasting (%)

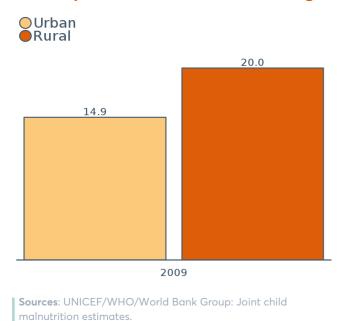


Under 5 by household income: stunting (%)

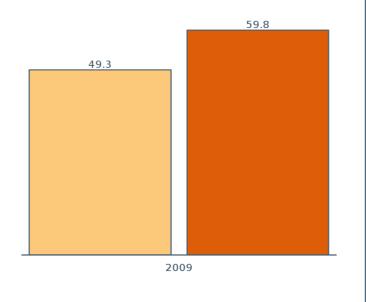


Under 5 by household income: overweight (%)

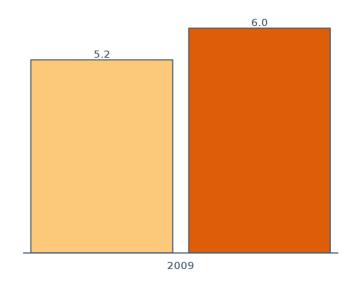




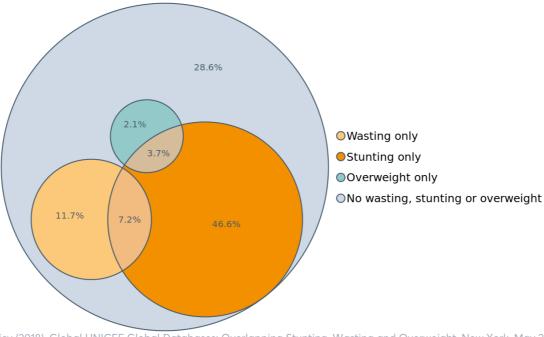
Under 5 by household location: wasting (%) | Under 5 by household location: stunting (%)



Under 5 by household location: overweight (%)

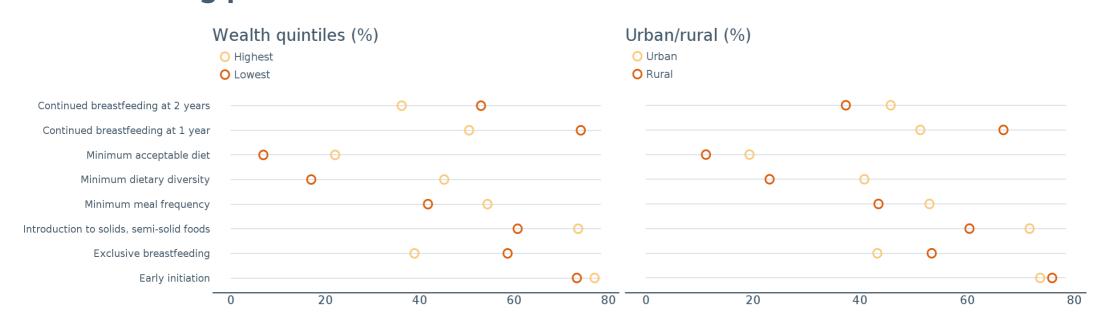


Under-5 coexistence of wasting, stunting and overweight



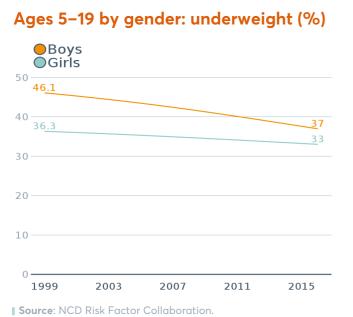
Sources: UNICEF, Division of Data Research and Policy (2018), Global UNICEF Global Databases: Overlapping Stunting, Wasting and Overweight, New York, May 2018.

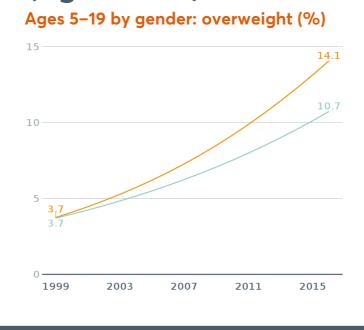
Child feeding practices

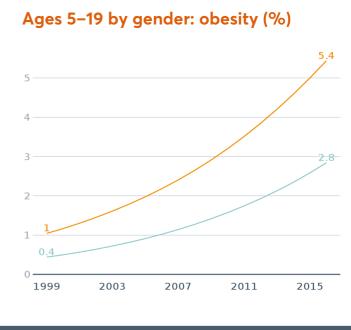


■ Sources: UNICEF, Division of Data Research and Policy (2018), Global UNICEF Global Databases: Infant and Young Child Feeding, New York, May 2018.

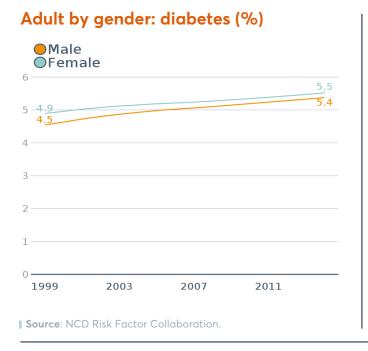
Children and adolescent (aged 5-19) nutrition status

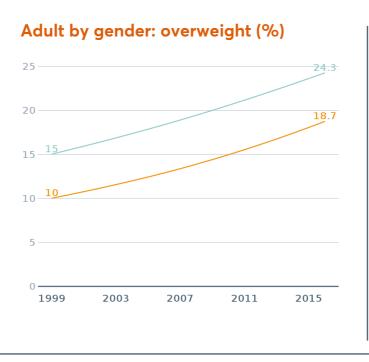


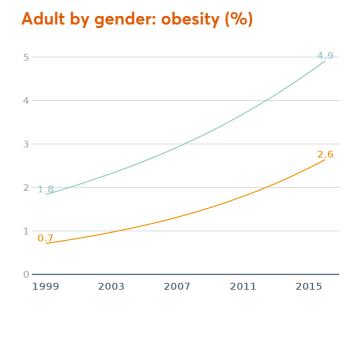


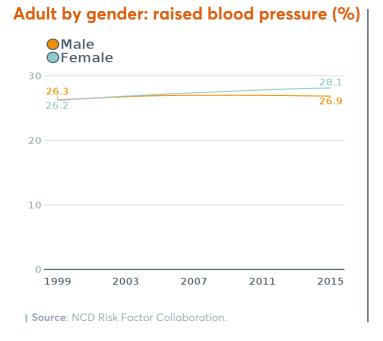


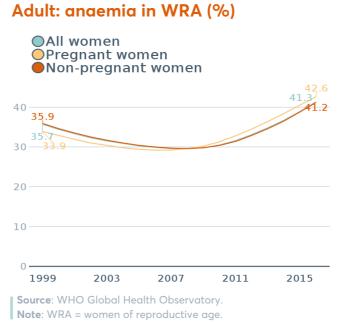
Adult nutrition status

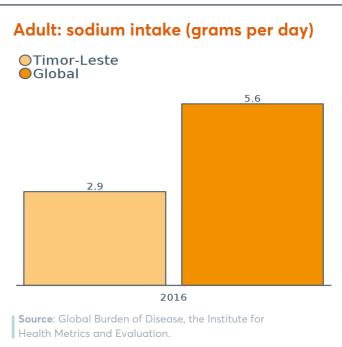






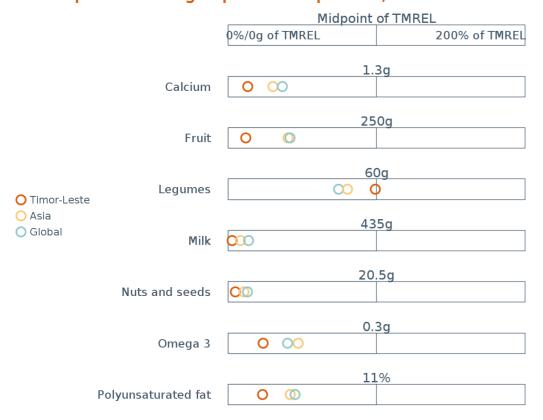


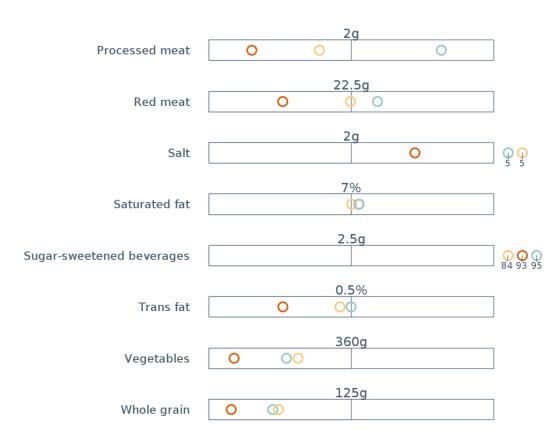




Dietary needs

Consumption of food groups and components, 2016



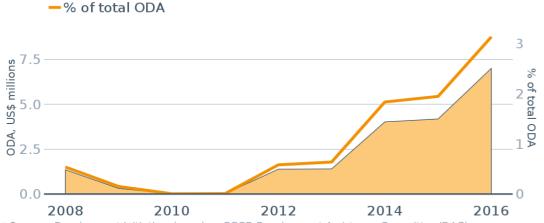


Source: Global Burden of Disease, the Institute for Health Metrics and Evaluation. Notes: Men and women aged 25 and older. TMREL = theoretical minimum risk exposure level.

Financial resources and policy, legislation and institutional arrangements

Development assistance Basic nutrition ODA received





Sources: Development Initiatives based on OECD Development Assistance Committee (DAC) Creditor Reporting System (CRS).

Notes: ODA = official development assistance. Amounts based on gross ODA disbursements, constant 2016 prices. Figure includes ODA grants and loans, but excludes other official flows and private grants.

National policies

Mandatory legislation for salt iodisation	No
Sugar-sweetened beverage tax	No
Food-based dietary guidelines	NA
Multisectoral comprehensive nutrition plan	Yes

Sources: Global Fortification Data Exchange 2018; Sugar-sweetened data prepared using data from the NOURISHING database, academic references and market reports; FAO 2018; WHO Global database on the Implementation of Nutrition Action (GINA), 2nd Global Nutrition Policy Review.

Targets included in national (nutrition or other) plan

Stunting	Anaemia	Low birth weight	Child overweight	Exclusive breastfeeding	Wasting	ting Salt intake Overweight adu	
Yes	Yes	Yes	No	Yes	Yes	Yes	No

Intervention coverage

Coverage/practice indicator		Male (%)	Female (%)	Year
Children 0–59 months with diarrhoea who received zinc treatment	50	NA	NA	2016
Children 6–59 months who received vitamin A supplements in last 6 months	64	64	65	2016
Children 6–59 months given iron supplements in past 7 days	34	33	34	2016
Women with a birth in last five years who received iron and folic acid during their most recent pregnancy	85		85	2016
Household consumption of any iodised salt	84	NA	NA	2016

Sources: Kothari M. and Huestis A., based on 2016 Global Nutrition Report and UNICEF global databases, 2018. Notes: Data is compiled using STATcompiler and taken from country Demographic and Health Surveys for 2005–2017.