

Overview

Burden classification

There is insufficient data for the Global Nutrition Report to classify this country's burden

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



Under-5 wasting



Under-5 overweight



WRA anaemia

No progress or worsening



Exclusive breastfeeding

NA



Adult female obesity
No progress or worsening



Adult male obesity

No progress or worsening



Adult female diabetes
No progress or worsening



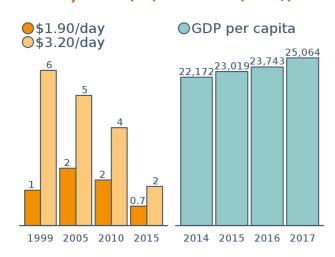
Adult male diabetes

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.

Income inequality

| Gini index score ¹ | Gini index rank ² | Year |
|-------------------------------|------------------------------|------|
| 34 | 55 | 2015 |

Source: World Bank 2018.

Notes: 0 = perfect equality, 100 = perfect inequality. Countries are ranked from most equal (1) to most unequal (155). 2

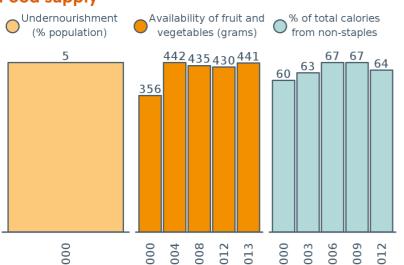
Population

| Population (000) | 1,950 | 2017 |
|--------------------------|-------|------|
| Under-5 population (000) | 94 | 2018 |
| Rural (%) | 32 | 2017 |
| >65 years (000) | 386 | 2018 |

Source: UN Population Division 2017.

Underlying determinants

Food supply



Source: FAOSTAT 2018.

Gender-related determinants

| Early childbearing: births by age 18 (%) ¹ | NA | NA |
|---|-----|------|
| Gender Inequality Index (score*) ² | 0.2 | 2017 |
| Gender Inequality Index (country | 42 | 2017 |

Sources: UNICEF 2018; UNDP 2018. 2

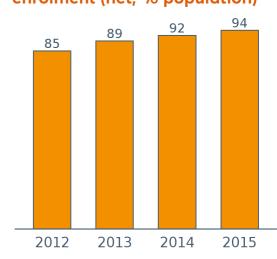
Note: *0 = low inequality, 1 = high inequality.

Population density of health workers per 1,000 people

| Physicians | 3.21 | 2015 |
|--------------------------|------|------|
| Nurses and midwives | 4.9 | 2015 |
| Community health workers | NA | NA |

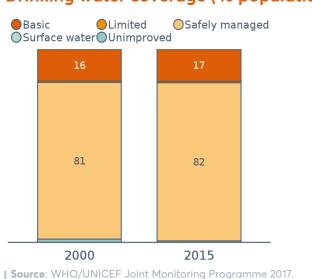
Source: WHO's Global Health Workforce Statistics, OECD, supplemented by country data.

Female secondary education enrolment (net, % population)



Source: UNESCO Institute for Statistics 2018.

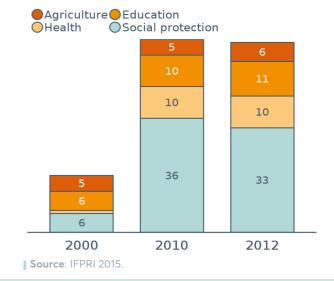
Drinking water coverage (% population)

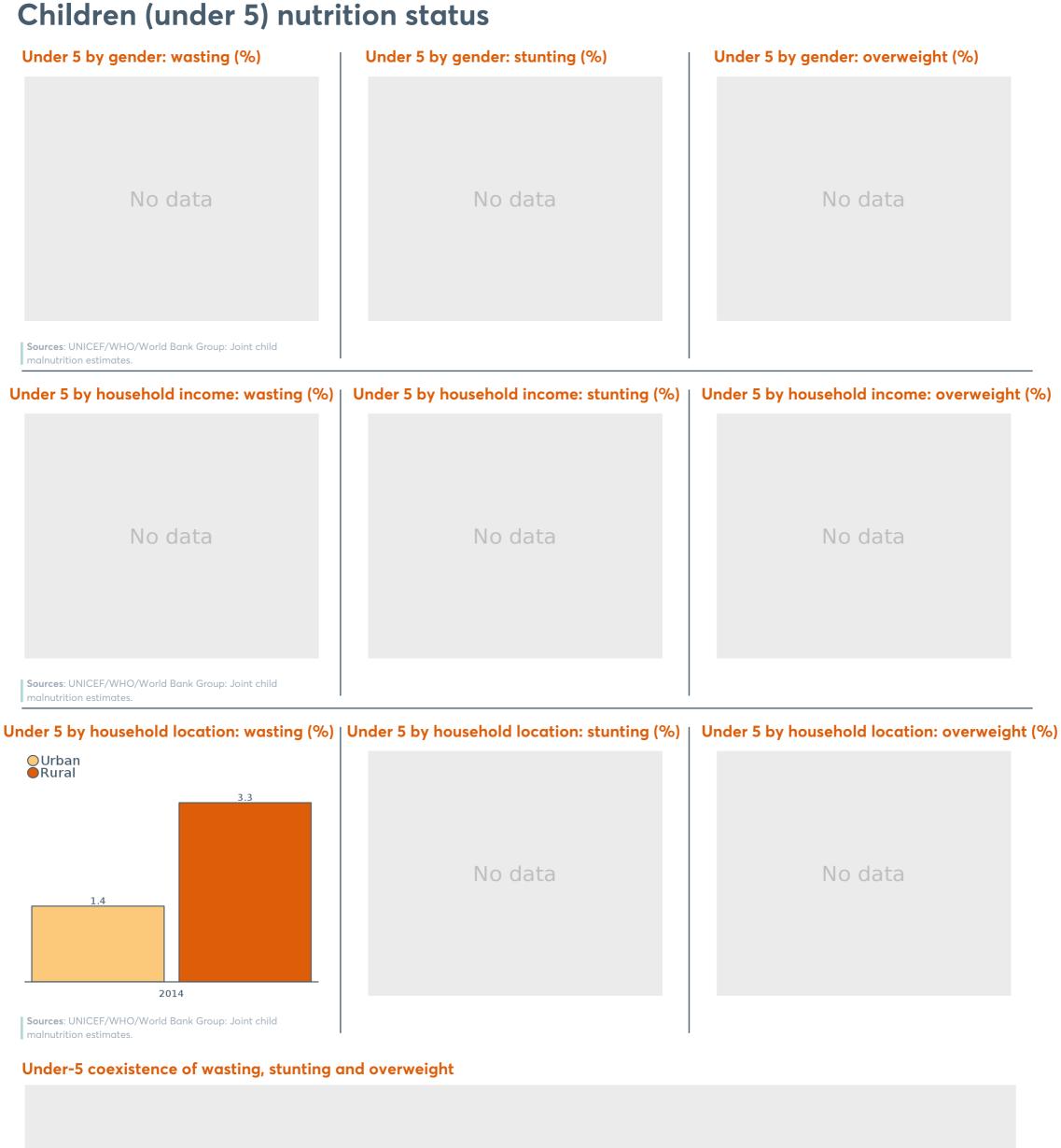


Sanitation coverage (% population)



Government expenditures (% total)





No data

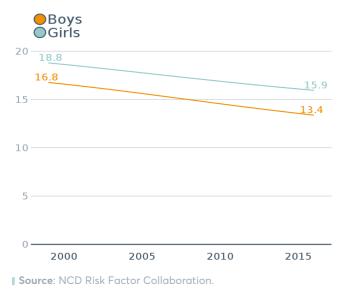
Child feeding practices

No data

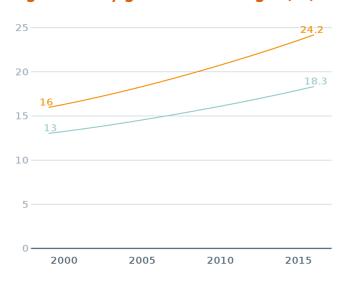
Sources: UNICEF, Division of Data Research and Policy (2018), Global UNICEF Global Databases: Infant and Young Child Feeding, New York, May 2018.

Children and adolescent (aged 5-19) nutrition status

Ages 5-19 by gender: underweight (%)



Ages 5-19 by gender: overweight (%)

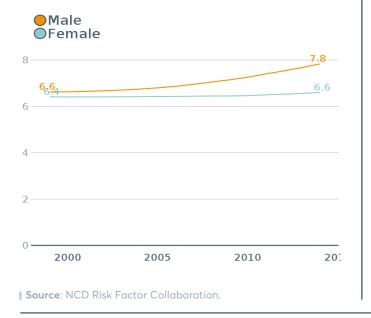


Ages 5-19 by gender: obesity (%)

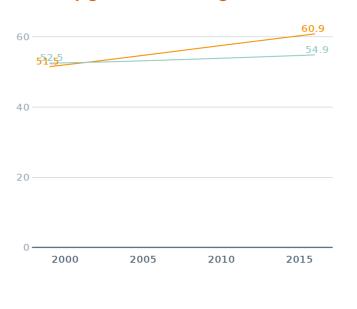


Adult nutrition status

Adult by gender: diabetes (%)



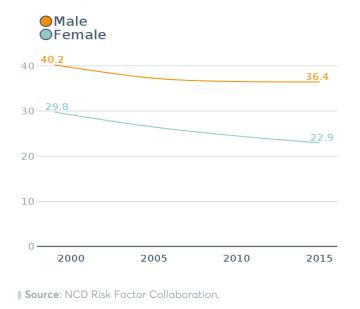
Adult by gender: overweight (%)



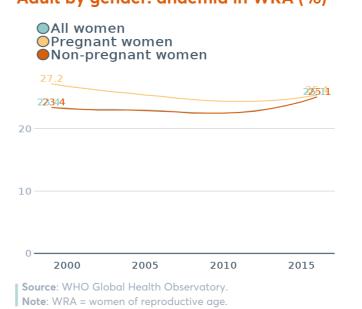
Adult by gender: obesity (%)



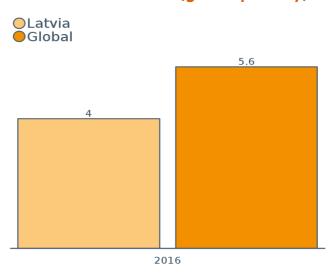
Adult by gender: raised blood pressure (%) |



Adult by gender: anaemia in WRA (%)

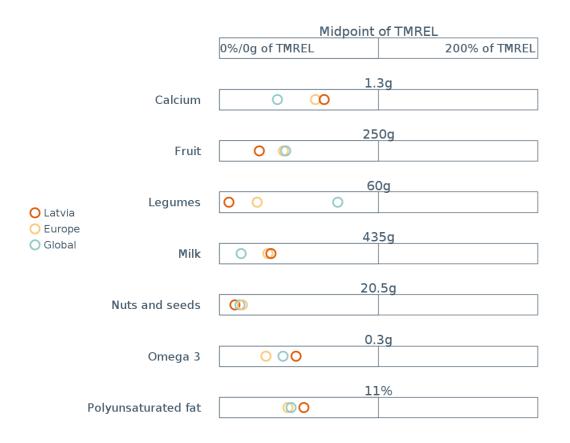


Adult: sodium intake (grams per day)



Source: Global Burden of Disease, the Institute for Health Metrics and Evaluation.

Dietary needs





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

No data

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 | Yes |
| Food-based dietary guidelines | Yes |
| Multisectoral comprehensive nutrition plan | No |

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 | Salt intake | Overweight adults and adolescents |
|----------|---------|------------------|------------------|----------------------------|---------|-------------|-----------------------------------|
| No | No | No | Yes | Yes | No | No | Yes |

Intervention coverage

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

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.