Caribbean

Subregional overview

Malnutrition burden

In the Caribbean subregion, there has been some progress towards achieving global nutrition targets. The global target for under-five wasting has three countries on course to meet it, while under-five overweight has one country on course. However, not a single country in the subregion is on course to meet the targets for under-five stunting, infant exclusive breastfeeding, anaemia in women of reproductive age, low birth weight, male diabetes, female diabetes, male obesity, and female obesity. 13 countries in the subregion have insufficient data to comprehensively assess their progress towards these global targets.

Although it performs relatively well against other subregions, Caribbean still experiences a malnutrition burden among its under-five population. The average prevalence of overweight in under-fives is 7%, this is greater than the global average of 5.9%. Conversely, the Caribbean subregion's prevalence of stunting in under-fives of 8.3% is significantly less than the global average of 21.9%. The prevalence of wasting in under-fives is 3%.

Some 26% of infants under 6 months in the Caribbean subregion are exclusively breastfed, while the subregion's average low birth weight prevalence of 9.9% is less than the global average of 14.6%.

The Caribbean subregion's adult population also face a malnutrition burden. An average of 32% of women of reproductive age have anaemia, and 10.5% of adult women have diabetes, compared to 8.4% of men. Meanwhile, 30.5% of women and 18.6% of men have obesity.

Sources: UNICEF global databases Infant and Young Child Feeding, UNICEF/WHO/World Bank Group: Joint child malnutrition estimates, UNICEF/WHO Low birthweight estimates, NCD Risk Factor Collaboration, WHO Global Health Observatory.

Notes: Data on the adult indicators are based on modelled estimates.

Progress against global nutrition targets 2019



Under-five stunting

0 On course2 Off course

11 No data



Under-five wasting

3 On course

0 Off course

10 No data



Under-five overweight

1 On course

1 Off course

11 No data



Low birthweight

0 On course

6 Off course

7 No data



Exclusive breastfeeding

0 On course

3 Off course

10 No data



Adult female obesity

0 On course

12 Off course

1 No data



Adult male obesity

0 On course

12 Off course

1 No data



Adult female diabetes

0 On course

13 Off course

0 No data



Adult male diabetes

0 On course

13 Off course

0 No data



WRA anaemia

0 On course

12 Off course

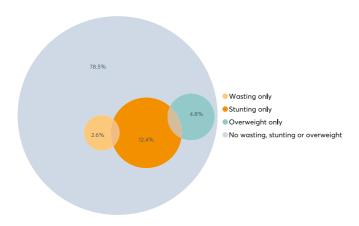
1 No data

Sources: UNICEF global databases Infant and Young Child Feeding, UNICEF/WHO/World Bank Group: Joint child malnutrition estimates, NCD Risk Factor Collaboration, WHO Global Health Observatory and Global Burden of Disease, the Institute for Health Metrics and Evaluation.

Notes: WRA = Women of a reproductive age; NA = not applicable. The methodologies for tracking differ between targets. Data on the adult indicators are based on modelled estimates.

Child (under-five) nutrition status

Coexistence of wasting, stunting Low birth weight and overweight



Sources: UNICEF, Division of Data Research and Policy (2019). UNICEF Global Databases: Overlapping Stunting, Wasting and Overweight, January 2019, New York.

Notes: Percentage of children under-five years of age who experience different and overlapping forms of malnutrition.



Source: UNICEF/WHO Low birthweight estimates, 2019 edition.

Prevalence of under-five stunting

Stunting at subnational Stunting at 5km level level



Source: Kinyoki, D.K. et al. Mapping child growth failure across low- and middle-income countries. Nature 577, 231-234 (2020) doi:10.1038/s41586-019-1878-8.

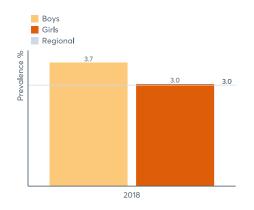
Notes: 5 km level map shows prevalence at the 5 x 5-km resolution. Prevalence is the 2017 estimated prevalence, based on a model using a range of surveys between 1998-2018. See source paper for full methods.

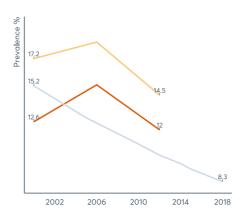
Child (under-five) nutrition status over time

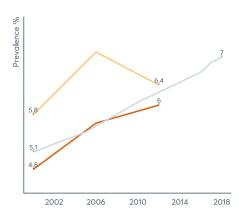
Wasting by gender

Stunting by gender

Overweight by gender



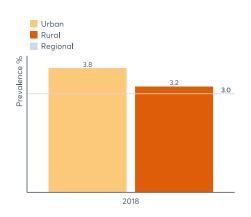


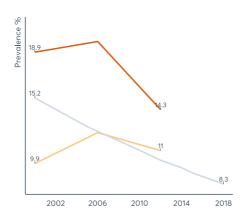


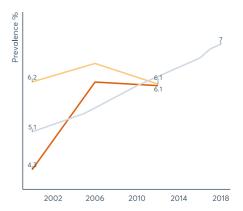
Wasting by location

Stunting by location

Overweight by location



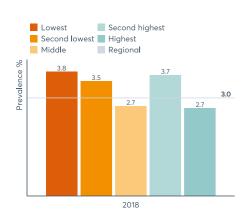


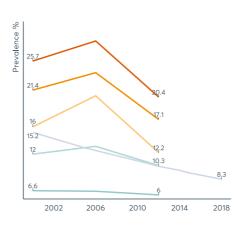


Wasting by income

Stunting by income

Overweight by income



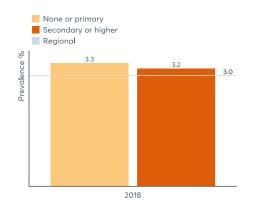


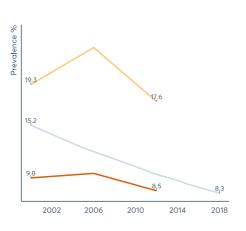


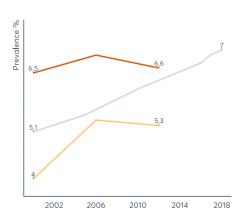
Wasting by mother's education

Stunting by mother's education

Overweight by mother's education



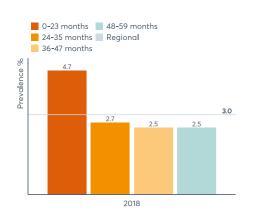


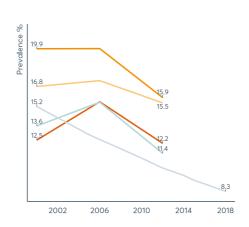


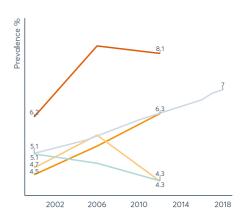
Wasting by age

Stunting by age

Overweight by age







Sources: UNICEF/WHO/World Bank Group: Joint child malnutrition estimates.

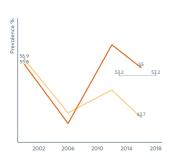
Notes: Regional trends (grey line in charts) refer to estimates from UNICEF/WHO/World Bank Group: Joint child malnutrition estimates. Disaggregated data (coloured lines/bars in charts) is based on population weighted means. Estimates are presented only where available data represents at least 50% of the regional population. Based on population weighted means of between 2 and 6 countries.

Infant and young child feeding over time

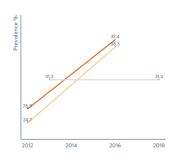
Exclusive breastfeeding by gender



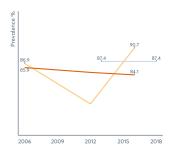
Continued breastfeeding at 1 year by gender



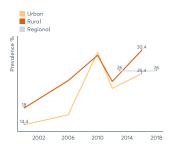
Minimum acceptable diet by gender



Intro. to solid, semi-solid, soft foods by gender



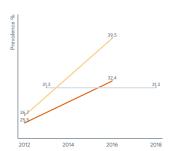
Exclusive breastfeeding by location



Continued breastfeeding at 1 year by location



Minimum acceptable diet by location



Intro. to solid, semi-solid, soft foods by location



Exclusive breastfeeding by income



Continued breastfeeding at 1 year by income



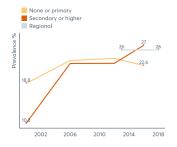
Minimum acceptable diet by income



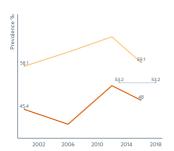
Intro. to solid, semi-solid, soft foods by income



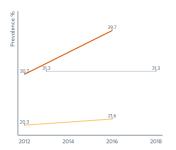
Exclusive breastfeeding by mother's education



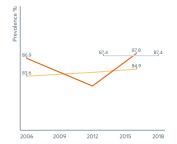
Continued breastfeeding at 1 year by mother's education



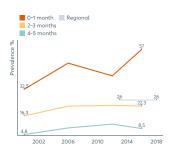
Minimum acceptable diet by mother's education



Intro. to solid, semi-solid, soft foods by mother's education



Exclusive breastfeeding by age



Continued breastfeeding at 1 year by age



Minimum acceptable diet by age



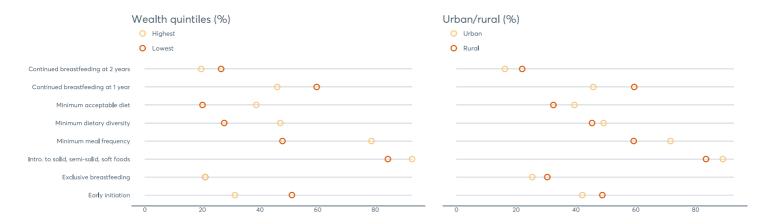
Intro. to solid, semi-solid, soft foods by age



Sources: UNICEF, Division of Data Research and Policy (2019). Global UNICEF Global Databases: Infant and Young Child Feeding, New York, May 2019.

Notes: Regional trends (grey line in charts) refer to estimates from UNICEF/WHO/World Bank Group: Joint child malnutrition estimates. Disaggregated data (coloured lines/bars in charts) is based on population weighted means. Estimates are presented only where available data represents at least 50% of the regional population. Based on population weighted means of between 2 and 5 countries.

Infant and young child feeding



Sources: UNICEF, Division of Data Research and Policy (2019). Global UNICEF Global Databases: Infant and Young Child Feeding: Exclusive breastfeeding, Predominant breastfeeding, New York, May 2019.

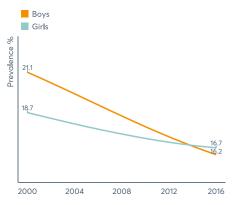
Notes: Based on population weighted means of between 2 and 6 countries.

Child and adolescent (aged 5-19) nutrition status

Underweight by gender

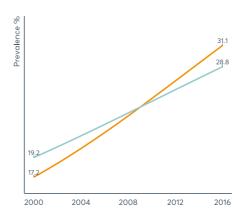
Overweight by gender

Obesity by gender

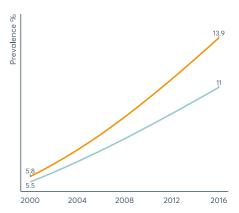


Sources: NCD Risk Factor Collaboration.

Notes: Based on population weighted means of 13 countries.



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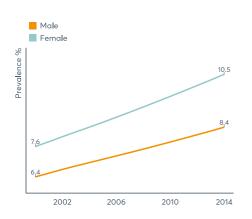
Notes: Based on population weighted means of 13 countries.

Adult nutrition status

Diabetes by gender

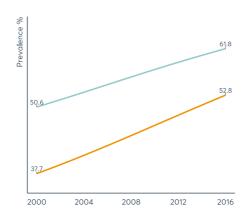
Overweight by gender

Obesity by gender

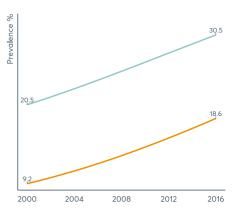


Sources: NCD Risk Factor Collaboration.

Notes: Based on population weighted means of 13 countries.

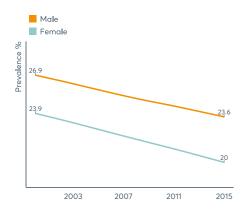


Notes: Based on population weighted means of 13 countries.



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Raised blood pressure by gender

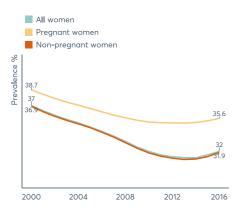


Sources: NCD Risk Factor Collaboration.

Notes: Based on population weighted means of 13 countries.

Anaemia in WRA

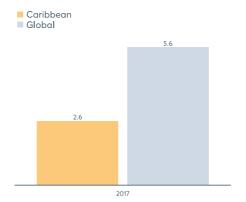
Salt intake (grams per day)



Source: WHO Global Health

Observatory.

Notes: WRA = women of reproductive age. Based on population weighted means of 12 countries.



Source: Global Burden of

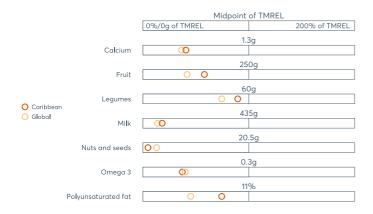
Disease, the Institute for Health

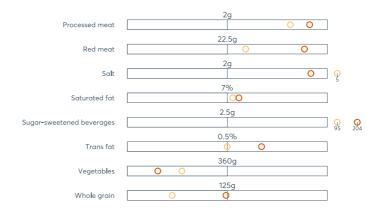
Metrics and Evaluation.

Notes: Based on population weighted means of 12 countries.

Dietary needs

Consumption of food groups and components, 2016





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

Notes: TMREL = theoretical minimum risk of exposure level. Men and women aged 25 and older. Based on population weighted means of 12 countries.

Intervention coverage

Coverage/practice indicator	Total (%)	Boy (%)	Girl (%)	Year
Children 0-59 months with diarrhoea who received zinc treatment	No	No	No	No
	data	data	data	data
Children 6-59 months who received vitamin A supplements in last 6 months	No	No	No	No
	data	data	data	data
Children 6-59 months given iron supplements in past 7 days	No	No	No	No
	data	data	data	data
Women with a live birth in the five years preceding the survey who received iron tablets or syrup during antenatal care	No data	NA	NA	No data
Household consumption of any iodised salt	No data	NA	NA	No data

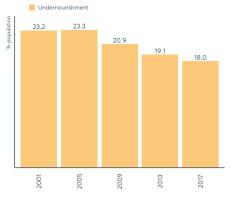
Notes: NA = not applicable. Data is compiled using STATcompiler and taken from country Demographic and Health Surveys for 2005-2018.

Determinants

Undernourishment

Food supply

Gender-related determinants



Source: FAOSTAT 2018.



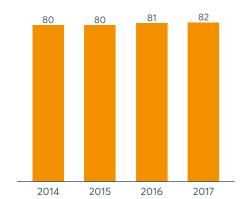
Source: FAOSTAT 2018.

Early childbearing births by age 18 (%) ¹	NA	NA
Gender Inequality Index (score [*]) ²	NA	NA
Gender Inequality Index (country rank) ²	NA	NA

Sources: ¹ UNICEF 2018; ² UNDP 2018.

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

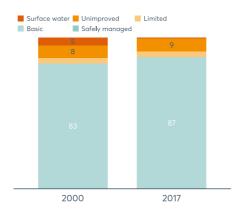
Female secondary education enrolment (net, % population)



Source: UNESCO Institute for Statistics 2018.

Notes: Based on population weighted means of between 4 and 10 countries.

Drinking water coverage (% population)



Source: WHO/UNICEF Joint Monitoring Programme 2019.

Notes: Based on population weighted means of between 1 and 13 countries.

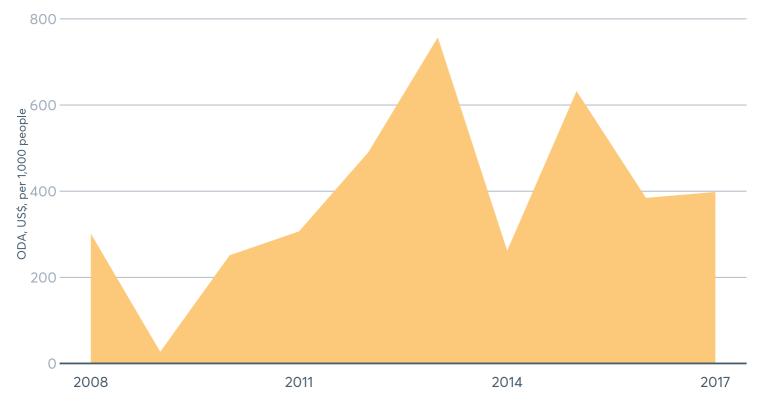
Sanitation coverage (% population)



Source: WHO/UNICEF Joint Monitoring Programme 2019.

Notes: Based on population weighted means of between 1 and 13 countries.





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 2017 prices. Figure includes ODA grants and loans, but excludes other official flows and private grants.

National policies

Mandatory legislation for salt iodisation	1/13
Sugar-sweetened beverage tax	4/13
Food-based dietary guidelines	11/13
Policy to reduce salt consumption	3/13
Operational policy, strategy or action plan to reduce unhealthy diet related to NCDs	8/13
Operational, multisectoral national NCD policy, strategy or action plan	6/13
Operational policy, strategy or action plan for diabetes	9/13
Policy to reduce the impact on children of marketing of foods and beverages high in saturated fats, trans-fatty acids, free sugars or salt	0/13
Policy to limit saturated fatty acids and virtually eliminate industrially produced trans-fats	1/13

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, WHO Global Health Observatory.

Notes: Value refers to the number of countries with policy. NA = not applicable; NCD = non-communicable disease.

Targets included in national (nutrition or other) plan

Stunting	Anaemia
7/13	6/13
Low birth weight	Child overweight
6/13	9/13
Exclusive breastfeeding	Wasting
8/13	6/13
Salt intake	Overweight adults and adolescents
8/13	9/13
Multisectoral comprehensive nutrition plan	
7/13	

Sources: WHO Global database on the Implementation of Nutrition Action (GINA), 2nd Global Nutrition Policy Review.

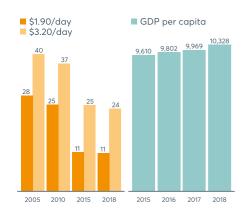
Notes: Value refers to the number of countries with target.

Economics and demography

Poverty rates (%) and Under-five mortality GDP (PPP\$)

(per 1,000 live births)

Government revenues (\$m)



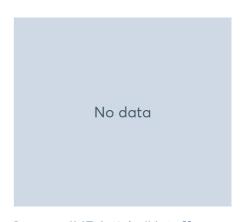
Sources: World Bank 2019, IMF World Economic Outlook Database 2019.

Notes: PPP = purchasing power parity. Based on population weighted means of between 5 and 12 countries.



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

Notes: Based on population weighted means of 13 countries.



Sources: IMF Article IV staff reports (country specific) and IMF World Economic Outlook Database (April 2019).

Income inequality

Population

Population density of health workers per 1,000 people

Gini index score ¹	Gini index rank ²	Year
NA	NA	NA

Sources: World Bank 2019.

Notes: ¹ 0 = perfect equality, 100 = perfect inequality. ² Countries are ranked from most equal (1) to most unequal (159).

Population (thousands)	38,709	2018
Under-five population (thousands)	3,442	2019
Rural (%)	32	2018
>65 years (thousands)	4,495	2019

Sources: World Bank 2019, UN Population Division Department of Economic and Social Affairs 2019.

Notes: Based on population weighted means of 13 countries.

Physicians	4.4	2016
Nurses and midwives	4.42	2016
Community health workers	No data	No data

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

Notes: Based on population weighted means of between 10 and 11 countries.