Antigua and Barbuda

Overview

Malnutrition status

Antigua and Barbuda is off course to meet the global targets for anaemia in women of reproductive age, low birth weight, male diabetes, female diabetes, male obesity, and female obesity. There is insufficient target data to assess Antigua and Barbuda's progress for under-five overweight, under-five stunting, under-five wasting, and infant exclusive breastfeeding.

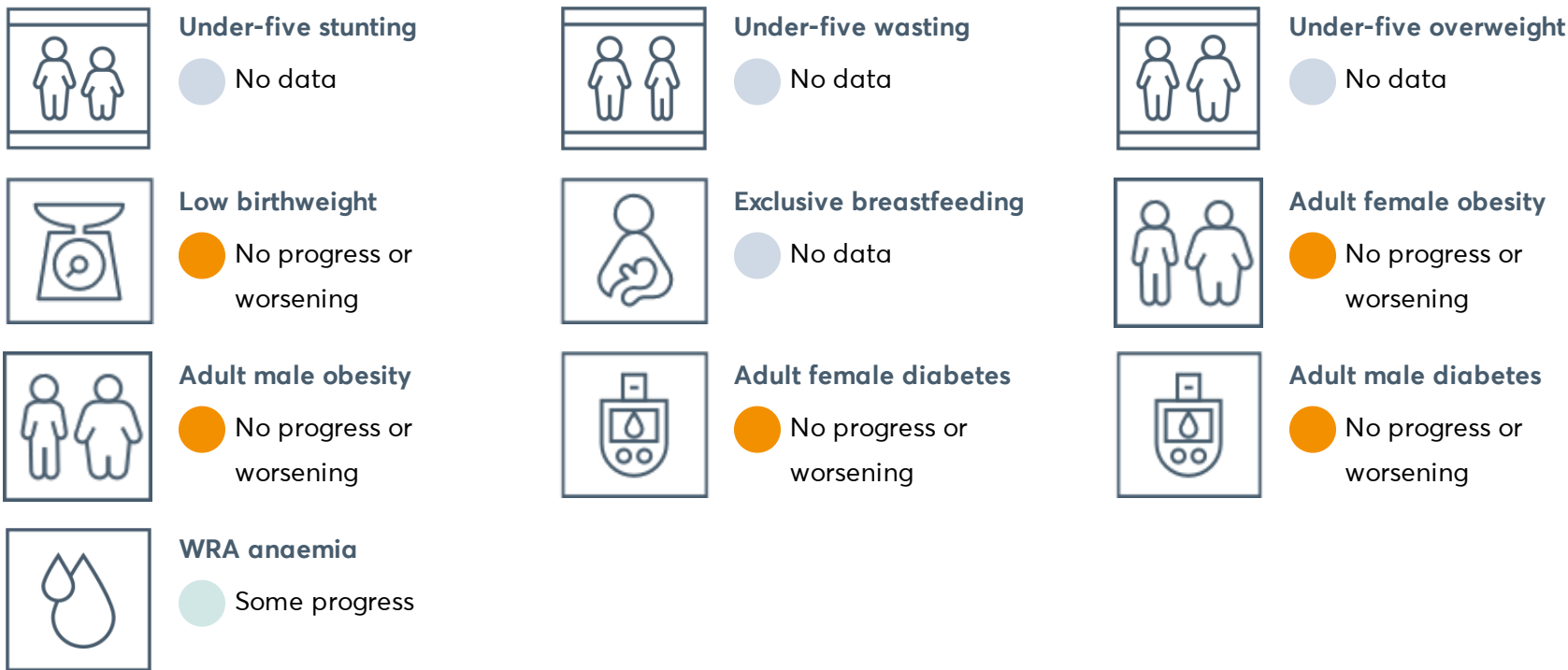Antigua and Barbuda has no prevalence data available for under-five overweight, stunting, or wasting.

There is also insufficient data on exclusive breastfeeding among infants. Antigua and Barbuda's 2015 low birth weight prevalence of 9.1% has remained constant since 2000.

Antigua and Barbuda's adult population face a malnutrition burden. While there is no prevalence data available for anaemia among women of reproductive age, 13% of adult women suffer from diabetes, compared to 9.9% of men. Meanwhile, 25.9% of women and 11.6% of men suffer from obesity.

Sources: 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 2018

Under-five stunting
No data

Under-five wasting
No data

Under-five overweight
No data

Low birthweight
No progress or worsening

Exclusive breastfeeding
No data

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

WRA anaemia
Some progress

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.

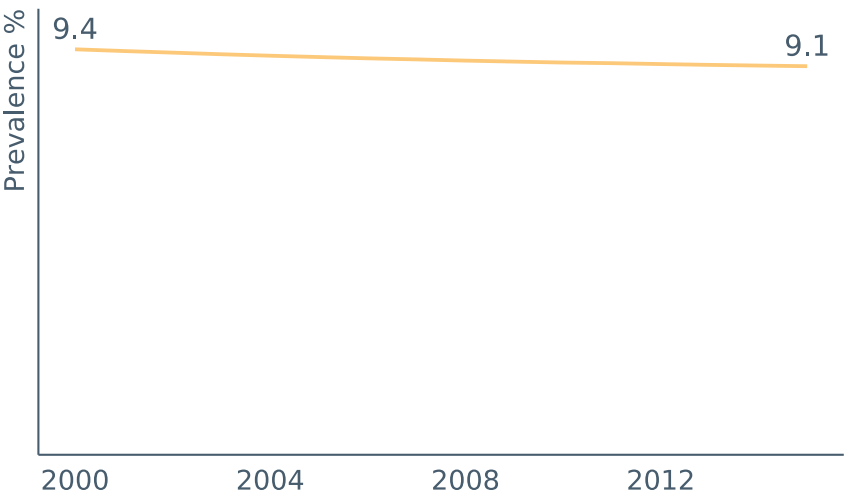# Child (under-five) nutrition status over time

Coexistence of wasting, stunting and overweight

No data

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

Low birth weight

9.4

9.1

Prevalence %

2000   2004   2008   2012

Child (under-five) nutrition status

Wasting by gender

No data

Stunting by gender

No data

Overweight by gender

No data

Wasting by location

No data

Stunting by location

No data

Overweight by location

No data

Wasting by income

No data

Stunting by income

No data

Overweight by income

No data

Wasting by education

Stunting by education

Overweight by education

No data

No data

No data

Wasting by age

Stunting by age

Overweight by age

No data

No data

No data

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

Infant and young child feeding over time

Exclusive breastfeeding by gender

No data

Continued breastfeeding at 1 year by gender

No data

Minimum acceptable diet by gender

No data

Introduction to solid, semi-solid or soft foods by gender

No data

Exclusive breastfeeding by location

No data

Continued breastfeeding at 1 year by location

No data

Minimum acceptable diet by location

No data

Introduction to solid, semi-solid or soft foods by location

No data
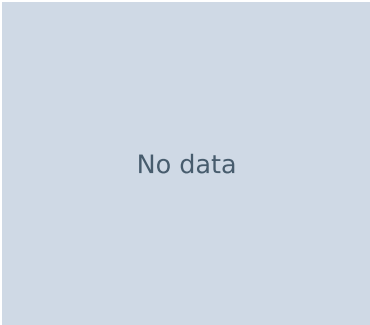
Exclusive breastfeeding by income

No data

Continued breastfeeding at 1 year by income

No data

Minimum acceptable diet by income

No data

Introduction to solid, semi-solid or soft foods by income
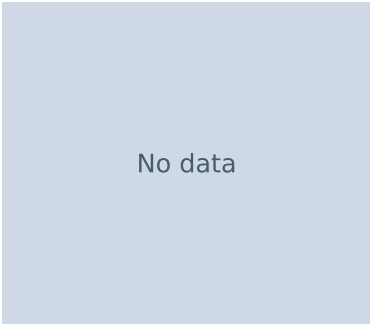
No data

Exclusive breastfeeding by mother's education

No data

Continued breastfeeding at 1 year by mother's education

No data

Minimum acceptable diet by mother's education

No data

Introduction to solid, semi-solid or soft foods by mother's education

No data

Exclusive breastfeeding by age

No data

Continued breastfeeding at 1 year by age

No data

Minimum acceptable diet by age

No data

Introduction to solid, semi-solid or soft foods by age

No data

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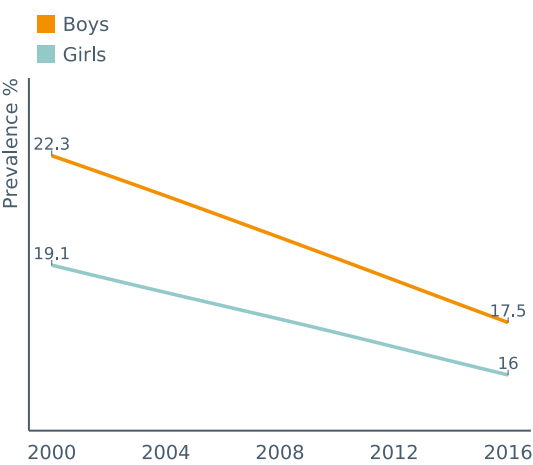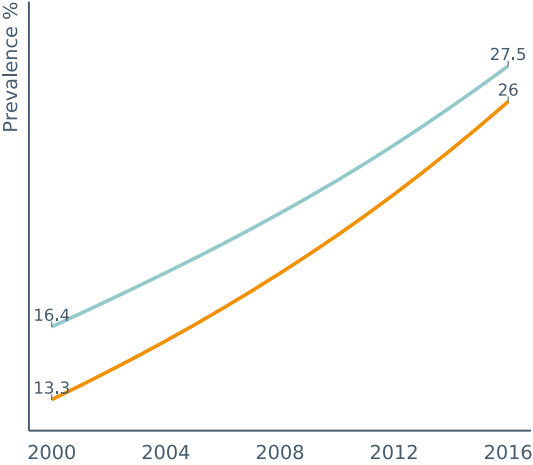
Infant and young child feeding

No data

No data

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.

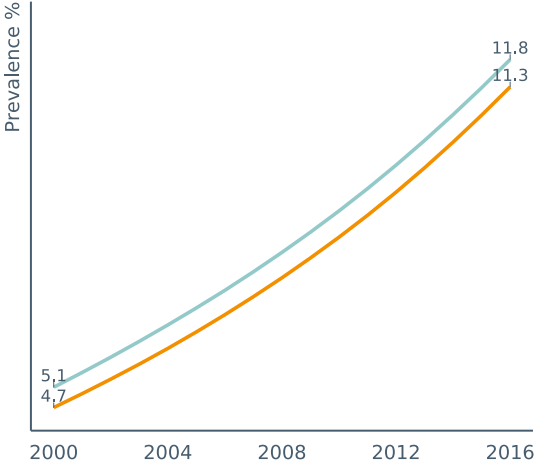# Child and adolescent (aged 5-19) nutrition status

Underweight by gender

Prevalence %

- Boys
- Girls

22.3
19.1
17.5
16

2000 2004 2008 2012 2016

Overweight by gender

Prevalence %

27.5
26
16.4
13.3

2000 2004 2008 2012 2016

Obesity by gender

Prevalence %

11.8
11.3
5.1
4.7

2000 2004 2008 2012 2016

Sources: NCD Risk Factor Collaboration.

Adult nutrition status

Diabetes by gender

Prevalence %

- Male
- Female

13

9,9

8,8

6,5

2000　2004　2008　2012
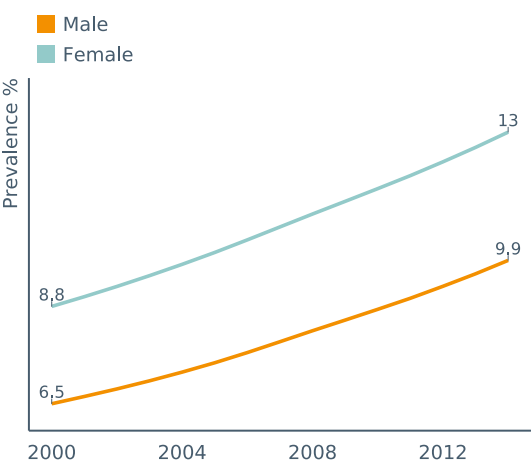
Sources: NCD Risk Factor Collaboration.

Overweight by gender

Prevalence %

55,6

46,4

40,1

32

2000　2004　2008　2012　2016

Obesity by gender

Prevalence %

25,9

18,2

11,6

6,8

2000　2004　2008　2012　2016
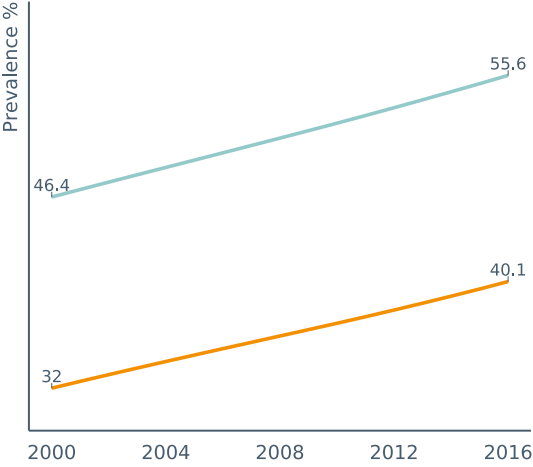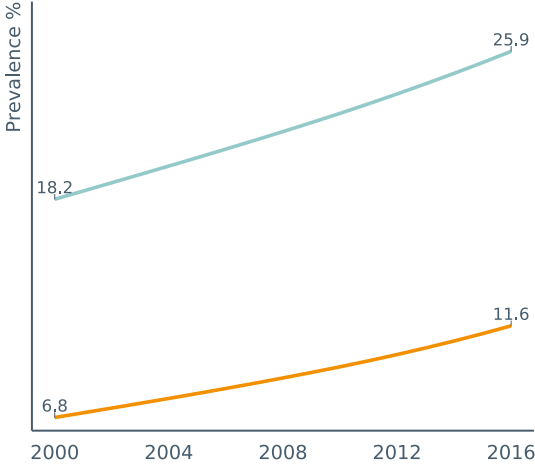
Raised blood pressure by gender

Prevalence %

- Male
- Female

26　　　　　　　26,4

20,2　　　　　　20,4

2000　2004　2008　2012
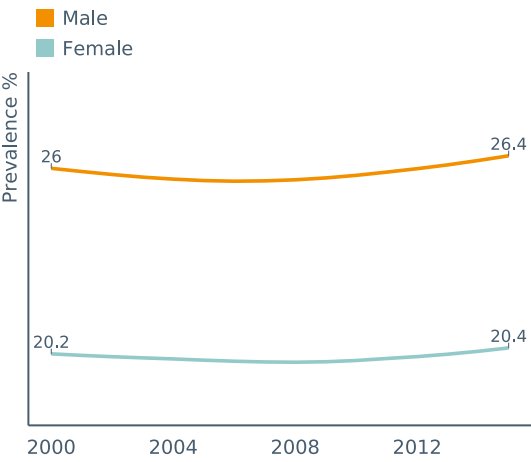
Sources: NCD Risk Factor Collaboration.

Anaemia in WRA

Prevalence %

- All women
- Pregnant women
- Non-pregnant women

29,3

27,2

27,1

25

22,1

22

2000　2004　2008　2012　2016
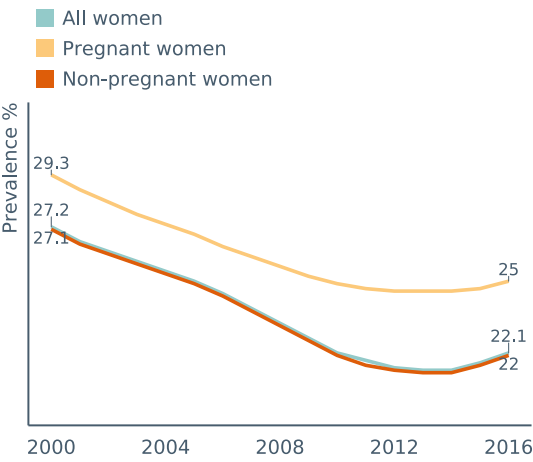
Source: WHO Global Health Observatory.

Notes: WRA = women of reproductive age.

Sodium intake (grams per day)

- Antigua and Barbuda
- Global

5.6

2.8

2017

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

Dietary needs

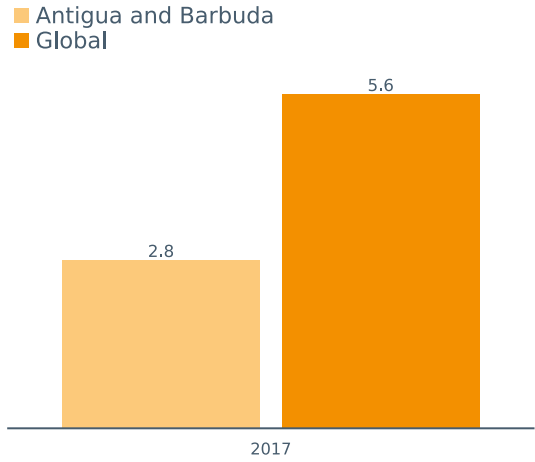## Consumption of food groups and components, 2016

Midpoint of TMREL

0%/0g of TMREL — 200% of TMREL

Calcium	1.3g	Processed meat	2g
Fruit	250g	Red meat	22.5g
Legumes	60g	Salt	2g / 5
Milk	435g	Saturated fat	7%
Nuts and seeds	20.5g	Sugar-sweetened beverages	2.5g / 95 169 204
Omega 3	0.3g	Trans fat	0.5%
Polyunsaturated fat	11%	Vegetables	360g
		Whole grain	125g

○ Antigua and Barbuda
○ Regional
○ Global

Sources: TMREL = theoretical minimum risk of exposure level. Global Burden of Disease, the Institute for Health Metrics and Evaluation.

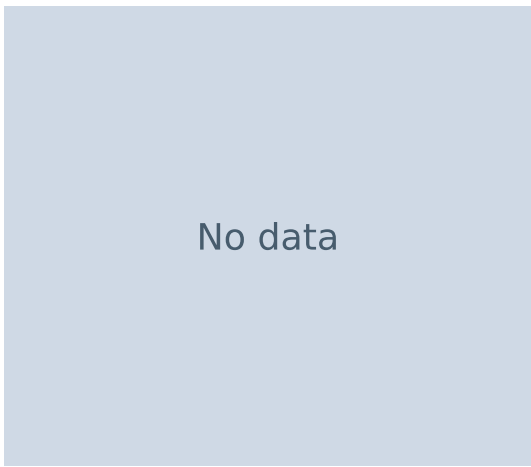Notes: Men and women aged 25 and older.

Intervention coverage

Coverage/practice indicator	Total (%)	Boy (%)	Girl (%)	Year
Children 0-59 months with diarrhoea who received zinc treatment	No data	No data	No data	No data
Children 6-59 months who received vitamin A supplements in last 6 months	No data	No data	No data	No data
Children 6-59 months given iron supplements in past 7 days	No data	No data	No data	No 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

Sources: Huestis A. and Kothari M., based on *2016 Global Nutrition Report* and UNICEF global databases, 2019.

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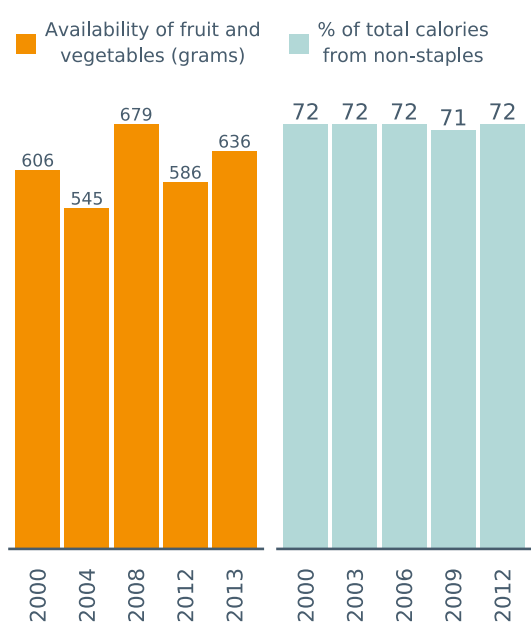
Determinants

Undernourishment

No data

Source: FAOSTAT 2018.

Food supply

■ Availability of fruit and vegetables (grams)　■ % of total calories from non-staples

606	545	679	586	636	72	72	72	71	72

2000　2004　2008　2012　2013　2000　2003　2006　2009　2012

Source: FAOSTAT 2018.

Gender-related determinants

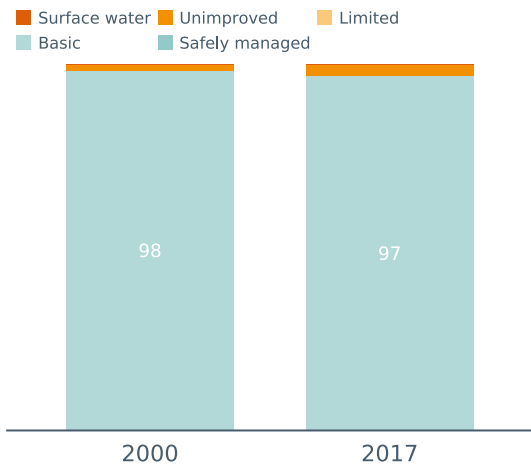|		
Early childbearing births by age 18 (%)[1]	No data	No data
Gender Inequality Index (score*)[2]	No data	No data
Gender Inequality Index (country rank)[2]	No data	No data

Sources: [1] UNICEF 2018; [2] UNDP 2018.

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

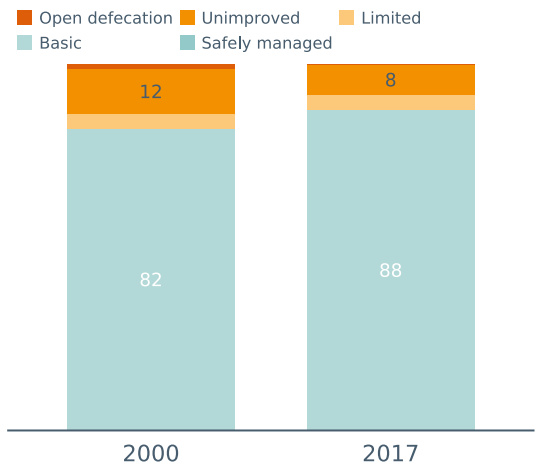## Female secondary education enrolment (net, % population)

87	74	76	73
2012	2014	2015	2017
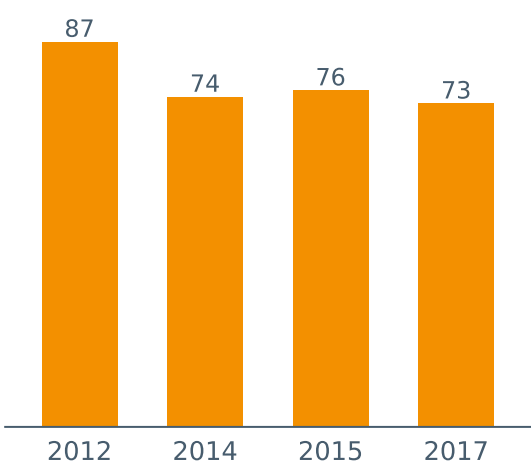
Source: UNESCO Institute for Statistics 2018.

Drinking water coverage (% population)

■ Surface water　■ Unimproved　■ Limited
■ Basic　■ Safely managed

98	97
2000	2017

Source: WHO/UNICEF Joint Monitoring Programme 2019.

Sanitation coverage (% population)

■ Open defecation　■ Unimproved　■ Limited
■ Basic　■ Safely managed

12	8
82	88
2000	2017

Source: WHO/UNICEF Joint Monitoring Programme 2019.

Resources, policies and targets

Development assistance

No data

Sources: Development Initiatives based on OECD Development Assistance Commitee (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	No
Sugar-sweetened beverage tax	No
Food-based dietary guidelines	Yes
Policy to reduce salt consumption	No
Operational policy, strategy or action plan to reduce unhealthy diet related to NCDs	Yes
Operational, multisectoral national NCD policy, strategy or action plan	Yes
Operational policy, strategy or action plan for diabetes	Yes
Policy to reduce the impact on children of marketing of foods and beverages high in saturated fats, trans-fatty acids, free sugars or salt	No
Policy to limit saturated fatty acids and virtually eliminate industrially produced trans-fats	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, WHO Global Health Observatory.

Notes: NA = not applicable; NCD = non-communicable disease.

# Targets included in national (nutrition or other) plan

Stunting	Anaemia
Yes	Yes
Low birth weight	**Child overweight**
No	Yes
Exclusive breastfeeding	**Wasting**
Yes	Yes
Salt intake	**Overweight adults and adolescents**
Yes	Yes
Multisectoral comprehensive nutrition plan	
Yes	

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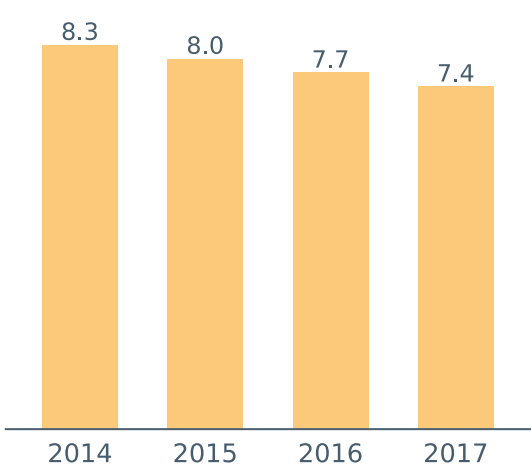
Economics and demography

Poverty rates (%) and GDP (PPP$)

GDP per capita

No data

	2016	2017	2018	2019
	23,281	23,869	24,872	25,588
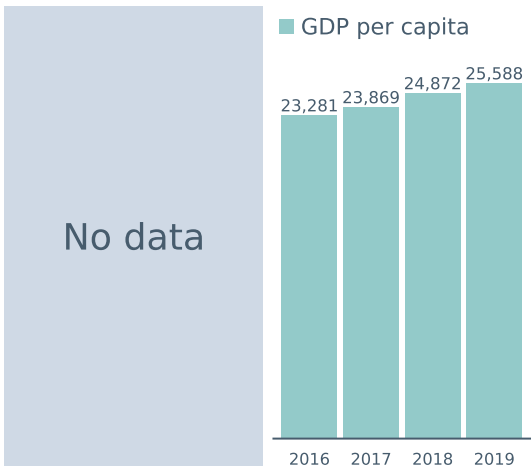
Sources: World Bank 2019, IMF World Economic Outlook Database 2019.

Notes: PPP = purchasing power parity.

Under-five mortality (per 1,000 live births)

2014	2015	2016	2017
8.3	8.0	7.7	7.4

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

Government revenues ($m)
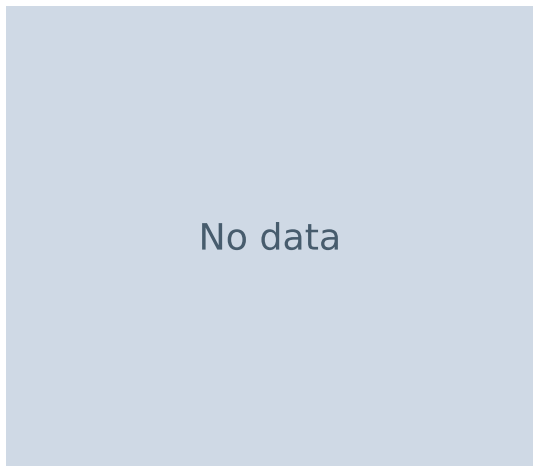
No data

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

Income inequality

Gini index score[1]	Gini index rank[2]	Year
No data	No data	No data

Sources: World Bank 2019.

Notes: [1] 0 = perfect equality, 100 = perfect inequality. [2] Countries are ranked from most equal (1) to most unequal (120).

Population

Population (thousands)	96	2018
Under-five population (thousands)	7	2019
Rural (%)	75	2018
>65 years (thousands)	9	2019

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

Population density of health workers per 1,000 people

Physicians	No data	No data
Nurses and midwives	No data	No data
Community health workers	No data	No data

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

For complete source information: globalnutrition.org/nutrition-profiles/technical-notes