

## Global overview

### Malnutrition burden

Throughout the world, there has been some progress towards achieving global nutrition targets.

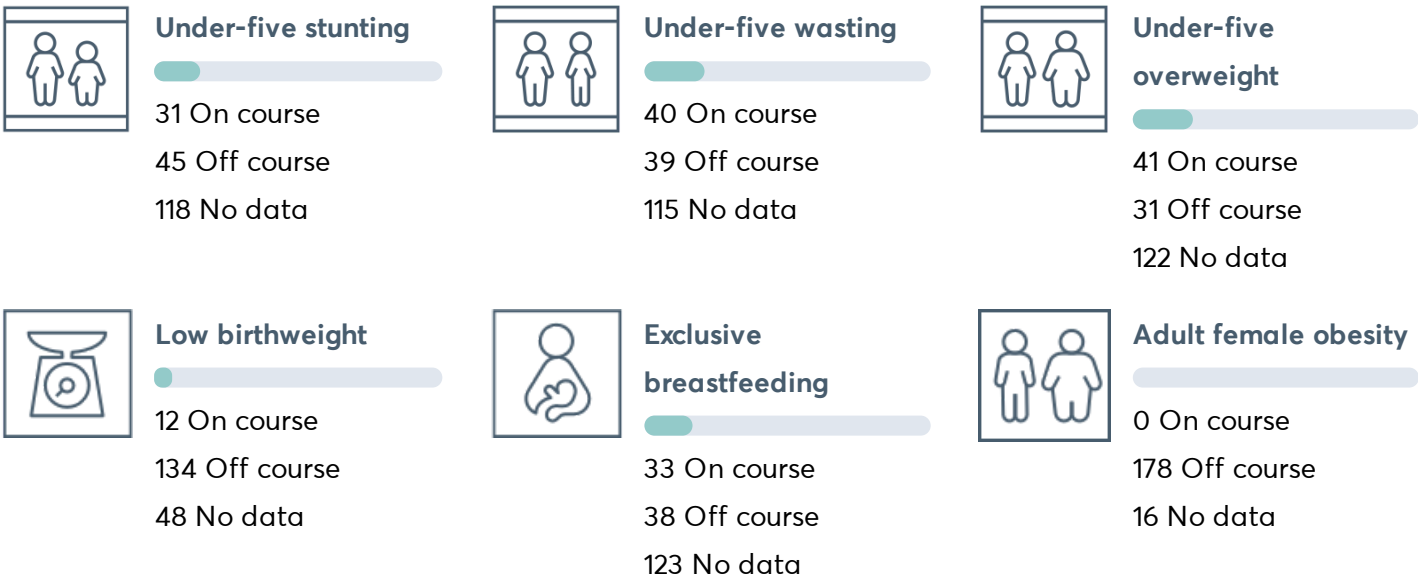
A total of 41 countries are on course to meet the global target for under-5 overweight, 40 countries are on course for under-5 wasting and 33 countries are on course for infant exclusive breastfeeding. In total, 31 countries are on course for under-5 stunting and 26 countries are on course for female diabetes. Meanwhile, 12 countries are on course for low birth weight and 8 countries are on course for male diabetes. However, not a single country in the world is on course for the targets: anaemia in women of reproductive age, male obesity and female obesity.

The world experiences a significant malnutrition burden among its under-5 population. The average global prevalence of overweight in the under-5 population is 5.9% and the prevalence of stunting is 21.9%. The prevalence of wasting in the under-5 population is 7.3%. A total of 41.2% of infants under 6 months are exclusively breastfed, while the world's average low birth weight prevalence is 14.6%. The adult population also faces a malnutrition burden. An average of 32.8% of women of reproductive age have anaemia, and 9% of adult men have diabetes, compared to 7.9% of women. Meanwhile, 14.7% of women and 10.5% of men are obese.

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





### Adult male obesity

0 On course  
180 Off course  
14 No data



### Adult female diabetes

26 On course  
164 Off course  
4 No data



### Adult male diabetes

8 On course  
182 Off course  
4 No data



### WRA anaemia

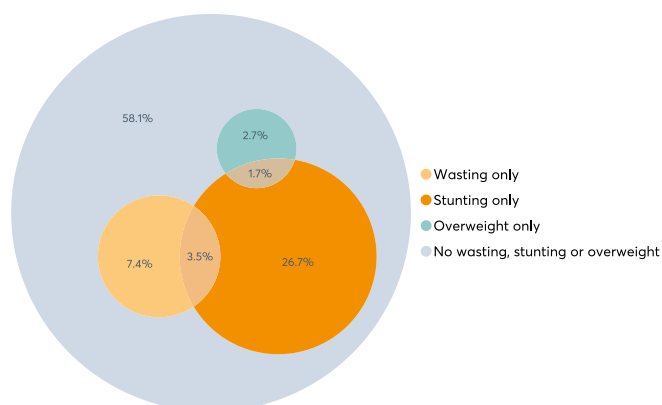
0 On course  
187 Off course  
7 No data

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

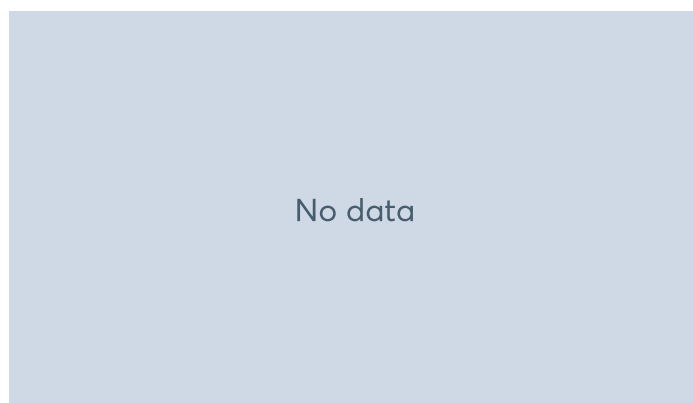
### Coexistence of wasting, stunting and overweight



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. Based on population weighted means of 111 countries.

### Low birth weight



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

# Prevalence of under-five stunting

Stunting at subnational level

Stunting at 5km level

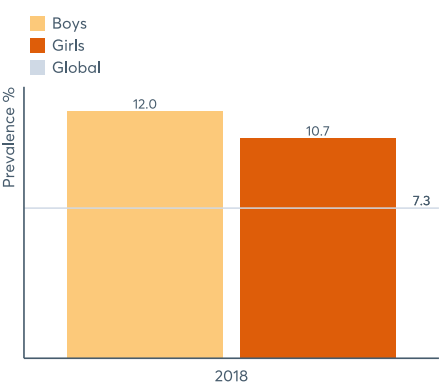


Source: Kinyoki, D.K. et al. Mapping child growth failure across low- and middle-income countries. Nature 577, 231–234 (2020) doi:10.1038/s41586-019-1878-8.

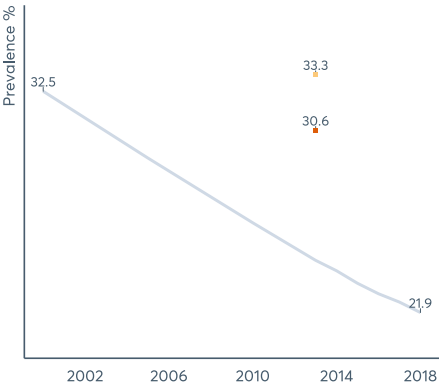
Notes: 5 km level map shows prevalence at the 5 x 5-km resolution. Prevalence is the 2017 estimated prevalence, based on a model using a range of surveys between 1998-2018. See source paper for full methods.

# Child (under-five) nutrition status over time

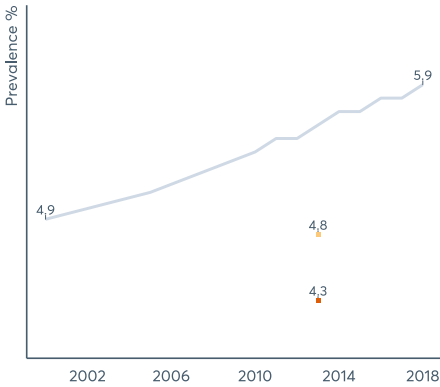
## Wasting by gender



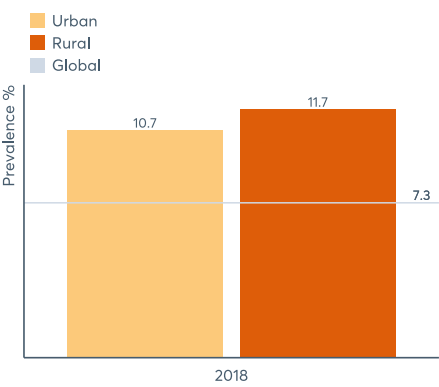
## Stunting by gender



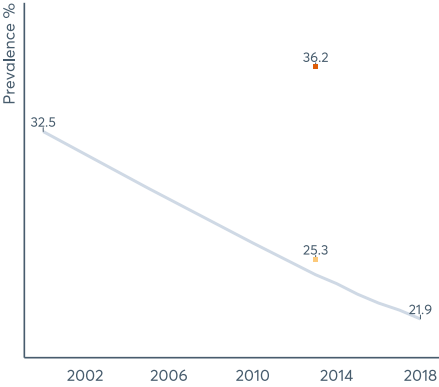
## Overweight by gender



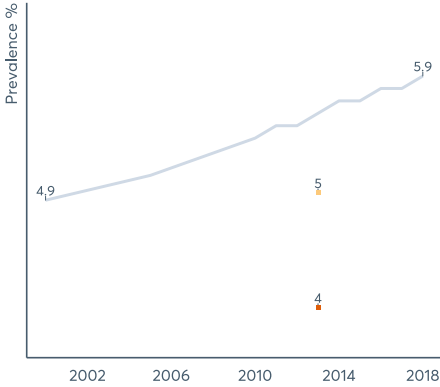
## Wasting by location



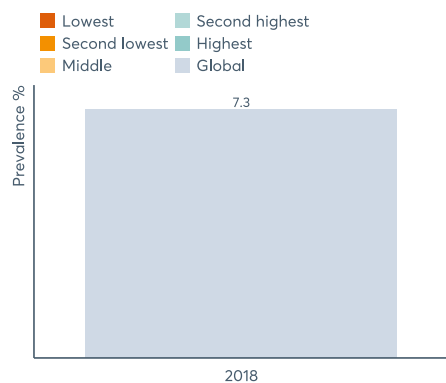
## Stunting by location



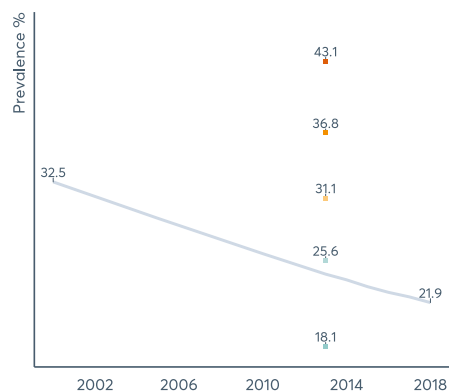
## Overweight by location



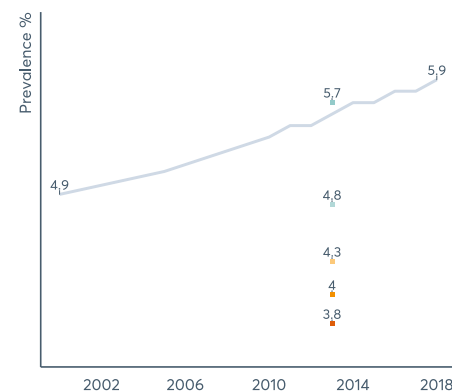
## Wasting by income



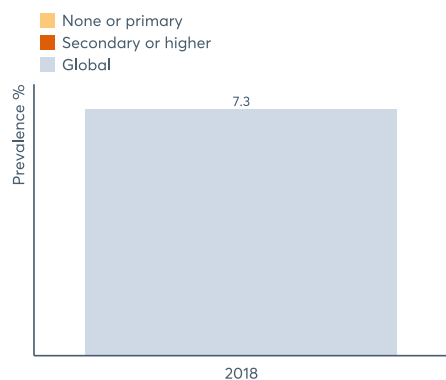
## Stunting by income



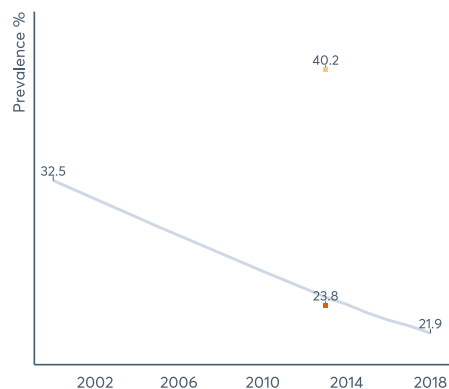
## Overweight by income



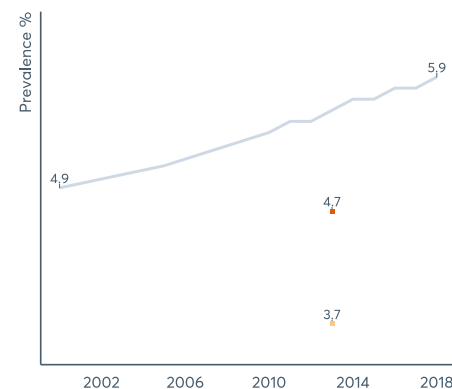
## Wasting by mother's education



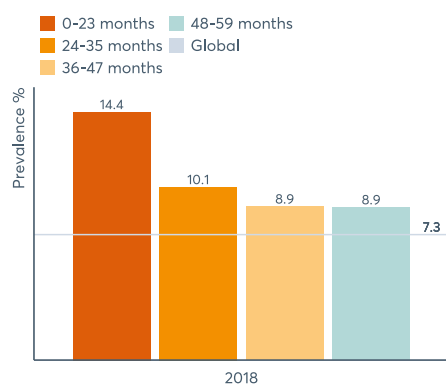
## Stunting by mother's education



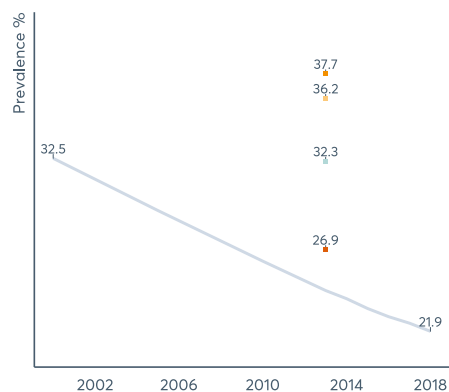
## Overweight by mother's education



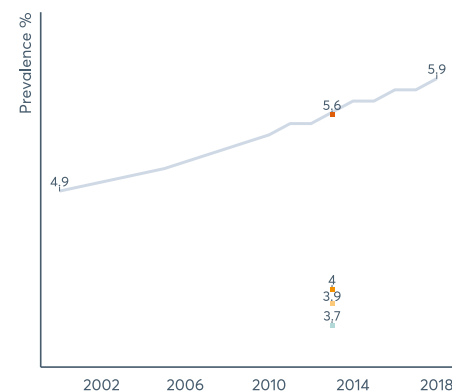
## Wasting by age



## Stunting by age



## Overweight by age

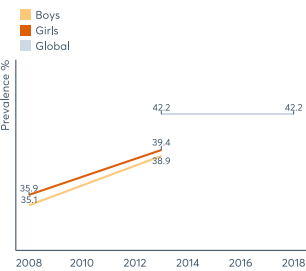


Sources: UNICEF/WHO/World Bank Group: Joint child malnutrition estimates.

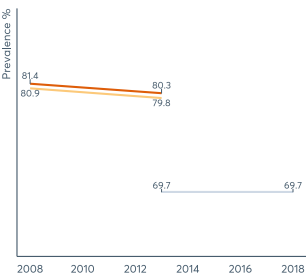
Notes: Global trends (grey line in charts) refer to estimates from UNICEF/WHO/World Bank Group: Joint child malnutrition estimates. Disaggregated data (coloured lines/bars in charts) is based on population weighted means. Estimates are presented only where available data represents at least 50% of the regional population. Based on population weighted means of between 83 and 110 countries.

# Infant and young child feeding over time

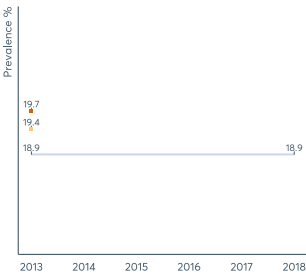
Exclusive breastfeeding by gender



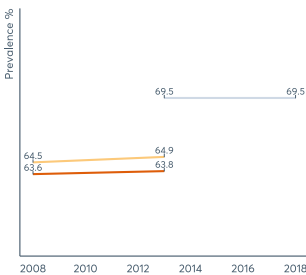
Continued breastfeeding at 1 year by gender



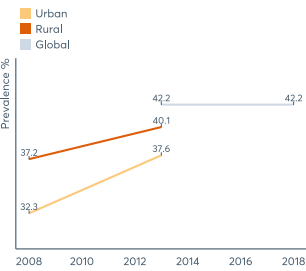
Minimum acceptable diet by gender



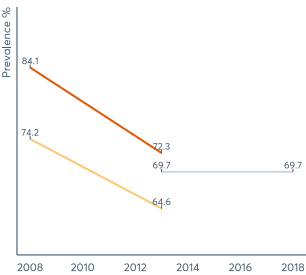
Intro. to solid, semi-solid, soft foods by gender



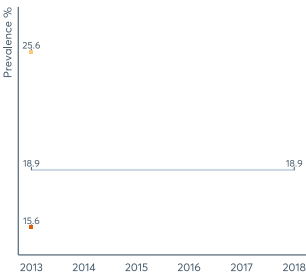
Exclusive breastfeeding by location



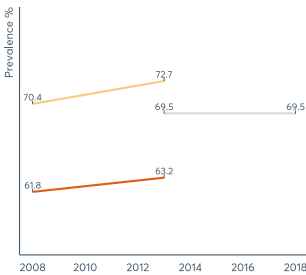
Continued breastfeeding at 1 year by location



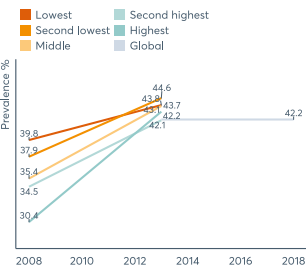
Minimum acceptable diet by location



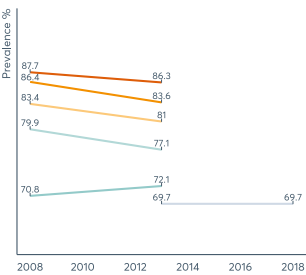
Intro. to solid, semi-solid, soft foods by location



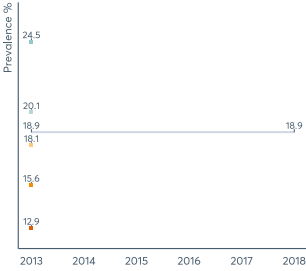
Exclusive breastfeeding by income



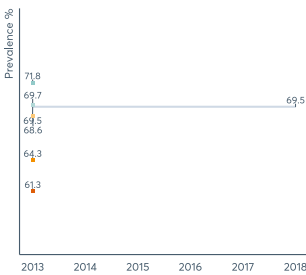
Continued breastfeeding at 1 year by income



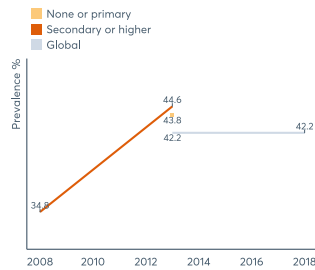
Minimum acceptable diet by income



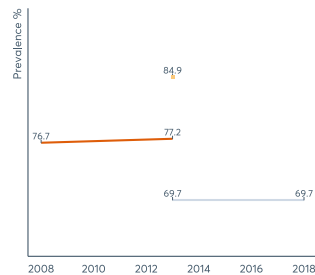
Intro. to solid, semi-solid, soft foods by income



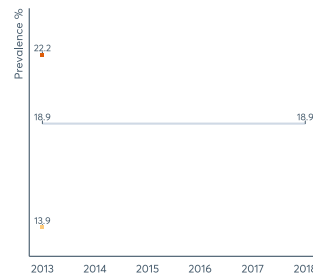
## Exclusive breastfeeding by mother's education



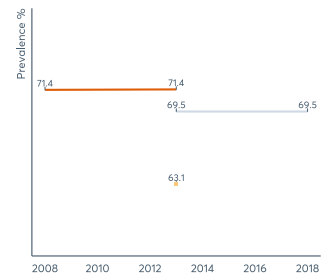
## Continued breastfeeding at 1 year by mother's education



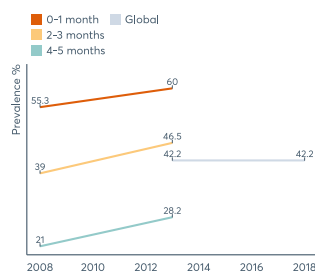
## Minimum acceptable diet by mother's education



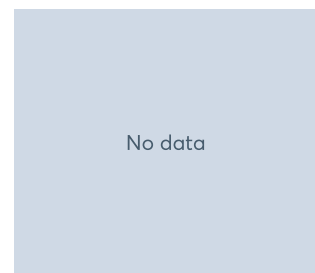
## Intro. to solid, semi-solid, soft foods by mother's education



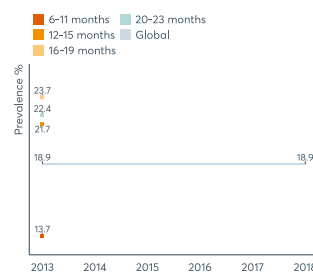
## Exclusive breastfeeding by age



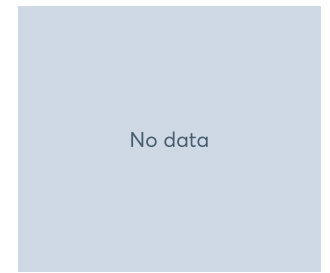
## Continued breastfeeding at 1 year by age



## Minimum acceptable diet by age



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

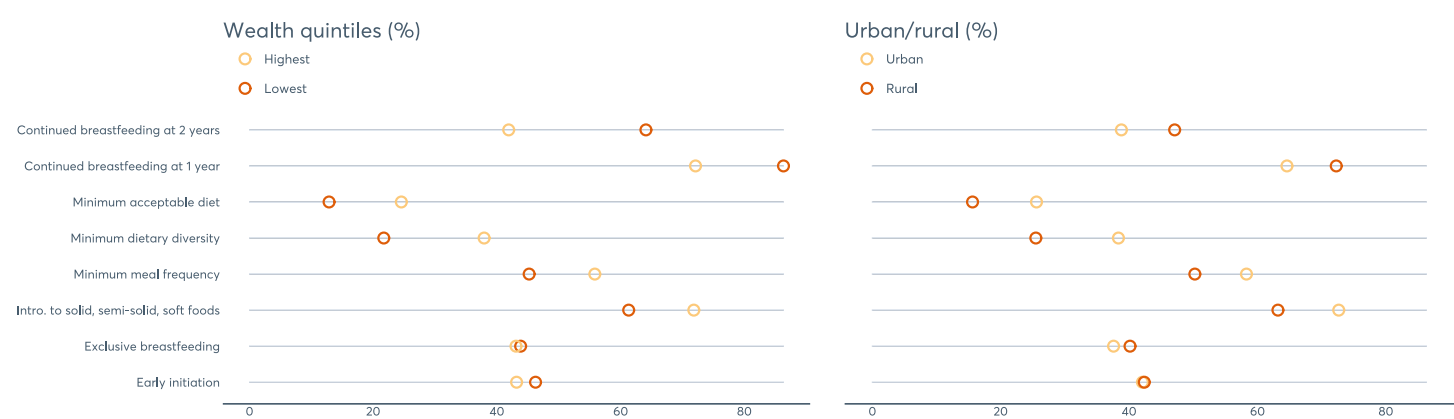


Sources: UNICEF, Division of Data Research and Policy (2019). Global UNICEF Global Databases: Infant and Young Child Feeding, New York, May 2019.

Notes: Global 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 66 and 100 countries.



# Infant and young child feeding

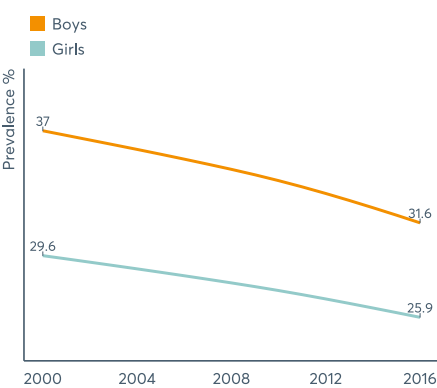


Sources: UNICEF, Division of Data Research and Policy (2019). Global UNICEF Global Databases: Infant and Young Child Feeding: Exclusive breastfeeding, Predominant breastfeeding, New York, May 2019.

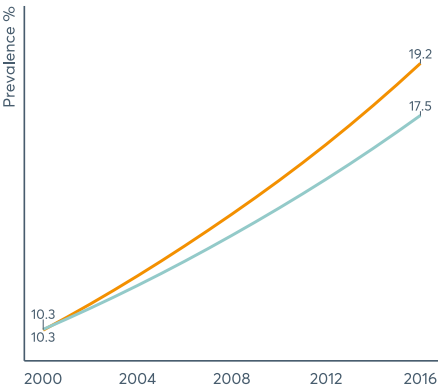
Notes: Based on population weighted means of between 57 and 100 countries.

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

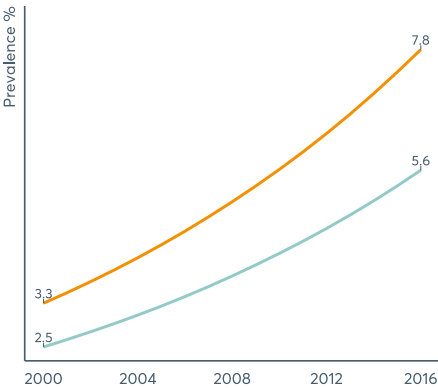
Underweight by gender



Overweight by gender



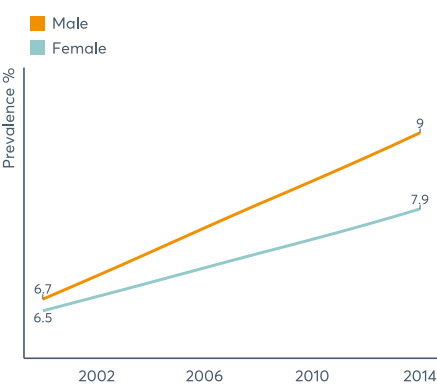
Obesity by gender



Sources: NCD Risk Factor Collaboration.

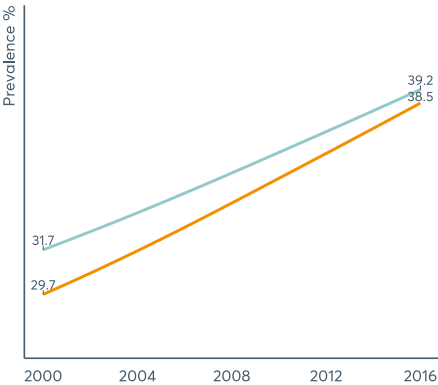
# Adult nutrition status

## Diabetes by gender

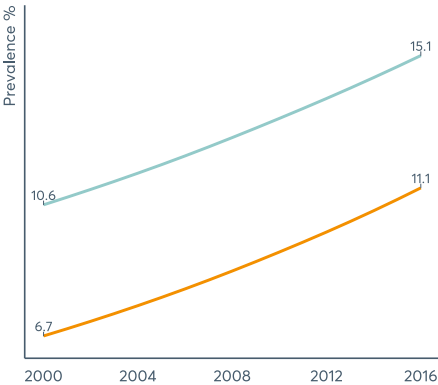


Sources: NCD Risk Factor Collaboration.

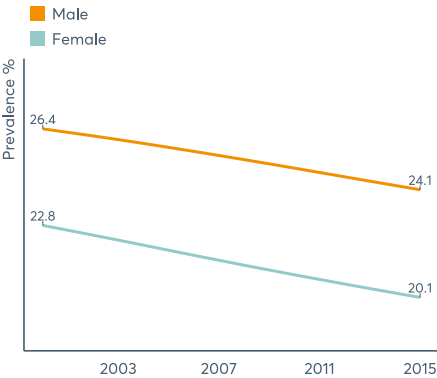
## Overweight by gender



## Obesity by gender

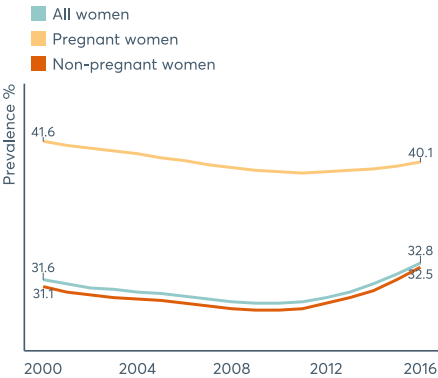


## Raised blood pressure by gender



Sources: NCD Risk Factor Collaboration.

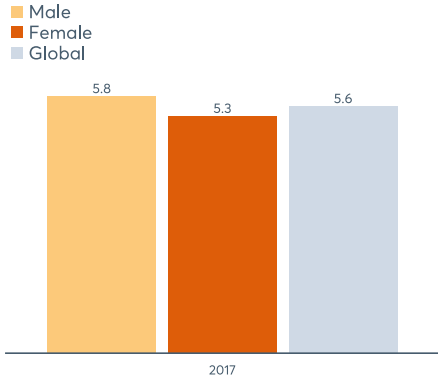
## Anaemia in WRA



Source: WHO Global Health Observatory.

Notes: WRA = women of reproductive age.

## Salt intake (grams per day)



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

# 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.

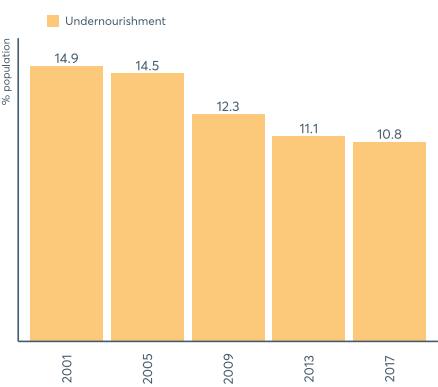
## Intervention coverage

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

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

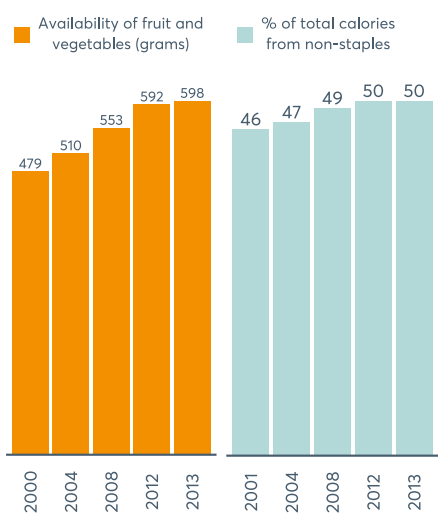
# Determinants

## Undernourishment



Source: FAOSTAT 2018.

## Food supply



Source: FAOSTAT 2018.

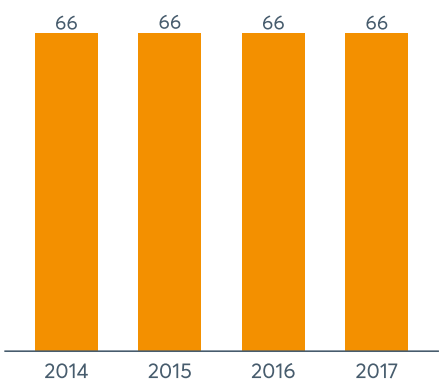
## Gender-related determinants

Early childbearing births by age 18 (%) <sup>1</sup>	NA	NA
Gender Inequality Index (score <sup>*</sup> ) <sup>2</sup>	NA	NA
Gender Inequality Index (country rank) <sup>2</sup>	NA	NA

Sources: <sup>1</sup> UNICEF 2018; <sup>2</sup> UNDP 2018.

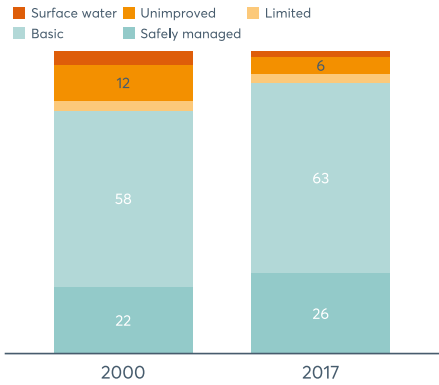
Notes: <sup>\*</sup> 0 = low inequality, 1 = high inequality.

Female secondary education enrolment (net, % population)



Source: UNESCO Institute for Statistics 2018.

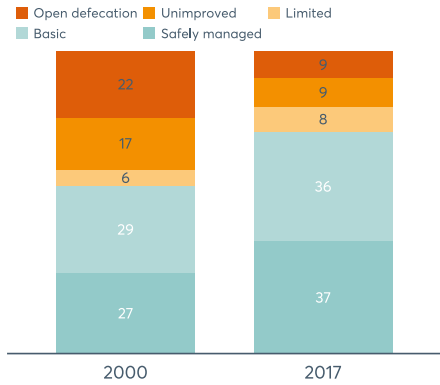
Drinking water coverage (% population)



Source: WHO/UNICEF Joint Monitoring Programme 2019.

Notes: Based on population weighted means of between 93 and 194 countries.

Sanitation coverage (% population)



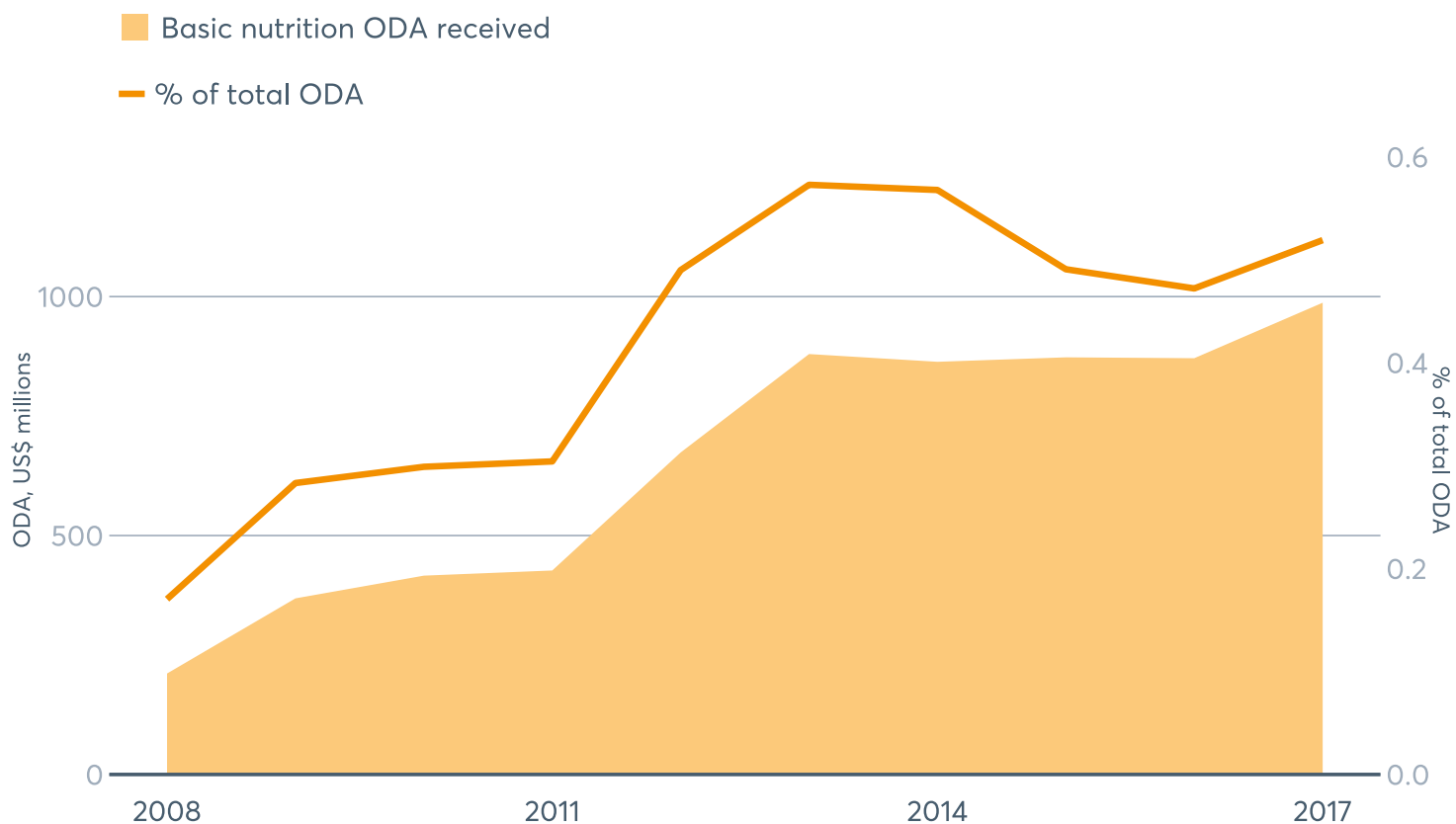
Source: WHO/UNICEF Joint Monitoring Programme 2019.

Notes: Based on population weighted means of between 86 and 194 countries.

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## Resources, policies and targets

Development assistance



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	115/194
Sugar-sweetened beverage tax	73/194
Food-based dietary guidelines	92/194
Policy to reduce salt consumption	91/194
Operational policy, strategy or action plan to reduce unhealthy diet related to NCDs	152/194
Operational, multisectoral national NCD policy, strategy or action plan	98/194
Operational policy, strategy or action plan for diabetes	148/194
Policy to reduce the impact on children of marketing of foods and beverages high in saturated fats, trans-fatty acids, free sugars or salt	58/194
Policy to limit saturated fatty acids and virtually eliminate industrially produced trans-fats	68/194

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

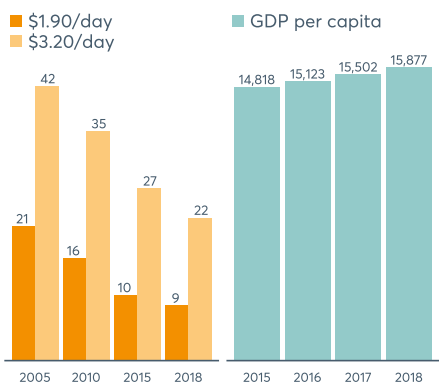
Stunting	Anaemia
111/194	87/194
Low birth weight	Child overweight
100/194	139/194
Exclusive breastfeeding	Wasting
127/194	101/194
Salt intake	Overweight adults and adolescents
108/194	160/194
Multisectoral comprehensive nutrition plan	
100/194	

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

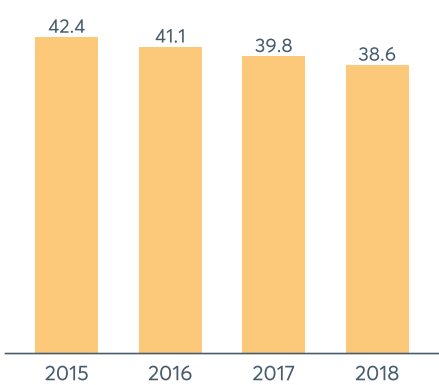
## Poverty rates (%) and GDP (PPP\$)



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

Notes: PPP = purchasing power parity. Based on population weighted means of 186 countries.

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



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

## Government revenues (\$m)



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

## Income inequality

Gini index score <sup>1</sup>	Gini index rank <sup>2</sup>	Year
NA	NA	NA

Sources: World Bank 2019.

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

## Population

Population (thousands)	7,594,270	2018
Under-five population (thousands)	677,369	2019
Rural (%)	45	2018
>65 years (thousands)	702,933	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	1.49	2013
Nurses and midwives	3.14	2013
Community health workers	0.51	2016

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

Notes: Based on population weighted means of 64 countries.