

# Northern Europe

## Overview

### Malnutrition status

In the Northern Europe subregion, there has been some progress towards achieving global nutrition targets. The global target for low birth weight has 7 countries on course to meet it. The target for female diabetes has 5 countries on course. The target for male diabetes has 4 countries on course. However, not a single country in the Northern Europe subregion is on course for under-five overweight, under-five stunting, under-five wasting, infant exclusive breastfeeding, anaemia in women of reproductive age, male obesity, and female obesity. 10 countries in the subregion have insufficient data to comprehensively assess their progress towards these global targets.

the Northern Europe subregion has no prevalence data available for under-five overweight, stunting, or wasting.

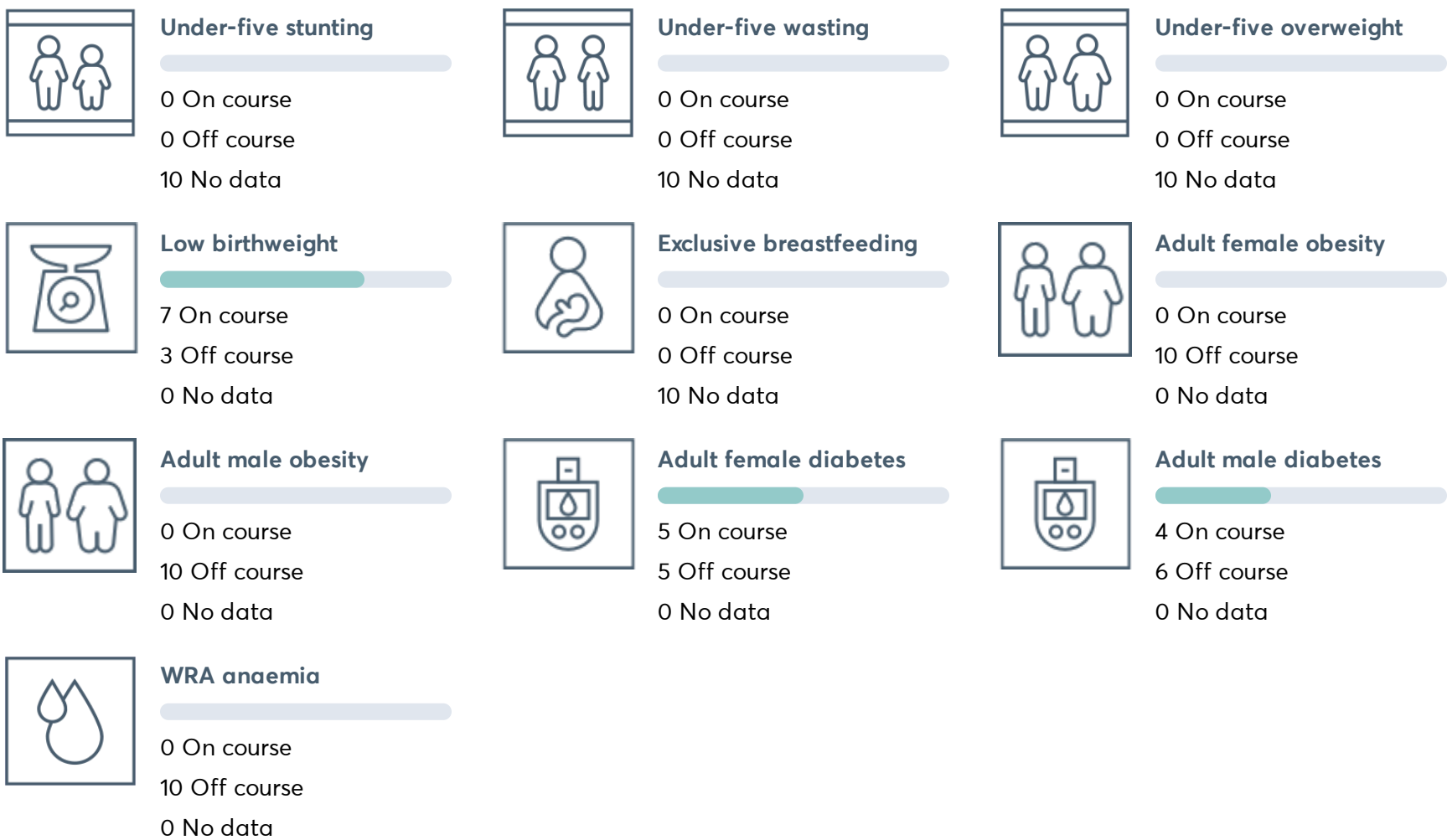
There is also insufficient data on exclusive breastfeeding among infants, while the subregion's average low birth weight prevalence of 5.9% is less than the global average of 14.6%.

The Northern Europe subregion's adult population face a malnutrition burden. An average of 16% of women of reproductive age have anaemia, and 6.6% of adult men suffer from diabetes, compared to 4.8% of women. Meanwhile, 25.9% of women and 25.6% 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

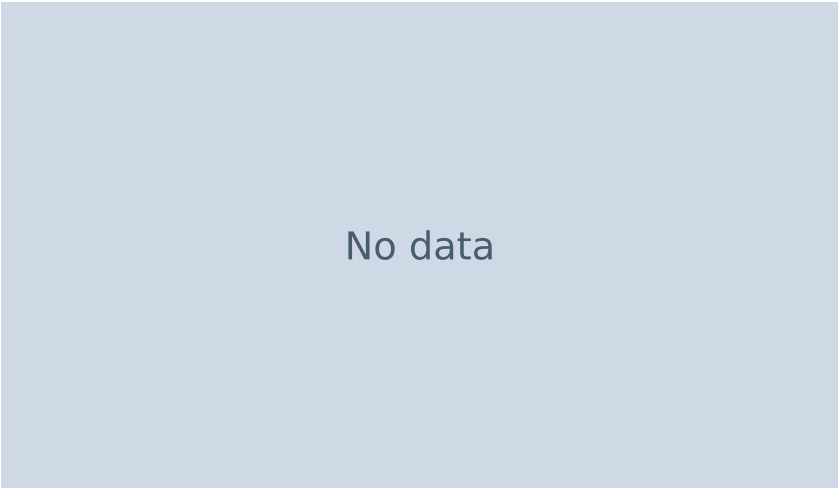


Sources: UNICEF global databases Infant and Young Child Feeding, UNICEF/WHO/World Bank Group: Joint child malnutrition estimates, NCD Risk Factor Collaboration, WHO Global Health Observatory and Global Burden of Disease, the Institute for Health Metrics and Evaluation.

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

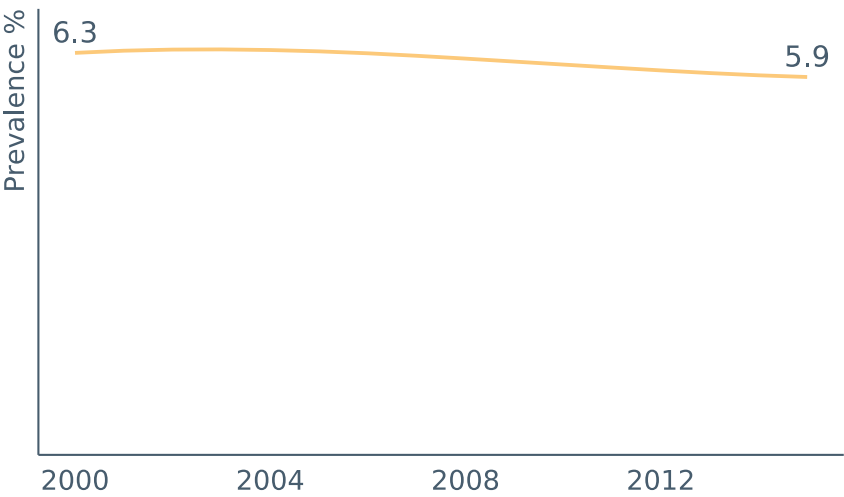
### Coexistence of wasting, stunting and overweight



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.

### Low birth weight



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

Notes: Based on population weighted means of 10 countries.

Child (under-five) nutrition status

Wasting by gender



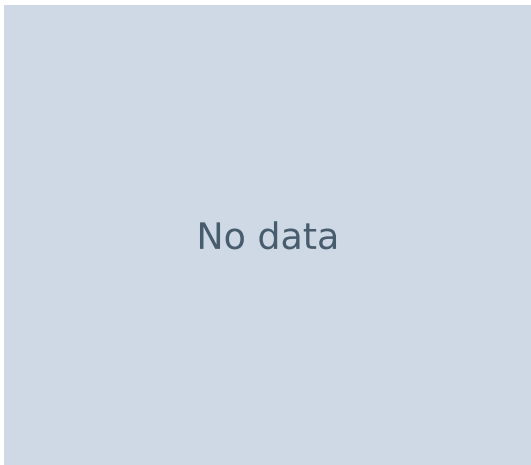
Stunting by gender



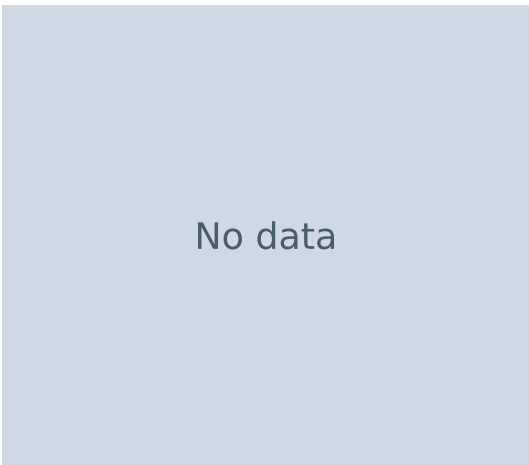
Overweight by gender



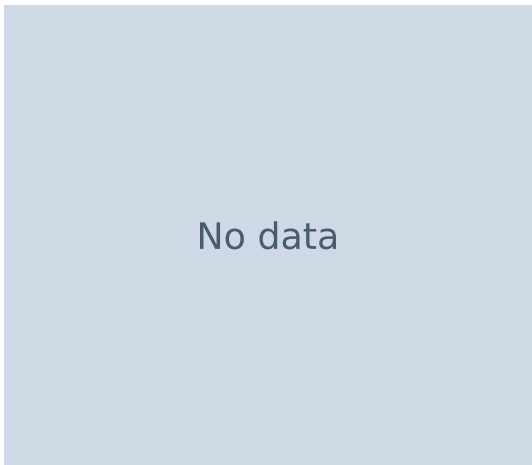
Wasting by location



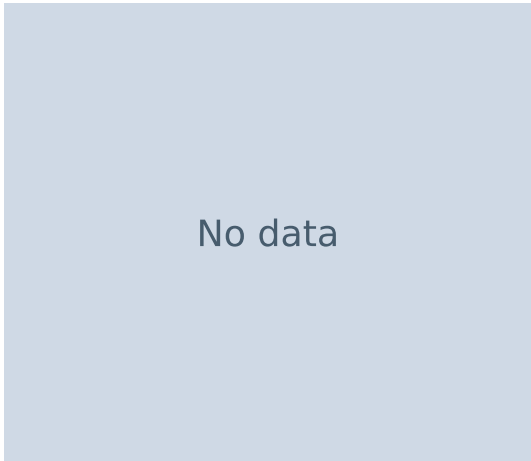
Stunting by location



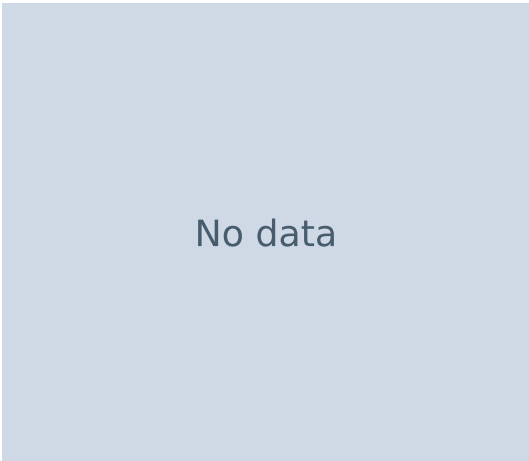
Overweight by location



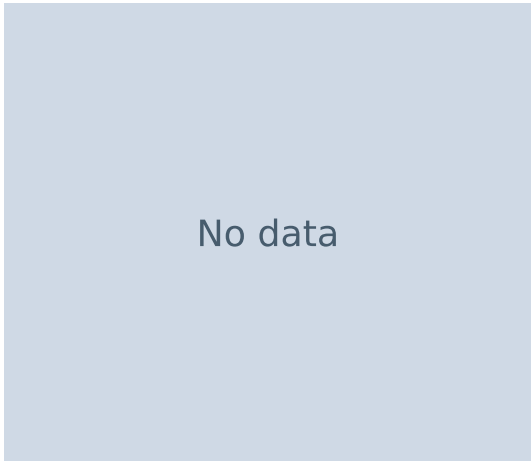
Wasting by income



Stunting by income



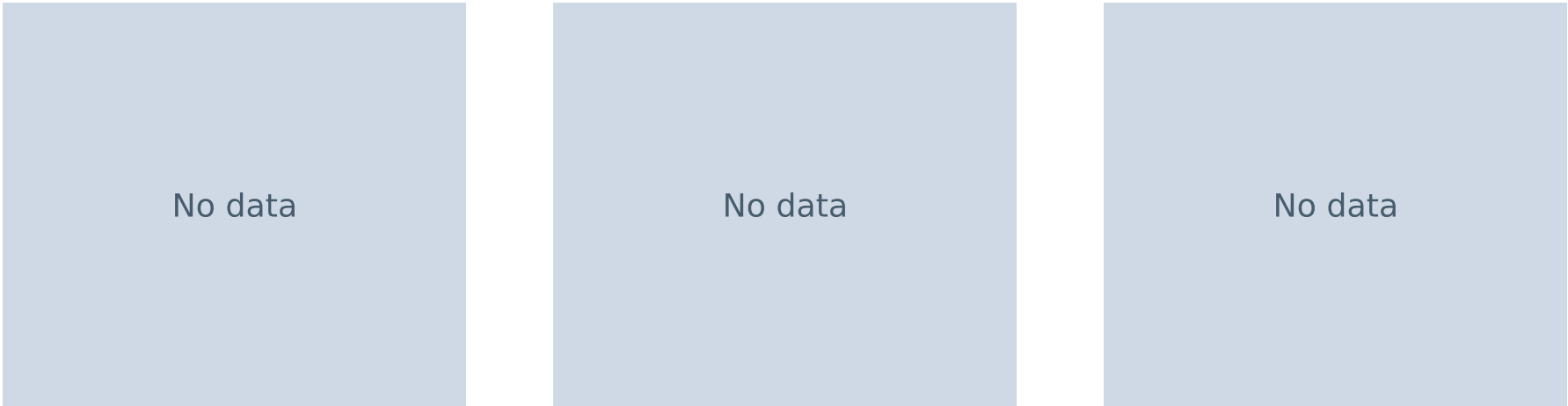
Overweight by income



Wasting by education

Stunting by education

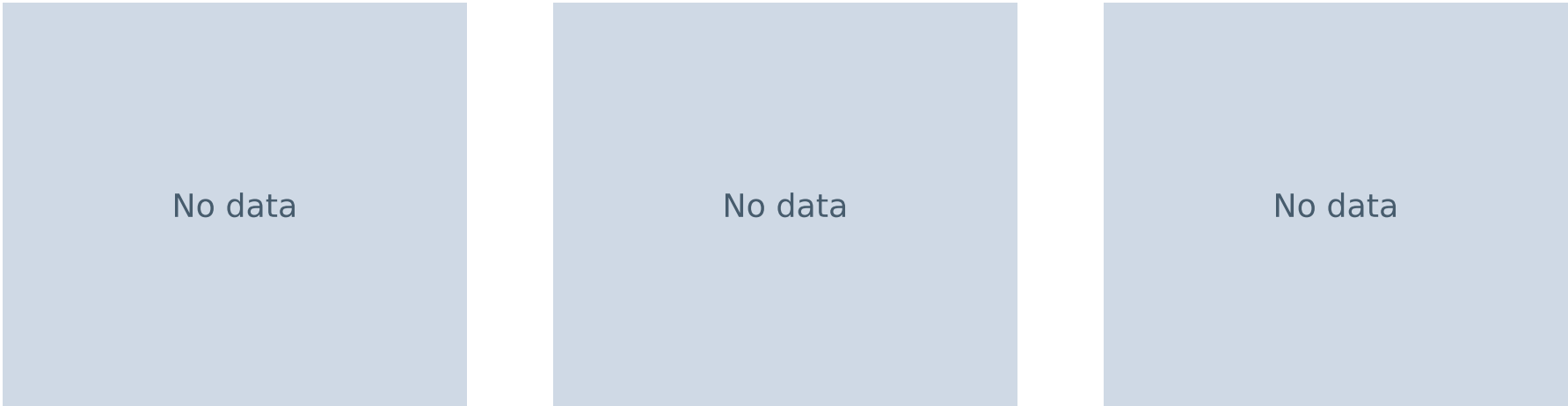
Overweight by education



Wasting by age

Stunting by age

Overweight by age



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

Notes: Regional figures are from UNICEF, Division of Data Research and Policy (2019) where available and are aggregated otherwise.

# Infant and young child feeding over time

Exclusive  
breastfeeding by  
gender



Continued  
breastfeeding at 1  
year by gender



Minimum  
acceptable diet by  
gender



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



Exclusive  
breastfeeding by  
location



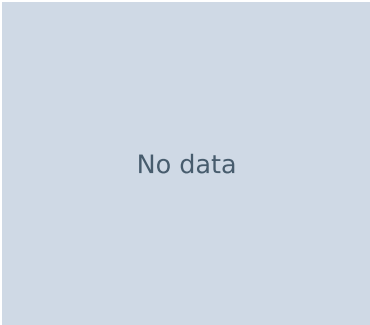
Continued  
breastfeeding at 1  
year by location



Minimum  
acceptable diet by  
location



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



Exclusive  
breastfeeding by  
income



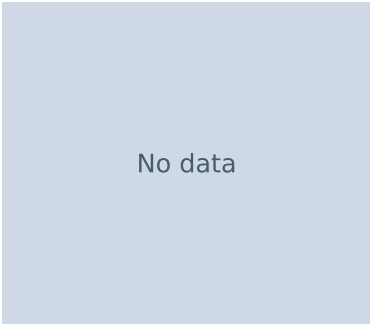
Continued  
breastfeeding at 1  
year by income



Minimum  
acceptable diet by  
income



Introduction to  
solid, semi-solid  
or 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	Introduction to solid, semi-solid or soft foods by mother's education
No data	No data	No data	No data
Exclusive breastfeeding by age	Continued breastfeeding at 1 year by age	Minimum acceptable diet by age	Introduction to solid, semi-solid or soft foods by age
No data	No data	No data	No data

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

Notes: Regional figures are from UNICEF, Division of Data Research and Policy (2019) where available and are aggregated otherwise.

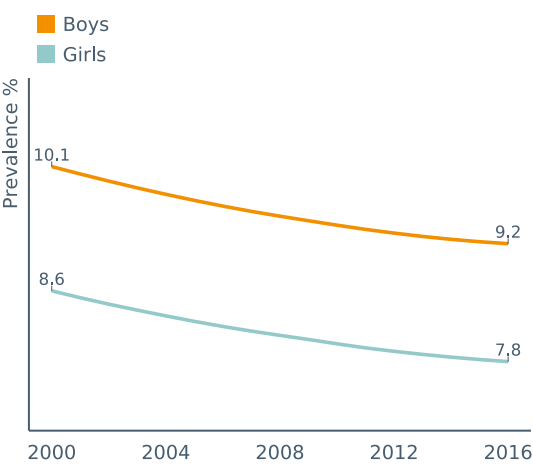
## Infant and young child feeding

No data	No data
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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

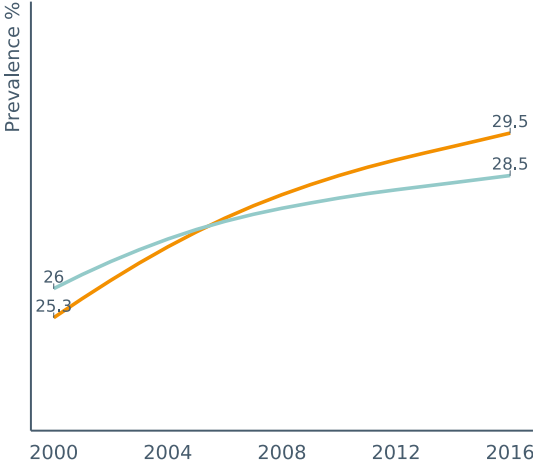
## Underweight by gender



Sources: NCD Risk Factor Collaboration.

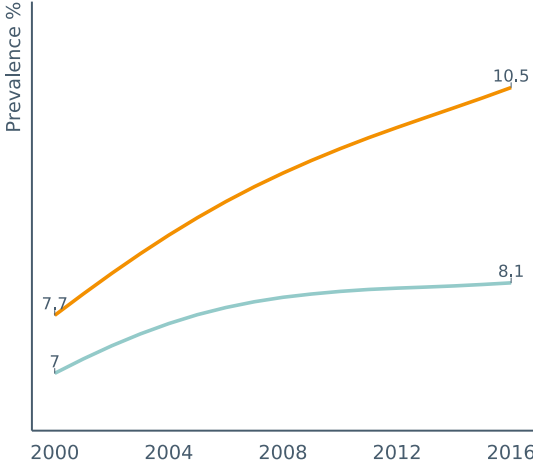
Notes: Based on population weighted means of 10 countries.

## Overweight by gender



Notes: Based on population weighted means of 10 countries.

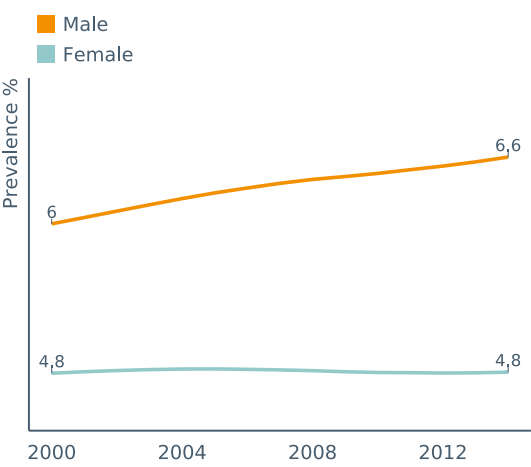
## Obesity by gender



Notes: Based on population weighted means of 10 countries.

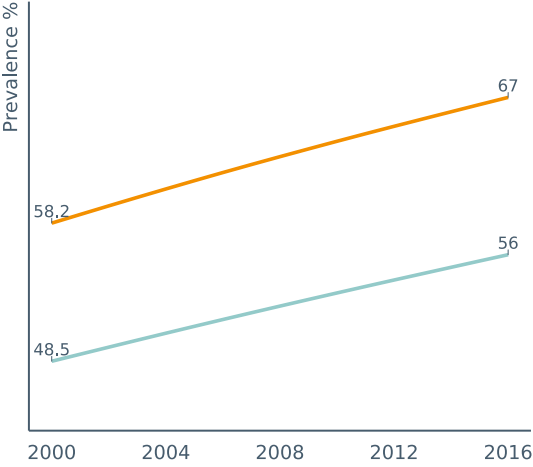
# Adult nutrition status

## Diabetes by gender



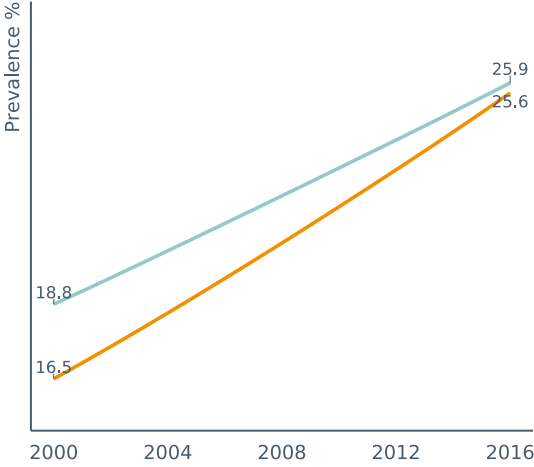
Sources: NCD Risk Factor Collaboration.  
Notes: Based on population weighted means of 10 countries.

## Overweight by gender



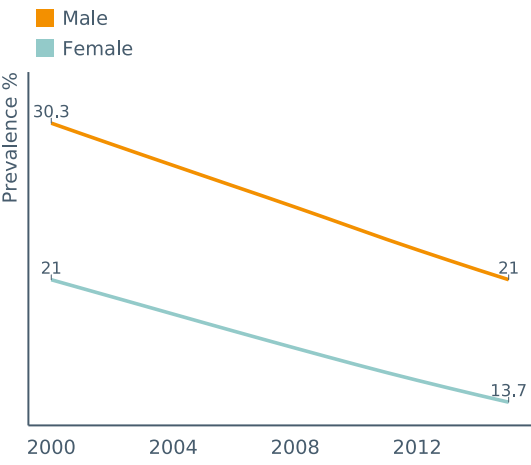
Notes: Based on population weighted means of 10 countries.

## Obesity by gender



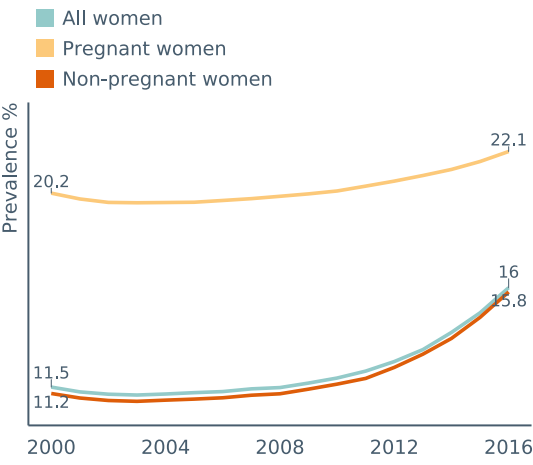
Notes: Based on population weighted means of 10 countries.

## Raised blood pressure by gender



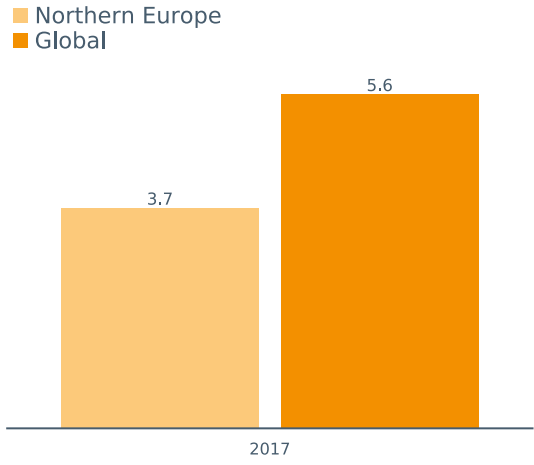
Sources: NCD Risk Factor Collaboration.  
Notes: Based on population weighted means of 10 countries.

## Anaemia in WRA



Source: WHO Global Health Observatory.  
Notes: WRA = women of reproductive age. Based on population weighted means of 10 countries.

## Sodium intake (grams per day)

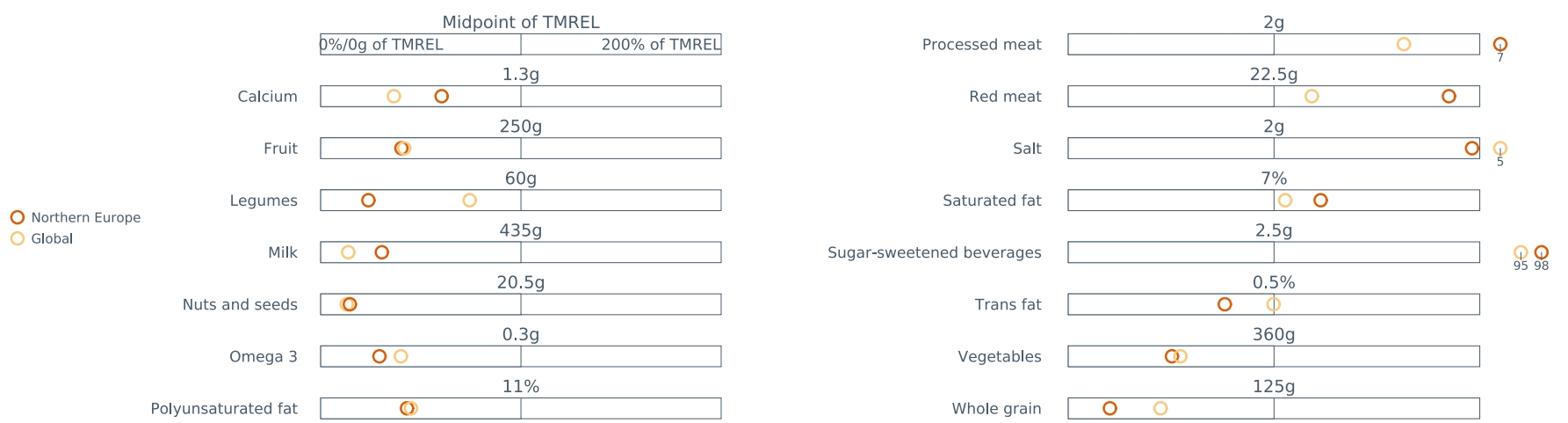


Source: Global Burden of Disease, the Institute for Health Metrics and Evaluation.  
Notes: Based on population weighted means of 10 countries.



# Dietary needs

## Consumption of food groups and components, 2016



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. Based on population weighted means of 10 countries.

# 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.

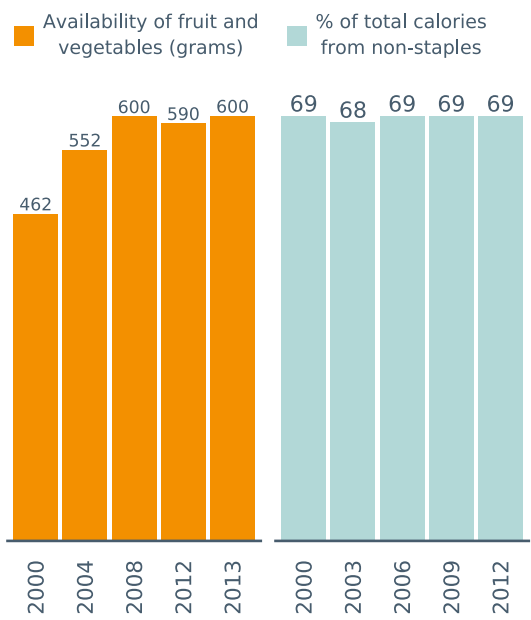
# Determinants

## Undernourishment



Source: FAOSTAT 2018.

## Food supply



Source: FAOSTAT 2018.

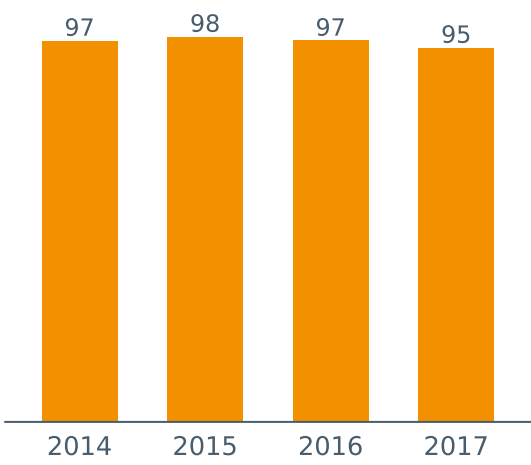
## Gender-related determinants

Early childbearing births by age 18 (%) <sup>1</sup>	No data	No data
Gender Inequality Index (score <sup>*</sup> ) <sup>2</sup>	0.1	2017
Gender Inequality Index (country rank) <sup>2</sup>	20	2017

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

Notes: <sup>\*</sup> 0 = low inequality, 1 = high inequality. Based on population weighted means of 10 countries.

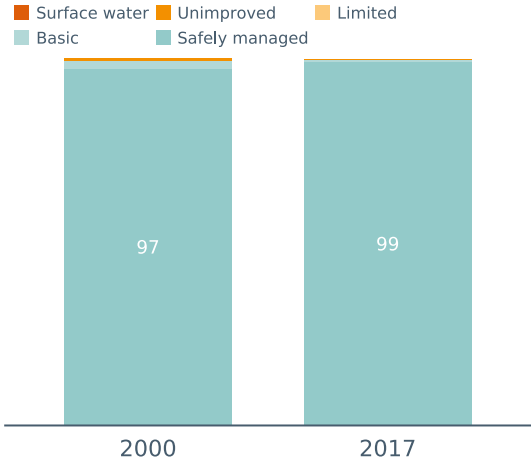
## Female secondary education enrolment (net, % population)



Source: UNESCO Institute for Statistics 2018.

Notes: Based on population weighted means of between 2 and 10 countries.

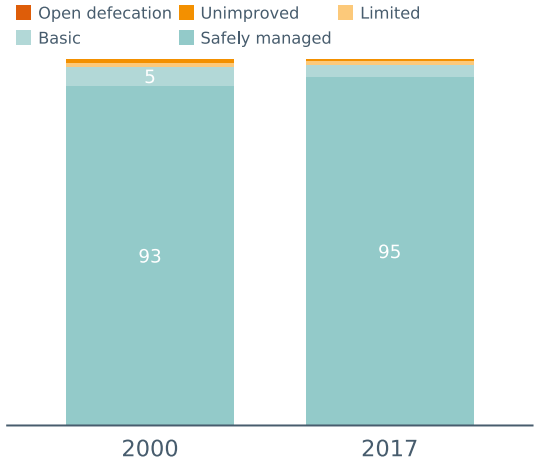
## Drinking water coverage (% population)



Source: WHO/UNICEF Joint Monitoring Programme 2019.

Notes: Based on population weighted means of 10 countries.

## Sanitation coverage (% population)



Source: WHO/UNICEF Joint Monitoring Programme 2019.

Notes: Based on population weighted means of 10 countries.

# 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	2/10
Sugar-sweetened beverage tax	6/10
Food-based dietary guidelines	9/10
Policy to reduce salt consumption	9/10
Operational policy, strategy or action plan to reduce unhealthy diet related to NCDs	9/10
Operational, multisectoral national NCD policy, strategy or action plan	6/10
Operational policy, strategy or action plan for diabetes	7/10
Policy to reduce the impact on children of marketing of foods and beverages high in saturated fats, trans-fatty acids, free sugars or salt	9/10
Policy to limit saturated fatty acids and virtually eliminate industrially produced trans-fats	9/10

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

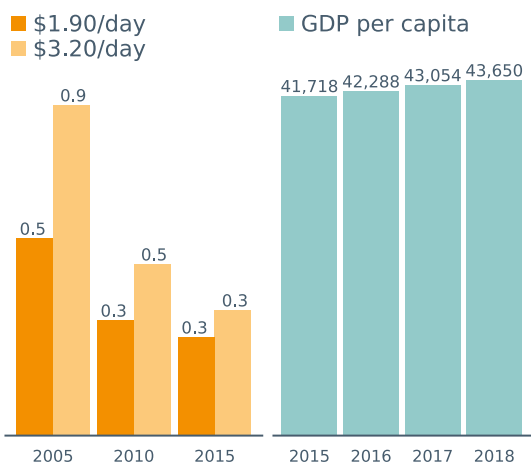
Stunting	Anaemia
0/10	1/10
Low birth weight	Child overweight
0/10	10/10
Exclusive breastfeeding	Wasting
4/10	0/10
Salt intake	Overweight adults and adolescents
6/10	10/10
Multisectoral comprehensive nutrition plan	
2/10	

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

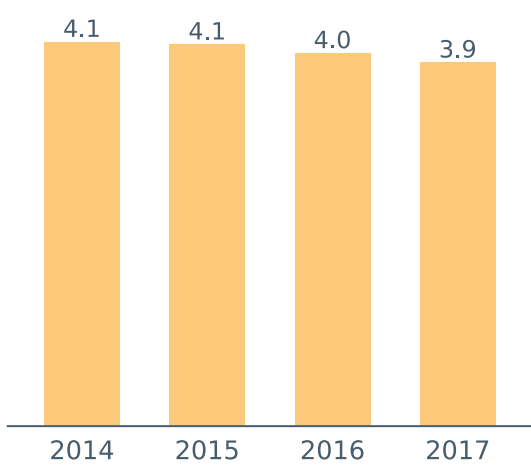
## Poverty rates (%) and GDP (PPP\$)



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

Notes: PPP = purchasing power parity. Based on population weighted means of 10 countries.

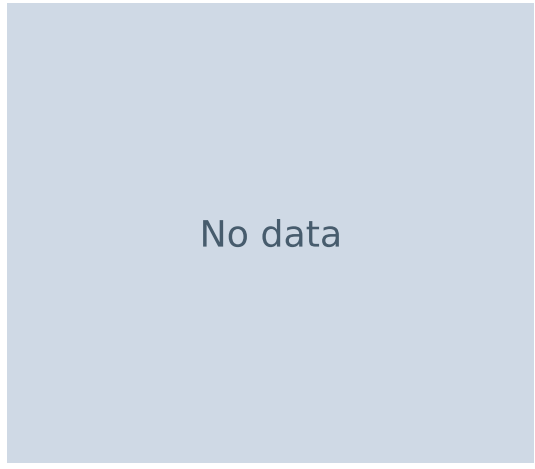
## Under-five mortality (per 1,000 live births)



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

Notes: Based on population weighted means of 10 countries.

## 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 (120).

## Population

Population (thousands)	44,513	2018
Under-five population (thousands)	6,110	2019
Rural (%)	18	2018
>65 years (thousands)	19,845	2019

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

Notes: Based on population weighted means of 10 countries.

## Population density of health workers per 1,000 people

Physicians	3.17	2016
Nurses and midwives	10.14	2016
Community health workers	0.03	2016

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

Notes: Based on population weighted means of between 1 and 10 countries.