

Regional overview

Malnutrition burden

In the Europe region, there has been some progress towards achieving global nutrition targets. The global target for female diabetes has 17 countries on course to meet it, low birth weight has 11 countries on course, male diabetes has five countries on course, under-five wasting has three countries on course, while under-five overweight and under-five stunting each have two countries on course. However, not a single country in the region is on course to meet the targets for infant exclusive breastfeeding, anaemia in women of reproductive age, male obesity, and female obesity. 41 countries in the region have insufficient data to comprehensively assess their progress towards these global targets.

The Europe region has no prevalence data available for under-five overweight, stunting, or wasting.

There is also insufficient data on exclusive breastfeeding among infants, while the region's average low birth weight prevalence of 6.5% is less than the global average of 14.6%.

The Europe region's adult population face a malnutrition burden. An average of 20% of women of reproductive age have anaemia, and 7.2% of adult men have diabetes, compared to 5.7% of women. Meanwhile, 23.3% of women and 22.2% 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



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



No data

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



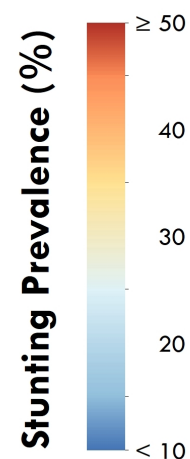
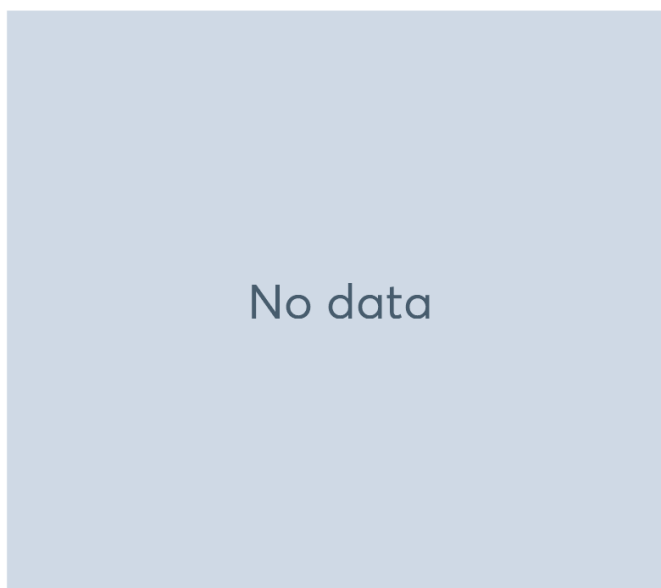
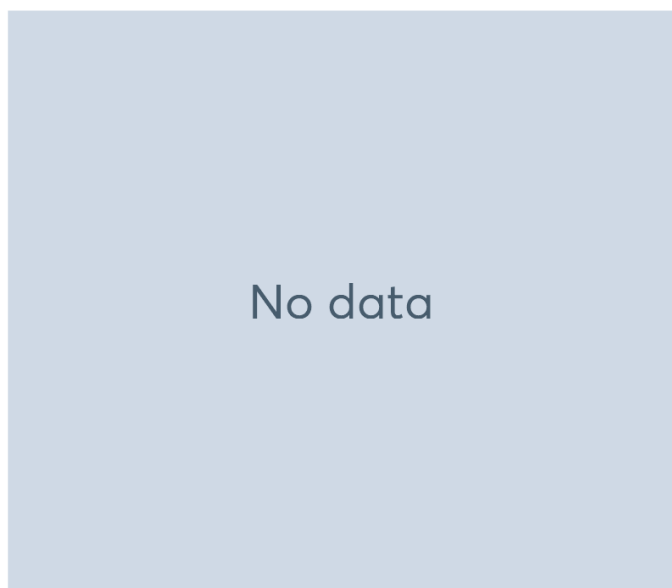
No data

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 sex

Stunting by sex

Overweight by sex

No data

No data

No data

Wasting by location

Stunting by location

Overweight by location

No data

No data

No data

Wasting by income

Stunting by income

Overweight by income

No data

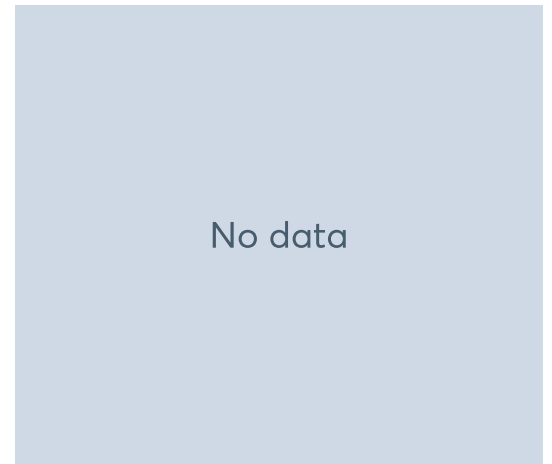
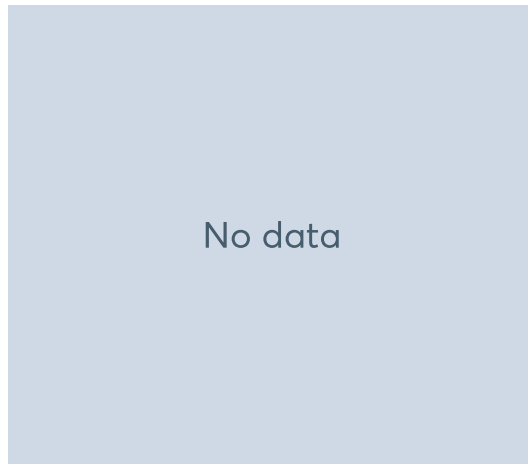
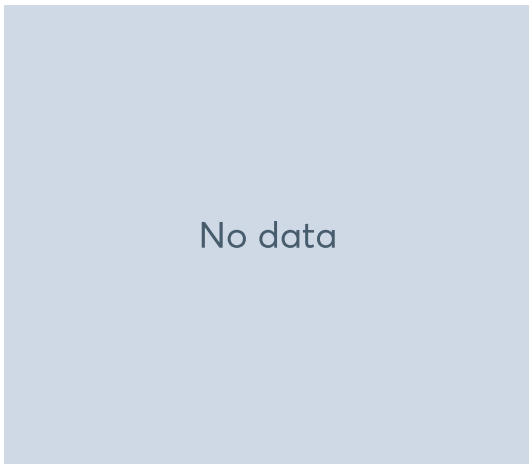
No data

No data

Wasting by mother's education

Stunting by mother's education

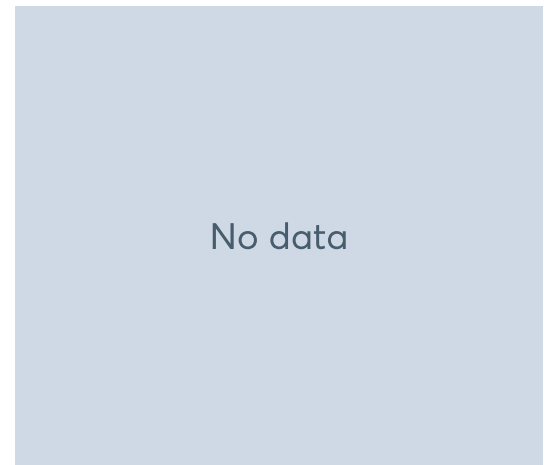
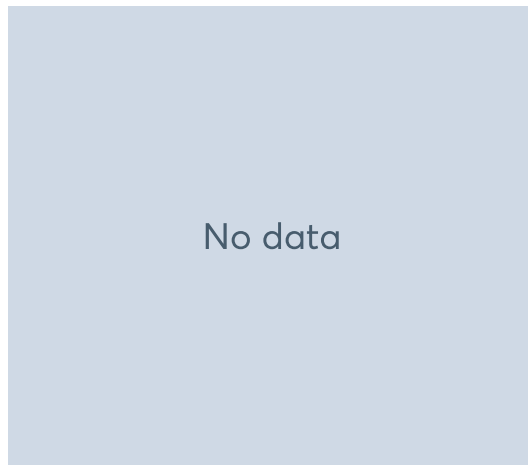
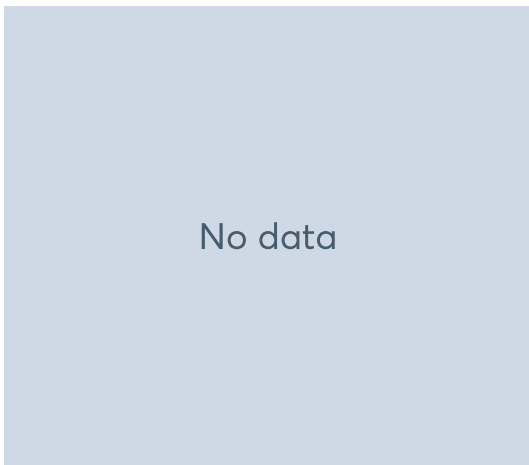
Overweight by mother's education



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.

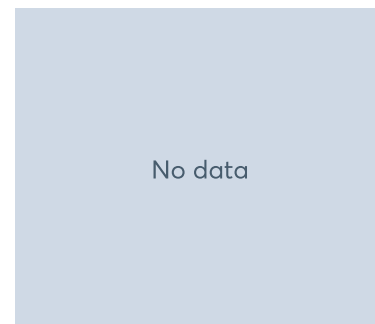
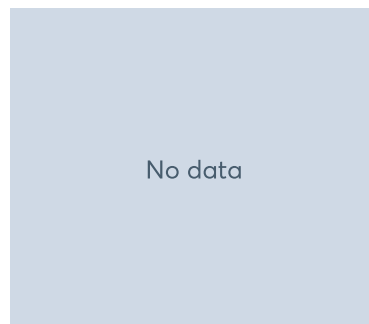
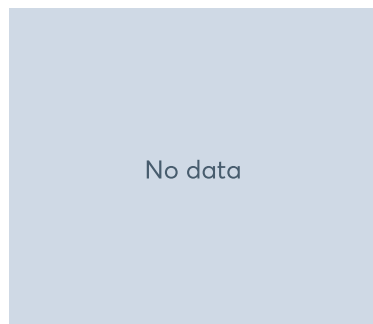
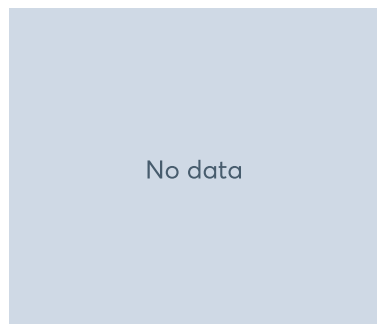
Infant and young child feeding over time

Exclusive
breastfeeding by
sex

Continued
breastfeeding at 1
year by sex

Minimum
acceptable diet by
sex

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

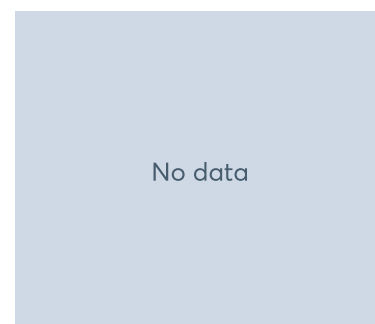
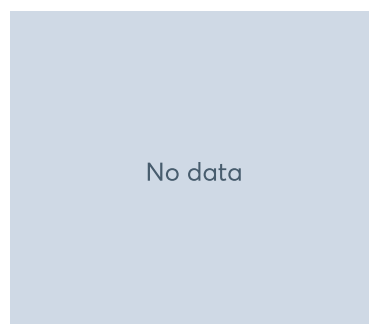
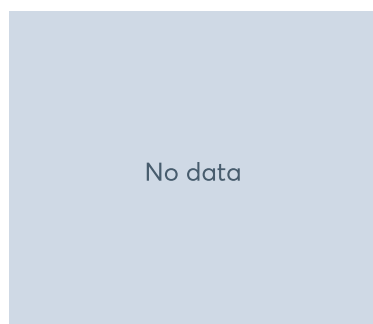
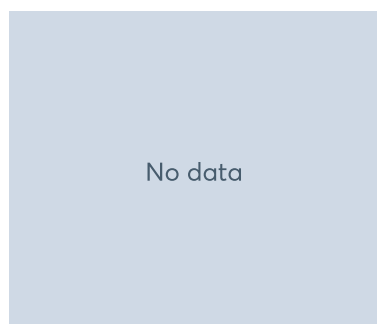


Exclusive
breastfeeding by
location

Continued
breastfeeding at 1
year by location

Minimum
acceptable diet by
location

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

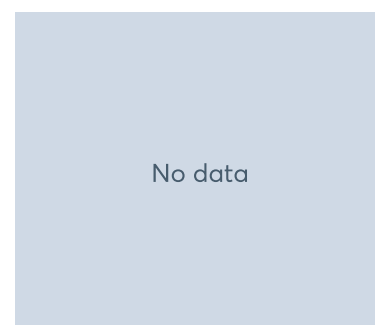
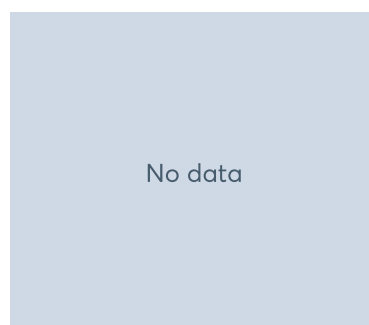
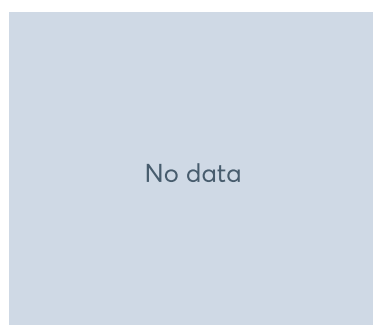
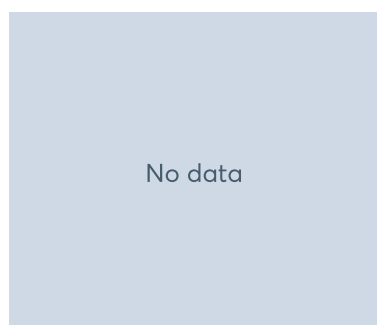


Exclusive
breastfeeding by
income

Continued
breastfeeding at 1
year by income

Minimum
acceptable diet by
income

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

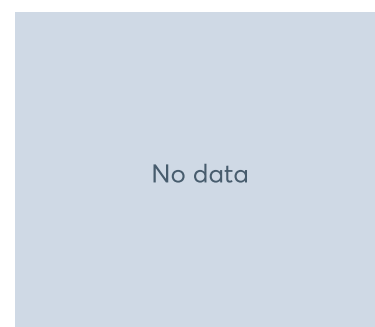
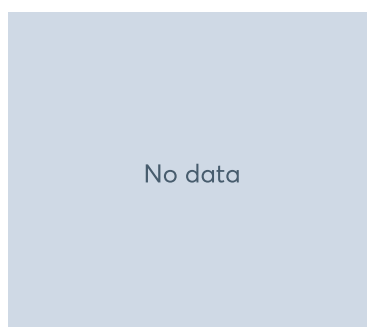
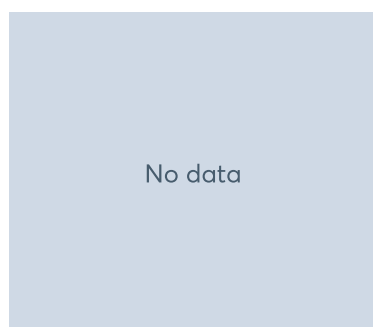
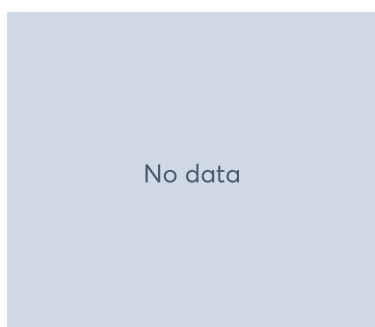


Exclusive breastfeeding by mother's education

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

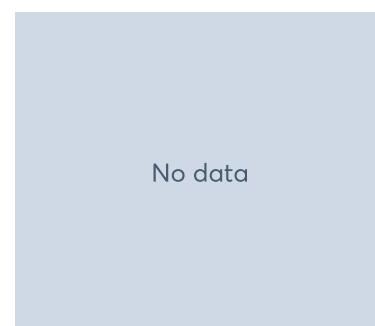
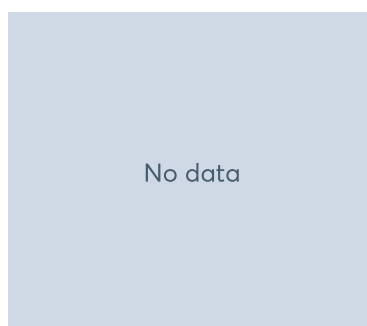
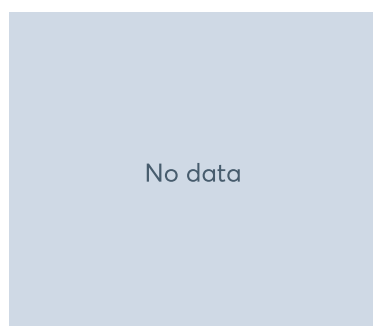
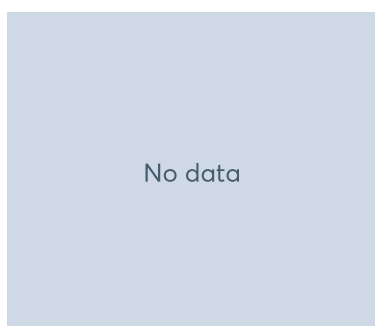


Exclusive breastfeeding by age

Continued breastfeeding at 1 year by age

Minimum acceptable diet by age

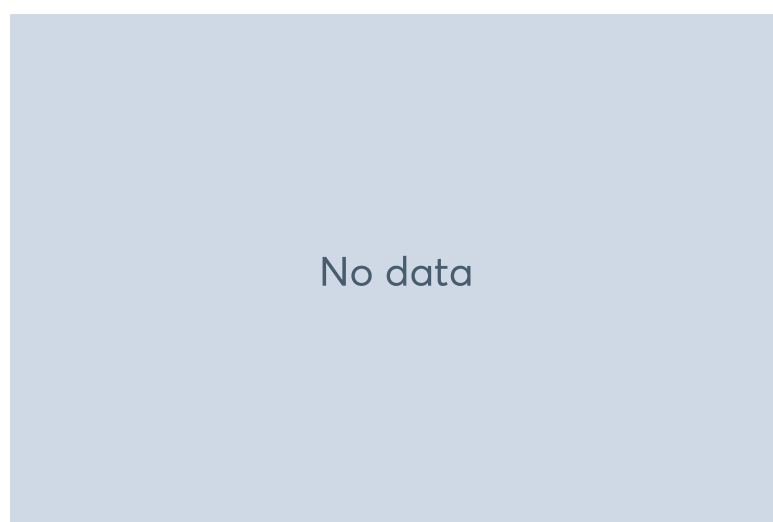
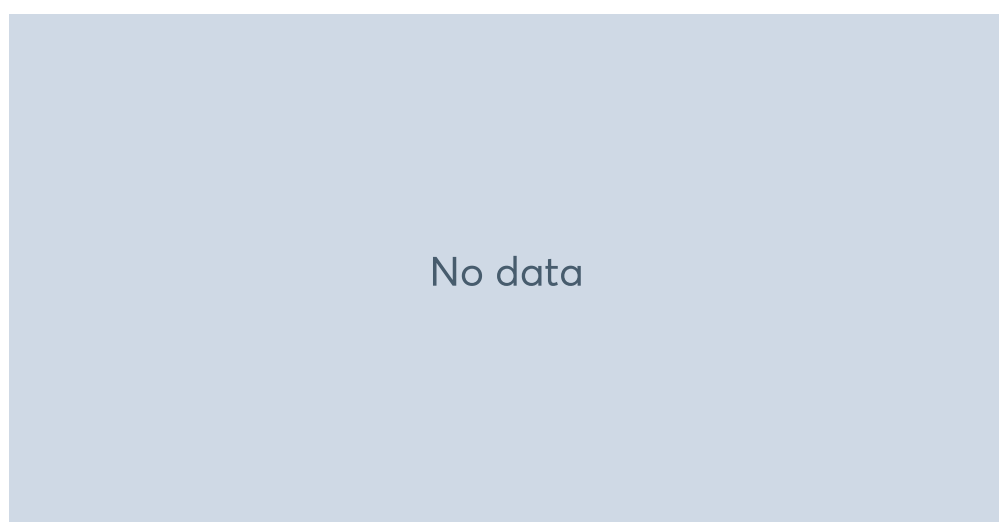
Intro. to solid, semi-solid, soft foods by age



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

Notes: 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.

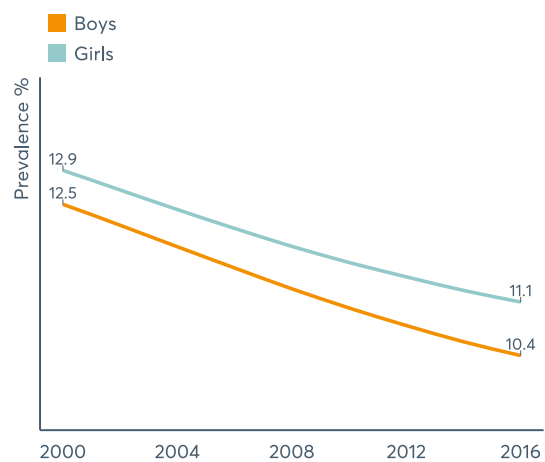
Infant and young child feeding



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.

Child and adolescent (aged 5-19) nutrition status

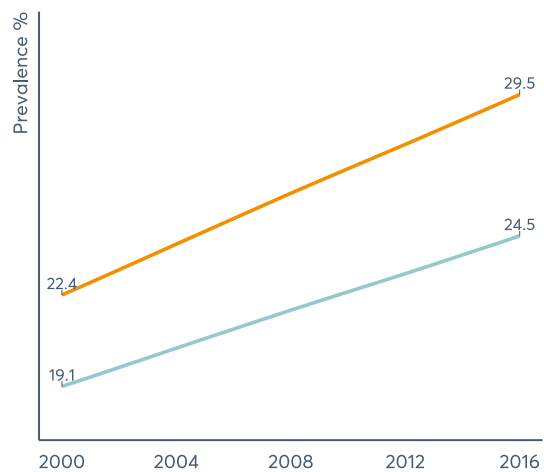
Underweight by sex



Sources: NCD Risk Factor Collaboration.

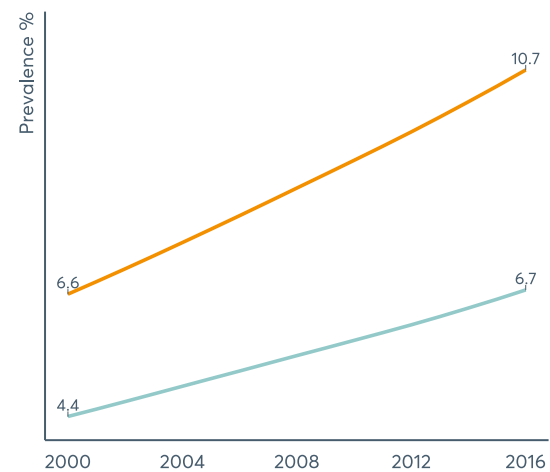
Notes: Based on population weighted means of 40 countries.

Overweight by sex



Notes: Based on population weighted means of 40 countries.

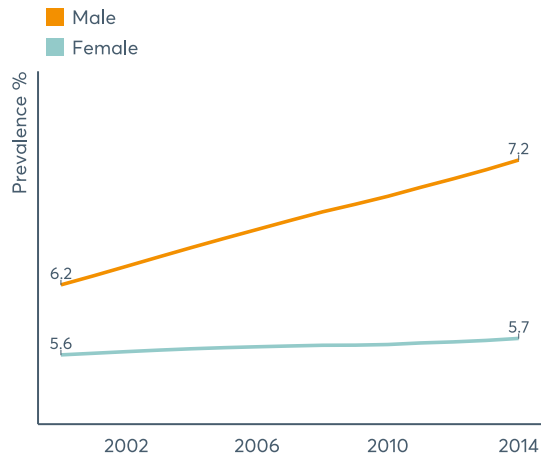
Obesity by sex



Notes: Based on population weighted means of 40 countries.

Adult nutrition status

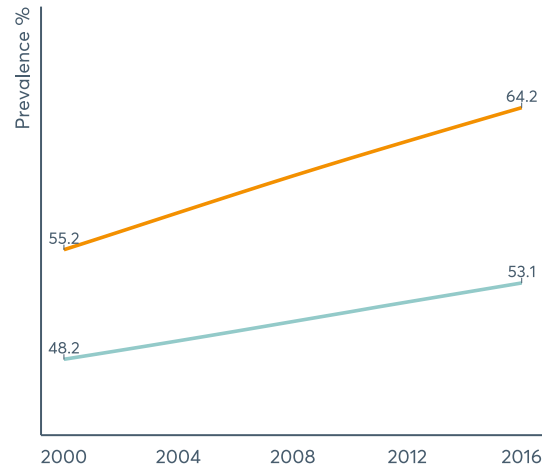
Diabetes by sex



Sources: NCD Risk Factor Collaboration.

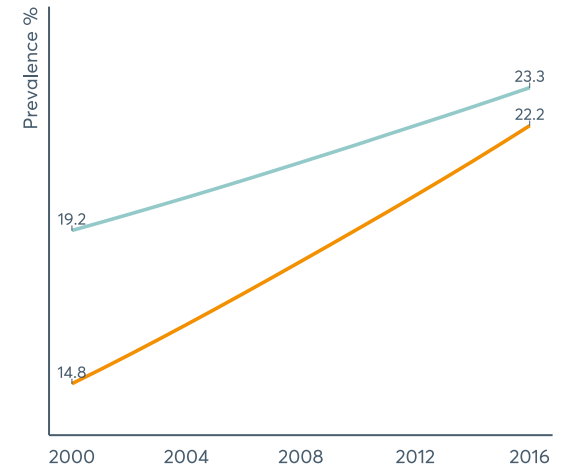
Notes: Based on population weighted means of 40 countries.

Overweight by sex



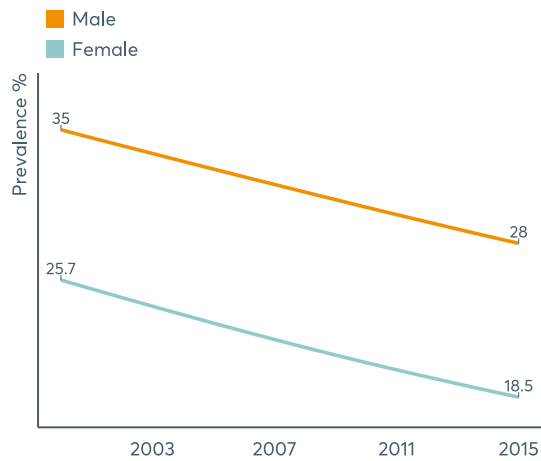
Notes: Based on population weighted means of 40 countries.

Obesity by sex



Notes: Based on population weighted means of 40 countries.

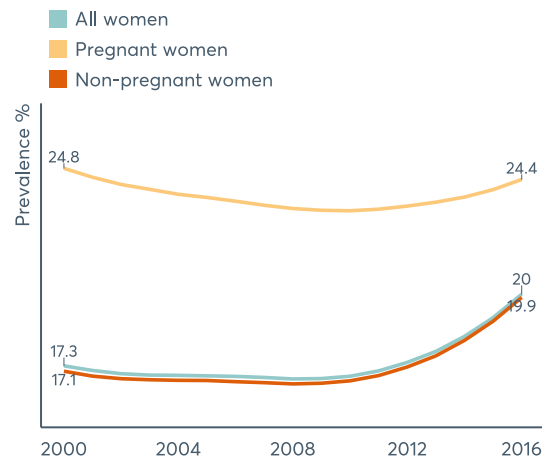
Raised blood pressure by sex



Sources: NCD Risk Factor Collaboration.

Notes: Based on population weighted means of 40 countries.

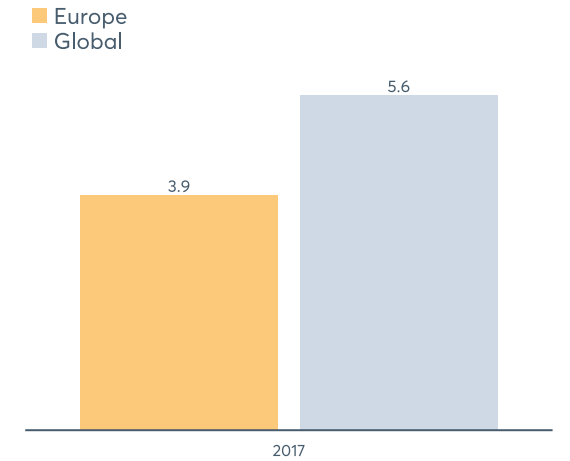
Anaemia in WRA



Source: WHO Global Health Observatory.

Notes: WRA = women of reproductive age. Based on population weighted means of 40 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 40 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 40 countries.

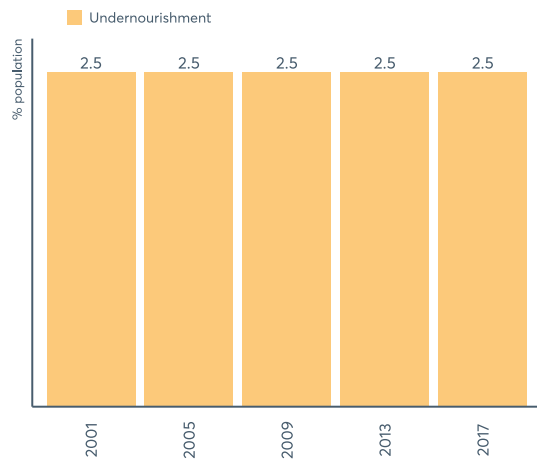
Intervention coverage

| 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 |

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

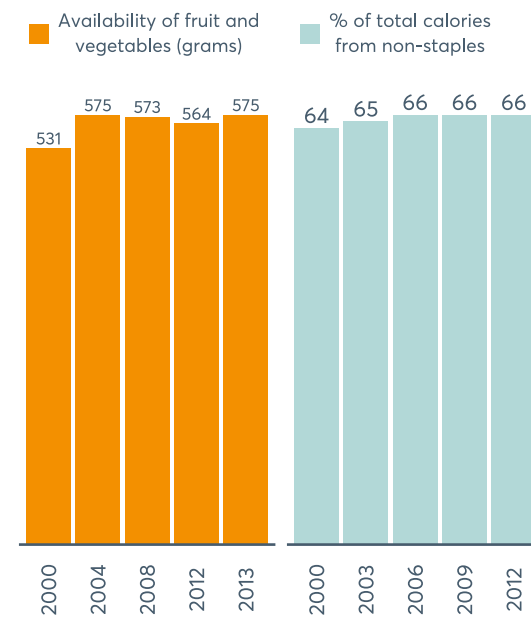
Determinants

Undernourishment



Source: FAOSTAT 2018.

Food supply



Source: FAOSTAT 2018.

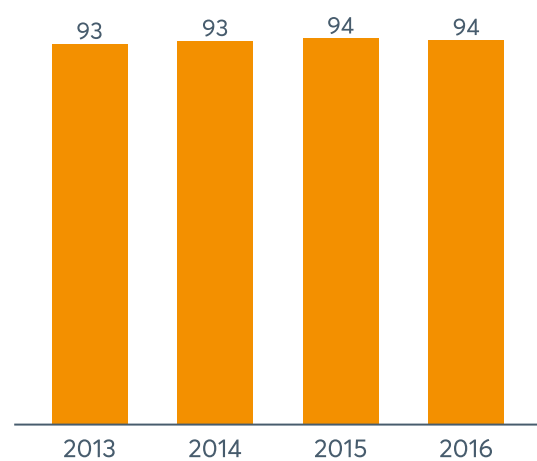
Gender-related determinants

| | | |
|--|----|----|
| Early childbearing births by age 18 (%) 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.

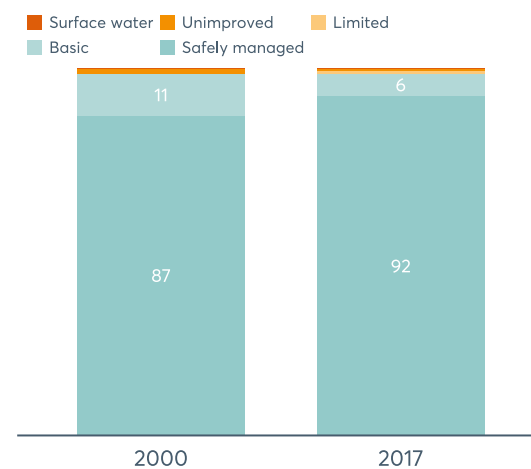
Female secondary education enrolment (net, % population)



Source: UNESCO Institute for Statistics 2018.

Notes: Based on population weighted means of between 24 and 33 countries.

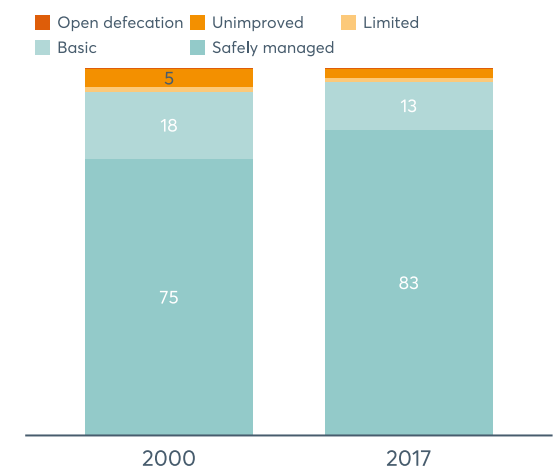
Drinking water coverage (% population)



Source: WHO/UNICEF Joint Monitoring Programme 2019.

Notes: Based on population weighted means of between 40 and 43 countries.

Sanitation coverage (% population)

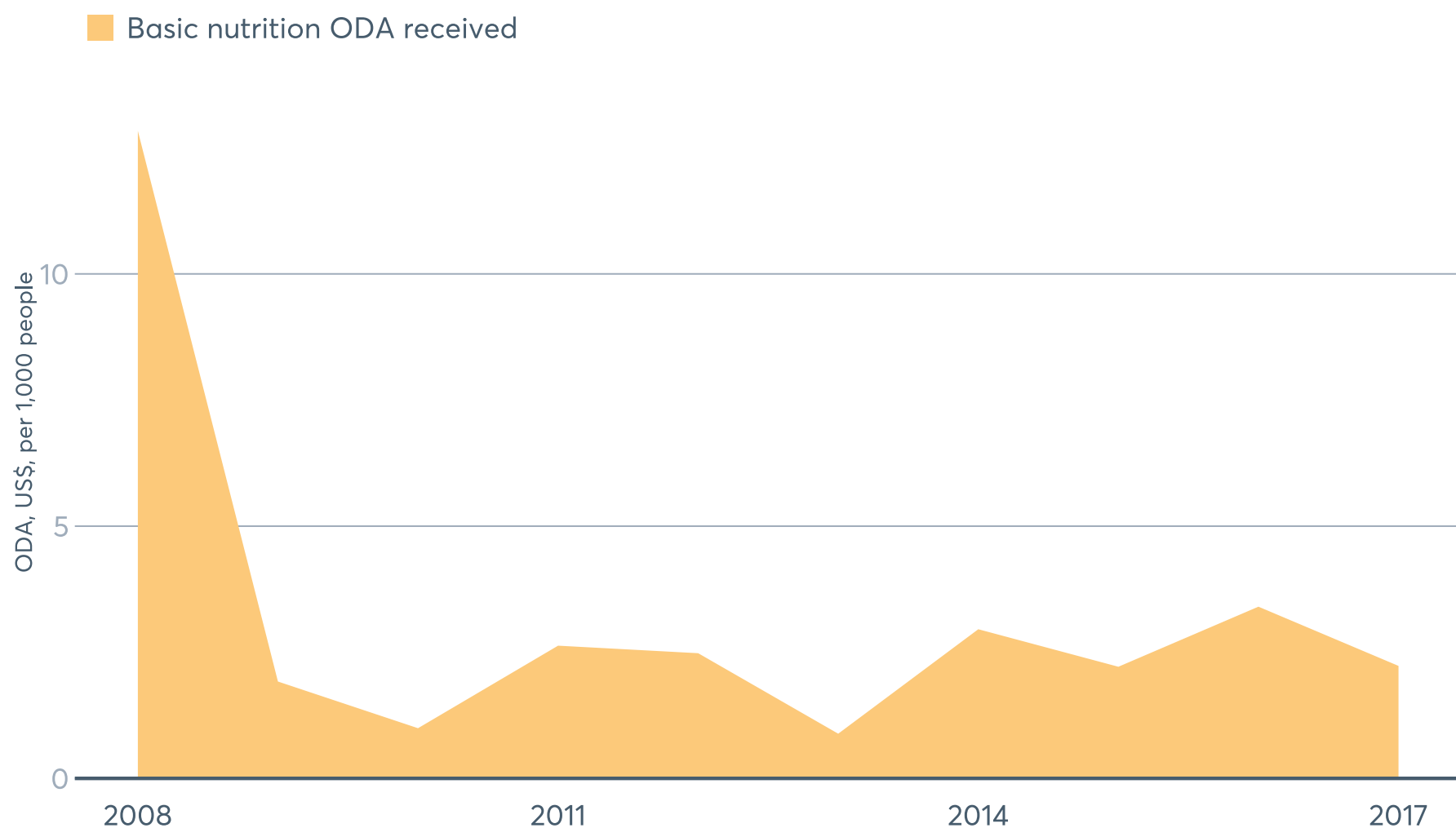


Source: WHO/UNICEF Joint Monitoring Programme 2019.

Notes: Based on population weighted means of between 39 and 43 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 | 17/42 |
| Sugar-sweetened beverage tax | 11/42 |
| Food-based dietary guidelines | 29/42 |
| Policy to reduce salt consumption | 30/42 |
| Operational policy, strategy or action plan to reduce unhealthy diet related to NCDs | 39/42 |
| Operational, multisectoral national NCD policy, strategy or action plan | 27/42 |
| Operational policy, strategy or action plan for diabetes | 36/42 |
| Policy to reduce the impact on children of marketing of foods and beverages high in saturated fats, trans-fatty acids, free sugars or salt | 27/42 |
| Policy to limit saturated fatty acids and virtually eliminate industrially produced trans-fats | 25/42 |

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

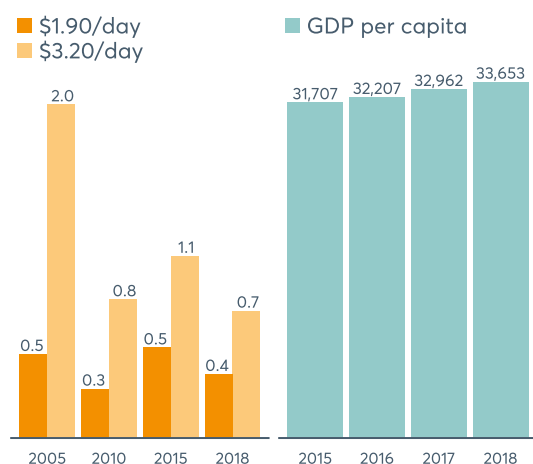
| | |
|--|-----------------------------------|
| Stunting | Anaemia |
| 5/42 | 4/42 |
| Low birth weight | Child overweight |
| 7/42 | 36/42 |
| Exclusive breastfeeding | Wasting |
| 12/42 | 4/42 |
| Salt intake | Overweight adults and adolescents |
| 23/42 | 39/42 |
| Multisectoral comprehensive nutrition plan | |
| 18/42 | |

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

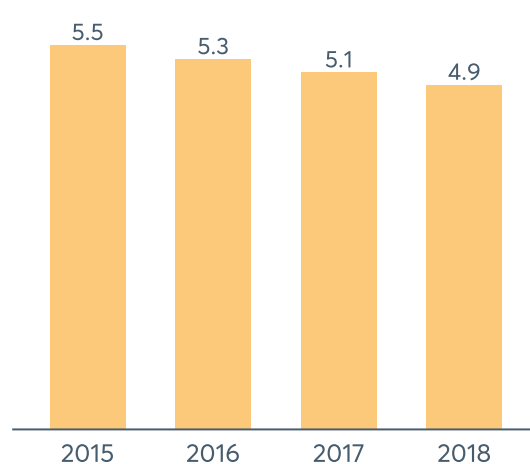
Poverty rates (%) and GDP (PPP\$)



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

Notes: PPP = purchasing power parity. Based on population weighted means of between 39 and 40 countries.

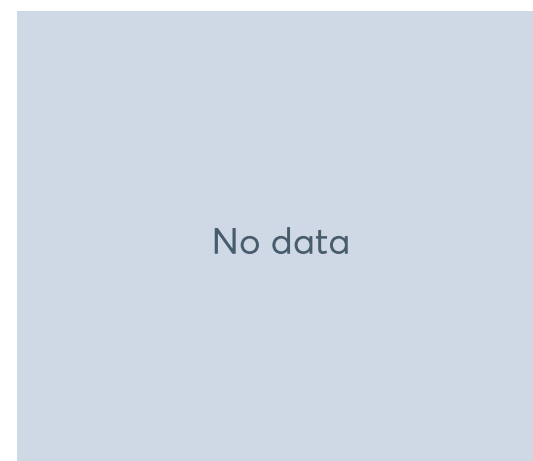
Under-five mortality (per 1,000 live births)



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

Notes: Based on population weighted means of 42 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 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

| | | |
|-----------------------------------|---------|------|
| Population (thousands) | 744,405 | 2018 |
| Under-five population (thousands) | 39,393 | 2019 |
| Rural (%) | 25 | 2018 |
| >65 years (thousands) | 140,408 | 2019 |

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

Notes: Based on population weighted means of 43 countries.

Population density of health workers per 1,000 people

| | | |
|--------------------------|---------|---------|
| Physicians | 3.6 | 2016 |
| Nurses and midwives | 8.76 | 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 42 countries.