Subregional overview

Malnutrition burden

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

Although it performs relatively well against other subregions, Middle Africa still experiences a malnutrition burden among its under-five population. The average prevalence of overweight in under-fives is 4.6%, this is less than the global average of 5.9%. The prevalence of stunting in under-fives is 32.1% - the second highest compared to other subregions in Africa. The prevalence of wasting in under-fives is 7.2%, this is less than the global average of 7.3%.

Some 37.4% of infants under 6 months in the Middle Africa subregion are exclusively breastfed, while the subregion’s average low birth weight prevalence of 12.5% is less than the global average of 14.6%.

The Middle Africa subregion’s adult population also face a malnutrition burden. An average of 43.6% of women of reproductive age have anaemia, and 7% of adult men have diabetes, compared to 6.7% of women. Meanwhile, 11.4% of women and 4.1% of men have obesity.


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

Progress against global nutrition targets 2019

- **Under-five stunting**
  - 1 On course
  - 4 Off course
  - 4 No data

- **Under-five wasting**
  - 2 On course
  - 4 Off course
  - 3 No data

- **Under-five overweight**
  - 3 On course
  - 2 Off course
  - 4 No data

- **Low birthweight**
  - 0 On course
  - 7 Off course
  - 2 No data

- **Exclusive breastfeeding**
  - 4 On course
  - 1 Off course
  - 4 No data

- **Adult female obesity**
  - 0 On course
  - 9 Off course
  - 0 No data
<table>
<thead>
<tr>
<th>Health Indicator</th>
<th>Adult Male Obesity</th>
<th>Adult Female Diabetes</th>
<th>Adult Male Diabetes</th>
<th>WRA Anaemia</th>
</tr>
</thead>
<tbody>
<tr>
<td>On course</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Off course</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>No data</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>


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

![Venn Diagram showing coexistence of wasting, stunting, and overweight]

- Wasting only: 53.3%
- Stunting only: 2.7%
- Overweight only: 2.0%
- No wasting, stunting or overweight: 31.2%


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

#### Low birth weight

No data

Prevalence of under-five stunting


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

![Graph showing wasting by sex over time]

Stunting by sex

![Graph showing stunting by sex over time]

Overweight by sex

![Graph showing overweight by sex over time]

Wasting by location

![Graph showing wasting by location over time]

Stunting by location

![Graph showing stunting by location over time]

Overweight by location

![Graph showing overweight by location over time]

Wasting by income

![Graph showing wasting by income over time]

Stunting by income

![Graph showing stunting by income over time]

Overweight by income

![Graph showing overweight by income over time]

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 4 and 9 countries.
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


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 1 and 5 countries.

Infant and young child feeding


Notes: Based on population weighted means of between 1 and 5 countries.
Child and adolescent (aged 5-19) nutrition status

Underweight by sex

Sources: NCD Risk Factor Collaboration.
Notes: Based on population weighted means of 9 countries.

Overweight by sex

Notes: Based on population weighted means of 9 countries.

Obesity by sex

Notes: Based on population weighted means of 9 countries.
Adult nutrition status

Diabetes by sex

Sources: NCD Risk Factor Collaboration.
Notes: Based on population weighted means of 9 countries.

Overweight by sex

Notes: Based on population weighted means of 9 countries.

Obesity by sex

Notes: Based on population weighted means of 9 countries.

Raised blood pressure by sex

Sources: NCD Risk Factor Collaboration.
Notes: Based on population weighted means of 9 countries.

Anaemia in WRA

Source: WHO Global Health Observatory.
Notes: WRA = women of reproductive age. Based on population weighted means of 9 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 9 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 9 countries.

Intervention coverage

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

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

**Undernourishment**

<table>
<thead>
<tr>
<th>Year</th>
<th>Undernourishment</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>38.2</td>
</tr>
<tr>
<td>2001</td>
<td>32.4</td>
</tr>
<tr>
<td>2002</td>
<td>28.9</td>
</tr>
<tr>
<td>2003</td>
<td>25.1</td>
</tr>
<tr>
<td>2004</td>
<td>21.6</td>
</tr>
</tbody>
</table>

Source: FAOSTAT 2018.

**Food supply**

- **Availability of fruit and vegetables (grams)**
  - 2000: 2487
  - 2004: 2628
  - 2008: 2543
  - 2012: 1852

- **% of total calories from non-staples**
  - 2000: 70%
  - 2004: 77%
  - 2008: 71%
  - 2012: 70%

Source: FAOSTAT 2018.

**Gender-related determinants**

- **Early childbearing births by age 18 (%)**
  - 2000: 2487
  - 2004: 2628
  - 2008: 2543
  - 2012: 1852

- **Gender Inequality Index (score)**
  - 2000: 70
  - 2004: 77
  - 2008: 71
  - 2012: 70

- **Gender Inequality Index (country rank)**
  - 2000: 70
  - 2004: 77
  - 2008: 71
  - 2012: 70

Sources: UNICEF 2018; UNDP 2018.

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

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

No data


**Drinking water coverage (% population)**

<table>
<thead>
<tr>
<th>Year</th>
<th>Surface water</th>
<th>Unimproved</th>
<th>Limited</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>17</td>
<td>30</td>
<td>11</td>
</tr>
<tr>
<td>2017</td>
<td>28</td>
<td>28</td>
<td>13</td>
</tr>
</tbody>
</table>


Notes: Based on population weighted means of between 1 and 9 countries.

**Sanitation coverage (% population)**

<table>
<thead>
<tr>
<th>Year</th>
<th>Open defecation</th>
<th>Unimproved</th>
<th>Limited</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>21</td>
<td>37</td>
<td>16</td>
</tr>
<tr>
<td>2017</td>
<td>28</td>
<td>28</td>
<td>19</td>
</tr>
</tbody>
</table>


Notes: Based on population weighted means of between 8 and 9 countries.
Resources, policies and targets

Development assistance

![Graph showing Basic nutrition ODA received from 2008 to 2017]

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.
<table>
<thead>
<tr>
<th>National policies</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandatory legislation for salt iodisation</td>
<td>7/9</td>
</tr>
<tr>
<td>Sugar-sweetened beverage tax</td>
<td>2/9</td>
</tr>
<tr>
<td>Food-based dietary guidelines</td>
<td>0/9</td>
</tr>
<tr>
<td>Policy to reduce salt consumption</td>
<td>1/9</td>
</tr>
<tr>
<td>Operational policy, strategy or action plan to reduce unhealthy diet related to NCDs</td>
<td>4/9</td>
</tr>
<tr>
<td>Operational, multisectoral national NCD policy, strategy or action plan</td>
<td>2/9</td>
</tr>
<tr>
<td>Operational policy, strategy or action plan for diabetes</td>
<td>5/9</td>
</tr>
<tr>
<td>Policy to reduce the impact on children of marketing of foods and beverages high in saturated fats, trans-fatty acids, free sugars or salt</td>
<td>1/9</td>
</tr>
<tr>
<td>Policy to limit saturated fatty acids and virtually eliminate industrially produced trans-fats</td>
<td>1/9</td>
</tr>
</tbody>
</table>


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

<table>
<thead>
<tr>
<th>Target</th>
<th>Number of Countries with Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stunting</td>
<td>7/9</td>
</tr>
<tr>
<td>Anaemia</td>
<td>2/9</td>
</tr>
<tr>
<td>Low birth weight</td>
<td>4/9</td>
</tr>
<tr>
<td>Child overweight</td>
<td>3/9</td>
</tr>
<tr>
<td>Exclusive breastfeeding</td>
<td>6/9</td>
</tr>
<tr>
<td>Wasting</td>
<td>8/9</td>
</tr>
<tr>
<td>Salt intake</td>
<td>2/9</td>
</tr>
<tr>
<td>Overweight adults and adolescents</td>
<td>5/9</td>
</tr>
<tr>
<td>Multisectoral comprehensive nutrition plan</td>
<td>4/9</td>
</tr>
</tbody>
</table>


*Notes: Value refers to the number of countries with target.*
Economics and demography

Poverty rates (%) and GDP (PPP$)

Notes: PPP = purchasing power parity. Based on population weighted means of between 7 and 9 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 9 countries.

Government revenues ($m)

No data

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

Income inequality

<table>
<thead>
<tr>
<th>Gini index score¹</th>
<th>Gini index rank²</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Population (thousands)</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>169,122</td>
<td>2018</td>
</tr>
</tbody>
</table>

Sources: World Bank 2019, UN Population Division Department of Economic and Social Affairs 2019.
Notes: Based on population weighted means of 9 countries.

Under-five population (thousands)

| 30,190 | 2019 |

Population density of health workers per 1,000 people

<table>
<thead>
<tr>
<th>Physicians</th>
<th>0.1</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses and midwives</td>
<td>0.91</td>
<td>2016</td>
</tr>
</tbody>
</table>

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 9 countries.