Food and Agriculture Organization of the United Nations

2021

EUROPE AND CENTRAL ASIA
REGIONAL OVERVIEW OF FOOD SECURITY AND NUTRITION

STATISTICS AND TRENDS

Required citation:
FAO. 2021. *Europe and Central Asia – Regional Overview of Food Security and Nutrition 2021: Statistics and trends.* Budapest.
https://doi.org/10.4060/cb7493en

ISBN 978-92-5-135249-6

COVER PHOTOGRAPH ©FAO/Pier Paolo Cito

A baker selects bread in the Forno Campo de Fiori bakery, Italy.

2021
EUROPE AND CENTRAL ASIA
REGIONAL OVERVIEW OF FOOD SECURITY AND NUTRITION

STATISTICS AND TRENDS

Food and Agriculture Organization of the United Nations
Budapest, 2021

CONTENTS

TABLES

FIGURES

FOREWORD

The Sustainable Development Goals (SDGs), adopted by all United Nations Member States in 2015, renewed and revitalized the commitment to ending hunger and malnutrition and reducing premature mortality caused by non-communicable diseases. This report is the seventh regional report monitoring the trends and progress of SDG 2 Target 2.1 (to end hunger and ensure access to food by all) and Target 2.2 (to end all forms of malnutrition) in Europe and Central Asia. Unlike in previous years, this edition only covers analyses of the statistics and trends, without an overarching theme or special analysis of the drivers of food insecurity and malnutrition.

The state of food security and nutrition in the world, including that of the Europe and Central Asia (ECA) region, was marked in 2020 by the outbreak of COVID-19 and resulting disruptions to markets, trade and food supply chains. The pandemic has had a negative effect on food security in the ECA region.[1] It is in this light that the report seeks to assess how food security and nutrition indicators in the region, subregion and countries have changed under the shadow of the pandemic and to monitor the region's progress towards achieving the SDGs.

The results of the examination of the compiled data on the ECA region generally reveal that the ECA region seems to have had low prevalence of undernourishment and severe food insecurity when compared with the worldwide state of food insecurity. However, reductions in the numbers of people affected by hunger and severe food insecurity in some countries of the region have slowed since 2014.

In the ECA region, the COVID-19 pandemic is adding more people to the ranks of the food insecure. Overall, 22.8 million people in Europe and Central Asia (about 2.4 percent of the population of the region) faced severe food insecurity in 2020. This is about 7 million more than in 2019. In this region, more than 111 million people (11.9 percent of the total population) were moderately or severely food insecure in 2020, meaning they were without access to safe, nutritious and adequate food. This is an increase of more than 14 million people in just one year.

Progress has been made in reducing various forms of malnutrition, including (in most countries of the region) child stunting, child wasting and low birthweight. However, the ECA region is in a worse position regarding the prevalence of childhood overweight, exclusive breastfeeding and adult obesity. In particular, there are alarmingly high, and increasing, rates of adult obesity in most countries in the region. The COVID-19 pandemic might be worsening the problem.

1 FAO, WFP, UNECE, UNICEF, WHO & WMO. 2021. *Regional Overview of Food Security and Nutrition in Europe and Central Asia 2020: Affordable healthy diets to address all forms of malnutrition for better health*. Rome, FAO, WFP, UNECE, UNICEF, WHO and WMO. http://www.fao.org/documents/card/en/c/cb3849en

Examinations of the data and analyses in this report show that more work must be done for the ECA region to fully reach the SDG 2.2 targets to end malnutrition. The ECA region contains great diversity in income levels and in food insecurity, malnutrition and other socio-economic deprivations. In this report, two major conclusions deserve to be highlighted. One is that the ECA subregions (such as the Caucasus and Central Asia) and countries that were already vulnerable before the pandemic became even more so in 2020. The resilience of the region relies mostly on the provision of solid effort in the vulnerable subregions.

The second major conclusion is that, although the region was doing better than the world in 2020 in some indicators, there is still an enormous amount of work ahead to achieve the SDGs. The COVID-19 pandemic has caused serious threats to food security and nutrition, especially for low-income and vulnerable populations. With pandemic policy responses varying greatly according to each country's level of wealth and political will, national and subregional inequalities in access to food and nutrition are certain to grow. This must be dealt with to ensure that the ECA region moves forward in attaining sufficient food and nutrition for all, with a pledge to leave no one behind.

Vladimir Rakhmanin
Assistant Director-General and Regional Representative for Europe and Central Asia
Food and Agriculture Organization of the United Nations

ACKNOWLEDGEMENTS

The report was prepared by Cheng Fang, Manitra A. Rakotoarisoa and Giorgi Kvinikadze – all with the Food and Agriculture Organization of the United Nation's (FAO) Regional Office for Europe and Central Asia – in close collaboration with the FAO Statistics Division. The work was conducted under the overall supervision and guidance of Vladimir Rakhmanin, Assistant Director-General and Regional Representative for Europe and Central Asia, and with the assistance of Raimund Jehle, Regional Programme Leader.

The publication's technical coordination was led by Cheng Fang and Hernán Muñoz (FAO Statistics Division). Máximo Torero Cullen and José Rosero Moncayo from FAO headquarters provided guidance in terms of structure and content of the report, Olivier Lavagne d'Ortigue provided support for data visualization, Anne Kepple, Juan Feng, Olivier Lavagne d'Ortigue and Hernán Muñoz provided valuable comments and inputs. Valuable technical review was provided by colleagues in the regional office and in the various FAO country offices.

At the FAO Regional Office for Europe and Central Asia, Victoria Kalinin and Irina Tarakanova coordinated the publishing process, with valuable support from colleagues at FAO headquarters. Matthew Anderson provided editorial and proofreading support for the publication, and the Neotech company produced the Russian translation.

ACRONYMS AND ABBREVIATIONS

BMI	body mass index
CIS	Commonwealth of Independent States
ECA	Europe and Central Asia
EFTA	European Free Trade Association
FAO	Food and Agriculture Organization of the United Nations
FIES	Food Insecurity Experience Scale
IFAD	International Fund for Agricultural Development
PoU	Prevalence of undernourishment
SDG	Sustainable Development Goals
UNICEF	United Nations Children's Fund
WFP	World Food Programme
WHA	World Health Assembly
WHO	World Health Organization

CHAPTER 1

SUSTAINABLE DEVELOPMENT GOAL 2.1: UNDERNOURISHMENT AND FOOD INSECURITY

Key messages

- While the worldwide prevalence of undernourishment (PoU) increased from 8.4 percent in 2019 to 9.9 percent in 2020, the PoU in the Europe and Central Asia (ECA) region has remained below 2.5 percent for nearly two decades.
- The average figure for the ECA region hides subregional realities. While the PoU in the European Union and the United Kingdom of Great Britain and Northern Ireland (EU27 and the United Kingdom), European Free Trade Association (EFTA) countries and European countries from the Commonwealth of Independent States (CIS) has remained below 2.5 percent for close to 20 years, the Caucasus, Central Asia and the Western Balkans experienced small increases from 2019 to 2020.
- The ECA region added an estimated 7.1 million severely food insecure people from 2019 to 2020. About 2.4 percent of the ECA's population – 22.8 million people – were facing severe food insecurity in 2020, an increase of 0.7 percentage points in just one year.
- Overall, 11.9 percent of the total population in the ECA region were exposed to moderate or severe food insecurity in 2020, with four subregions having a higher prevalence: Central Asia, at 18.0 percent; the Western Balkans, at 17.6 percent; CIS Europe, at 16.8 percent; and the Caucasus, at 16.7 percent.
- Sex-disaggregated estimates across the region show that moderate or severe food insecurity was experienced slightly more by women (13.4 percent) than by men (12.3 percent) in 2020.

1.1 PREVALENCE OF UNDERNOURISHMENT

The Food and Agriculture Organization of the United Nation's (FAO) PoU indicator is derived from official country data on food supply, food consumption and energy needs, while taking into consideration demographic characteristics such as age, sex and levels of physical activity. Designed to capture a state of energy deprivation lasting over a year, it does not reflect the short-lived effects of temporary crises or a temporarily inadequate intake of essential nutrients.

FAO strives always to improve the accuracy of the PoU estimates by taking into account new information; the entire historical series is updated for each report. For this reason, only the current series of estimates should be used, including for values in past years.[1]

In the past two decades, countries in the Europe and Central Asia region have made significant progress in combating undernourishment. Since the early 2000s, most countries in the region have achieved the target of eradicating hunger. The region's PoU was below 2.5 percent in 2020, much lower than the world average of 9.9 percent. In 2000, the number of undernourished in the ECA region was 24.4 million, and this has fallen significantly (numbers are not reported for 2020 due to the PoU being lower than 2.5 percent in many countries).[2]

The undernourishment trends by subregion (FIGURE 1, TABLE 1) show that the low PoU levels – and the stable trends – at the regional level since 2000 are mainly driven by sustained progress in hunger eradication in CIS Europe, EFTA, EU27 and the United Kingdom, and the Western Balkans and by rapid declines in undernourishment in the Caucasus and Central Asia before 2020. The Caucasus and Central Asia were negatively impacted by the ongoing COVID-19 pandemic, as the PoU increased in 2020 to 3.7 percent in the Caucasus and to 3.4 percent in Central Asia. However, the PoU in both subregions was still lower than the world average of 9.9 percent in 2020.

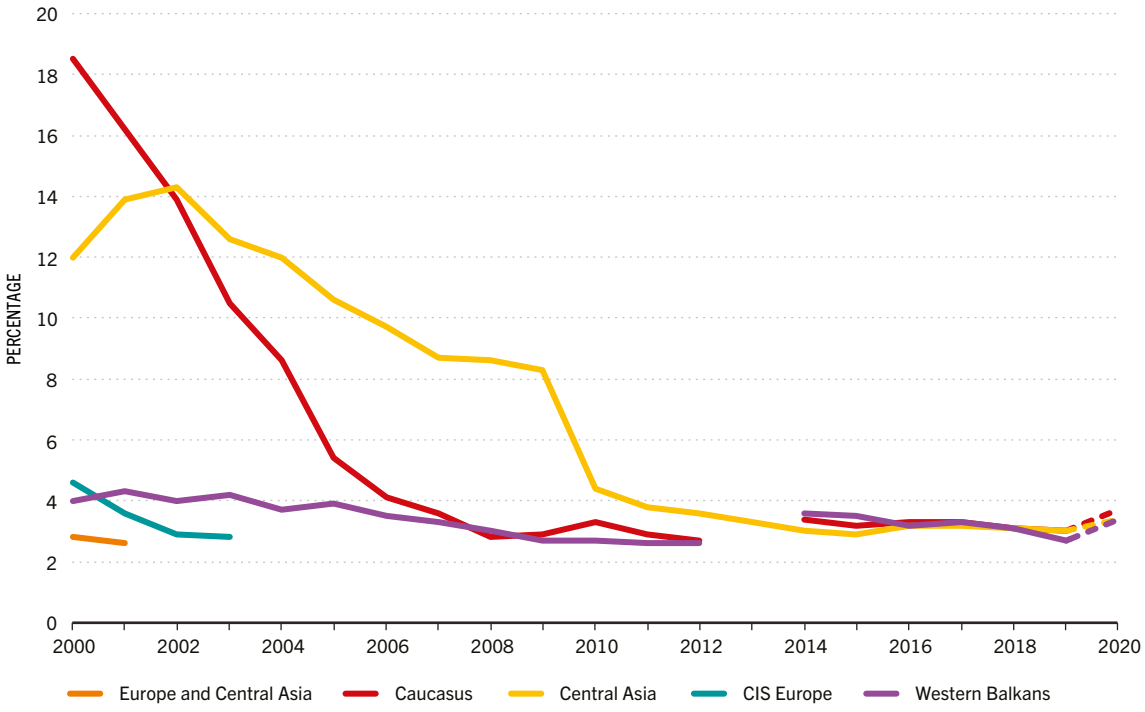
A focus on the most vulnerable countries in the region shows that in the past 20 years (FIGURE 2 and TABLE 15), Uzbekistan and Azerbaijan have achieved significant reductions in the number of undernourished. Uzbekistan and Azerbaijan had, in 2000–2002, the region's second-highest and third-highest PoU, at 17.9 percent and 17 percent, respectively. Since then, their PoU numbers have fallen dramatically to less than 2.5 percent in 2018–2020. The hardships of the pandemic seem to have caused no setback in Azerbaijan's performance in defeating undernourishment. Similarly, the PoU was also reduced and remained below 2.5 percent in Bosnia and Herzegovina, Croatia, Cyprus, Estonia, Kazakhstan, Latvia, Montenegro, the Russian Federation and Ukraine.

The data in FIGURE 2 for 2013–2015 and 2018–2020 show the persistence of the PoU in some countries, and even a slight increase of the PoU in Armenia, Georgia, Serbia and Turkmenistan.

The number of undernourished in Europe and Central Asia was 24.4 million (TABLE 2) in 2000, accounting for 3 percent of the world total. The number for 2020 is not reported, since many countries have a PoU of less than 2.5 percent. The number of undernourished in Central Asia was reduced from 6.6 million in 2000 to 2.7 million in 2010 and to 2.2 million in 2019 – a drop of 18.5 percent from 2010 to 2019 – and then increased to 2.7 million in 2020. Similar to Central Asia, the number of undernourished in the Caucasus was reduced significantly from 2000 (2.9 million) to 2010 (500 000). Since then, the number has remained around 500 000 to 600 000 through 2020. The number of undernourished in the Western Balkans was 800 000 in 2000 and experienced only small changes, staying at around 600 000 through 2020.

1 For more detail, see: FAO, IFAD, UNICEF, WFP & WHO. 2019. *The State of Food Security and Nutrition in the World 2019*. Rome, FAO.
2 FAO does not consider national-level PoU estimates lower than 2.5 percent to be sufficiently reliable for reporting due to statistical margins of error around the parameters used to calculate the PoU.

FIGURE 1
Prevalence of undernourishment in Europe and Central Asia by subregion



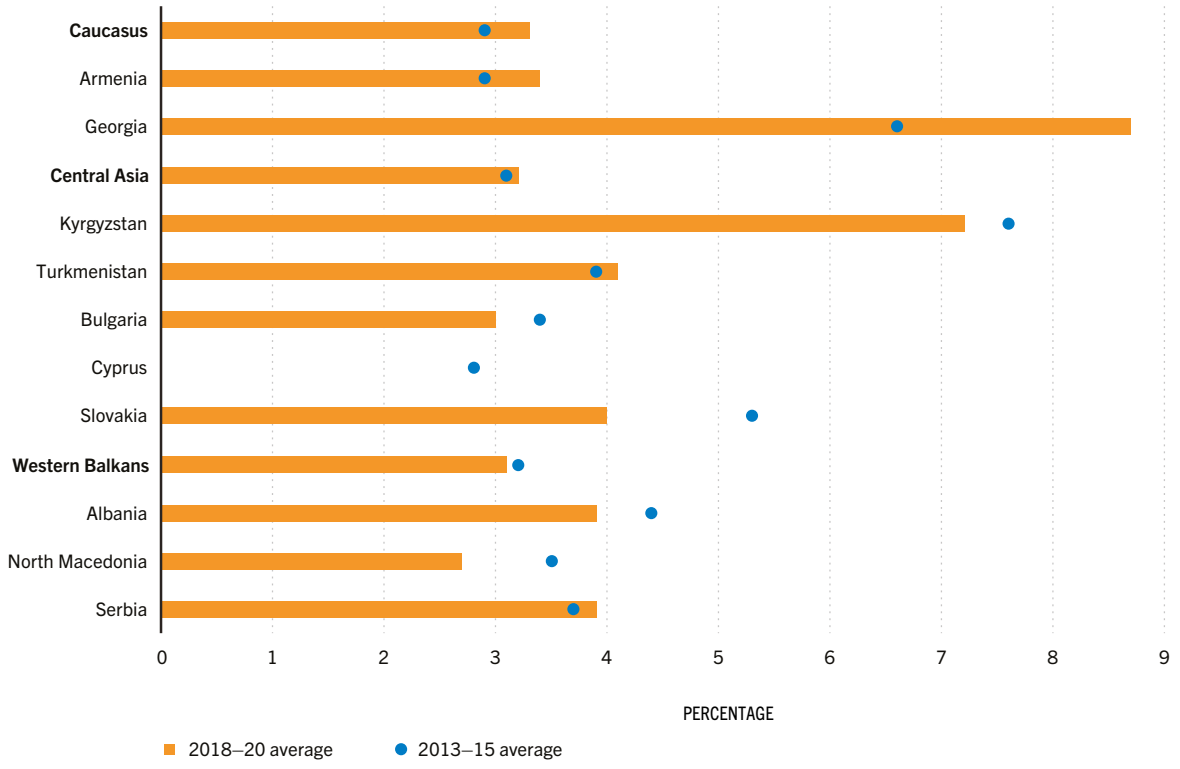
SOURCE: FAO.
NOTES: Discontinued trends are due to the PoU being less than 2.5 percent. Values for 2020 are projections.
https://doi.org/10.4060/cb7493en-fig01

TABLE 1
Prevalence of undernourishment (percent)

	2000	2010	2014	2015	2019	2020
World	**13.0**	**9.2**	**8.3**	**8.3**	**8.4**	**9.9**
Europe and Central Asia	2.8	<2.5	<2.5	<2.5	<2.5	<2.5
Caucasus	18.5	3.3	3.4	3.2	3.0	3.7
Central Asia	12.0	4.4	3.0	2.9	3.0	3.4
CIS Europe	4.6	<2.5	<2.5	<2.5	<2.5	<2.5
EFTA countries	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
EU27 and the United Kingdom	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Other	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Western Balkans	4.0	2.7	3.6	3.5	2.7	3.4

SOURCE: FAO.
NOTE: Values for 2020 are projections.

FIGURE 2
Prevalence of undernourishment
in Europe and Central Asia by country



SOURCE: FAO.
NOTE: Values for 2020 are projections.
https://doi.org/10.4060/cb7493en-fig02

TABLE 2
Number of undernourished
people (millions)

	2000	2010	2014	2015	2019	2020
World	**800.3**	**636.8**	**606.9**	**615.1**	**650.3**	**768.0**
Europe and Central Asia	24.4					
Caucasus	2.9	0.5	0.6	0.5	0.5	0.6
Central Asia	6.6	2.7	2.0	2.0	2.2	2.6
CIS Europe	9.7					
EFTA countries						
EU27 and the United Kingdom						
Other						
Western Balkans	0.8	0.5	0.6	0.6	0.5	0.6

SOURCE: FAO.
NOTE: The estimated PoU in several regions is below 2.5 percent of the population, which is the lowest value that can be reliably reported using the PoU methodology to calculate the number of undernourished people. Values for 2020 are projections.

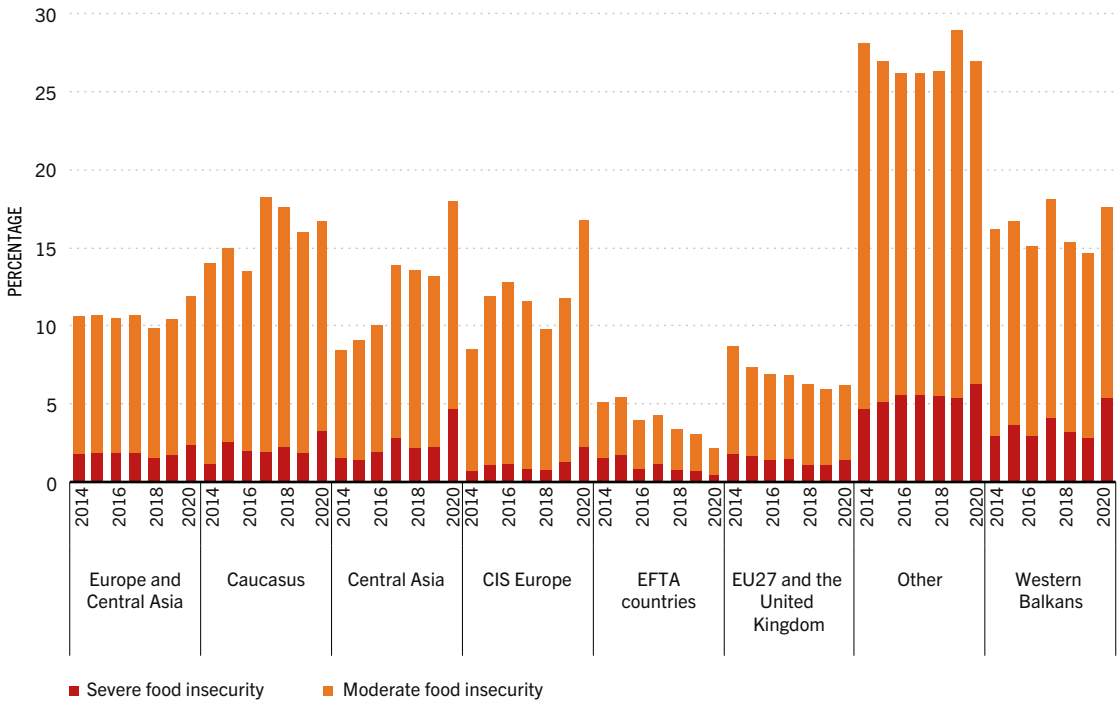
The number of undernourished in the other subregions is not reported, as the PoU in those places is below 2.5 percent.

The worsening food security situation in Europe and Central Asia is reflected in the prevalence of undernourishment data as well as the prevalence of moderate or severe food insecurity in the population figures presented below.

1.2 PREVALENCE OF FOOD INSECURITY BASED ON THE FOOD INSECURITY EXPERIENCE SCALE

The Food Insecurity Experience Scale- (FIES) based prevalence of moderate or severe food insecurity is an estimate of the proportion of the population facing moderate or severe constraints on their ability to obtain sufficient food over the course of a year. People face moderate food insecurity when they are uncertain of their ability to obtain food and have been forced to reduce, at times over the year, the quality and/or quantity of food they consume due to lack of money or other resources. Severe food insecurity means

FIGURE 3
Prevalence of food insecurity
in Europe and Central Asia by subregion



SOURCE: FAO.
https://doi.org/10.4060/cb7493en-fig03

TABLE 3
Prevalence of food insecurity
(percent)

	Moderate food insecurity			Severe food insecurity			Moderate or severe food insecurity		
	2014	2019	2020	2014	2019	2020	2014	2019	2020
World	**14.3**	**16.5**	**18.5**	**8.3**	**10.1**	**11.9**	**22.6**	**26.6**	**30.4**
Europe and Central Asia	8.8	8.7	9.5	1.8	1.7	2.4	10.6	10.4	11.9
Caucasus	12.8	14.1	13.4	1.2	1.9	3.3	14.0	16.0	16.7
Central Asia	6.9	10.9	13.3	1.6	2.3	4.7	8.5	13.2	18.0
CIS Europe	7.8	10.5	14.5	0.7	1.3	2.3	8,5	11,8	16.8
EFTA countries	3.5	2.4	1.7	1.6	0.7	0.5	5.1	3.1	2.2
EU27 and the United Kingdom	6.9	4.9	4.8	1.8	1.1	1.4	8.7	6.0	6.2
Other	23.4	23.5	20.7	4.7	5.4	6.3	28.1	28.9	27.0
Western Balkans	13.2	11.9	12.2	3.0	2.8	5.4	16.2	14.7	17.6

SOURCE: FAO.

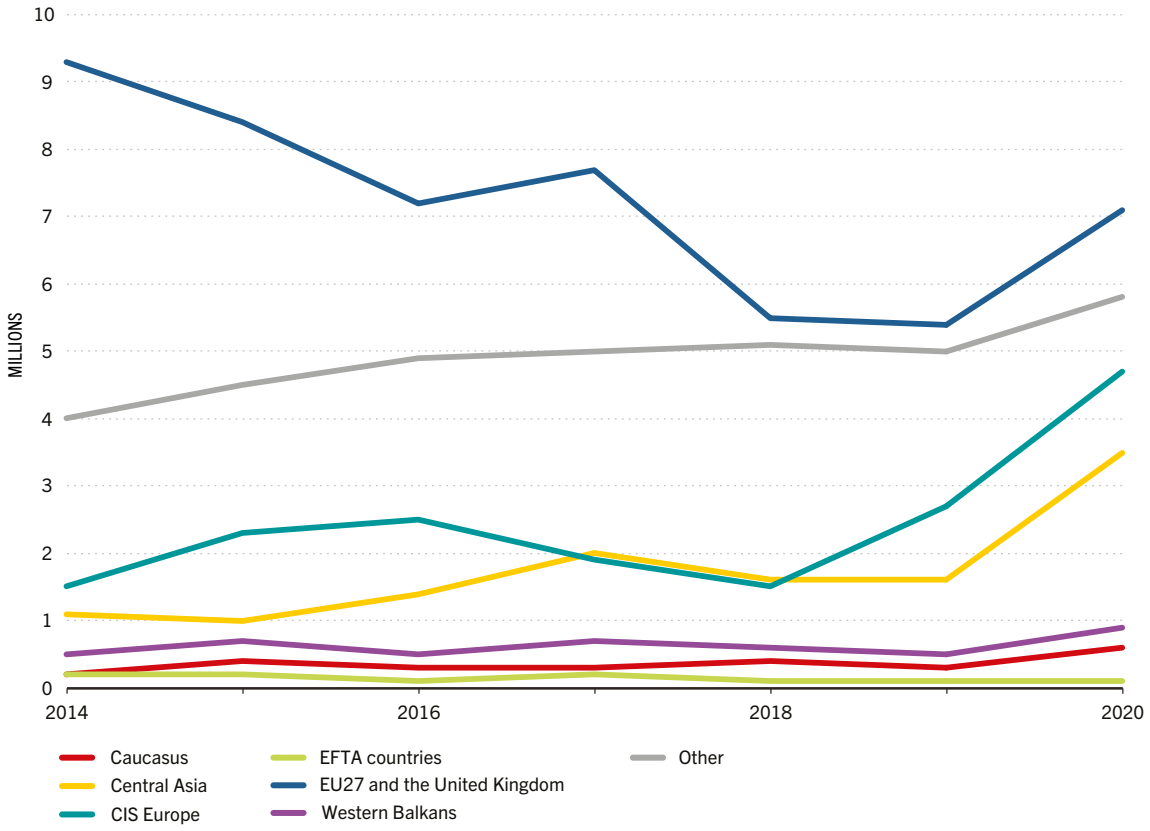
that individuals have likely run out of food, experienced hunger and, at the most extreme, have gone for days without eating, putting their health and well-being at serious risk.

Severe food insecurity affected 2.4 percent of the people in ECA in 2020, up from 1.8 percent in 2014 and 1.7 percent in 2019 (FIGURE 3 and TABLE 3). By subregion, the percentages were 5.4 percent in the Western Balkans, 4.7 percent in Central Asia, 3.3 percent in the Caucasus, 2.3 percent in CIS Europe, 1.4 percent in the EU27 and the United Kingdom and 0.5 percent in EFTA countries.

An estimated 15.7 million people in Europe and Central Asia experienced severe food insecurity in 2019 (TABLE 4 and FIGURE 4), a decrease of 1 million (6 percent) from 2014. The region accounted for 2 percent of the global total of 800 million in 2019. From 2019 to 2020, the number of severely food insecure people increased by 7.1 million (from 15.7 million in 2019 to 22.8 million in 2020), an increase of 45.2 percent. In 2020, 7.1 million people were severely food insecure in the EU27 and the United Kingdom, with an additional 4.7 million in CIS Europe, 3.5 million in Central Asia, 900 000 in the Western Balkans, 600 000 in the Caucasus and 100 000 in EFTA countries (and 5.8 million in the rest of the ECA region).

With the exception of the EFTA countries, where the number of the severely food insecure people remained at 100 000, the rest of the ECA subregions saw increases in the number of people facing severe food insecurity from 2019 to 2020. The subregions where the numbers of food insecure people have risen the most were consistently those where the prevalence of undernourishment was high: Central Asia (increase of 1.9 million) and the Caucasus (increase of 300 000). In addition, CIS Europe had 2 million more food insecure people from 2019 to 2020, while the EU27 and the United Kingdom added 1.7 million and the Western Balkans added 400 000. About 800 000 additional severely food insecure people are spread throughout the rest of the region. The highest increases in severe food insecurity were in Ukraine and Uzbekistan; in each of these countries, 400 000 people have become severely food insecure in just one year (TABLE 18).

FIGURE 4
Number of severely food insecure people in Europe and Central Asia by subregion



SOURCE: FAO.
https://doi.org/10.4060/cb7493en-fig04

TABLE 4
Number of severely food insecure people (millions)

	2014	2016	2018	2019	2020
World	**604.5**	**620.2**	**731.3**	**779.9**	**927.6**
Europe and Central Asia	16.7	17.1	14.8	15.7	22.8
Caucasus	0.2	0.3	0.4	0.3	0.6
Central Asia	1.1	1.4	1.6	1.6	3.5
CIS Europe	1.5	2.5	1.5	2.7	4.7
EFTA countries	0.2	0.1	0.1	0.1	0.1
EU27 and the United Kingdom	9.3	7.2	5.5	5.4	7.1
Other	4.0	4.9	5.1	5.0	5.8
Western Balkans	0.5	0.5	0.6	0.5	0.9

SOURCE: FAO.

The prevalence of moderate or severe food insecurity in the ECA region was 11.9 percent in 2020, up from 10.6 percent in 2014 (FIGURE 3 and TABLE 3). This is lower than the global average of 30.4 percent. In Central Asia, 18 percent of the people were severely or moderately food insecure in 2020, compared to 16.8 percent in CIS Europe, 16.7 percent in the Caucasus, 6.2 percent in the EU27 and the United Kingdom and 2.2 percent in EFTA countries. In the ECA region, 111 million people were estimated to be moderately or severely food insecure in 2020, most of them in Central Asia (13.4 million), CIS Europe (34.2 million) and the EU27 and the United Kingdom (32 million).

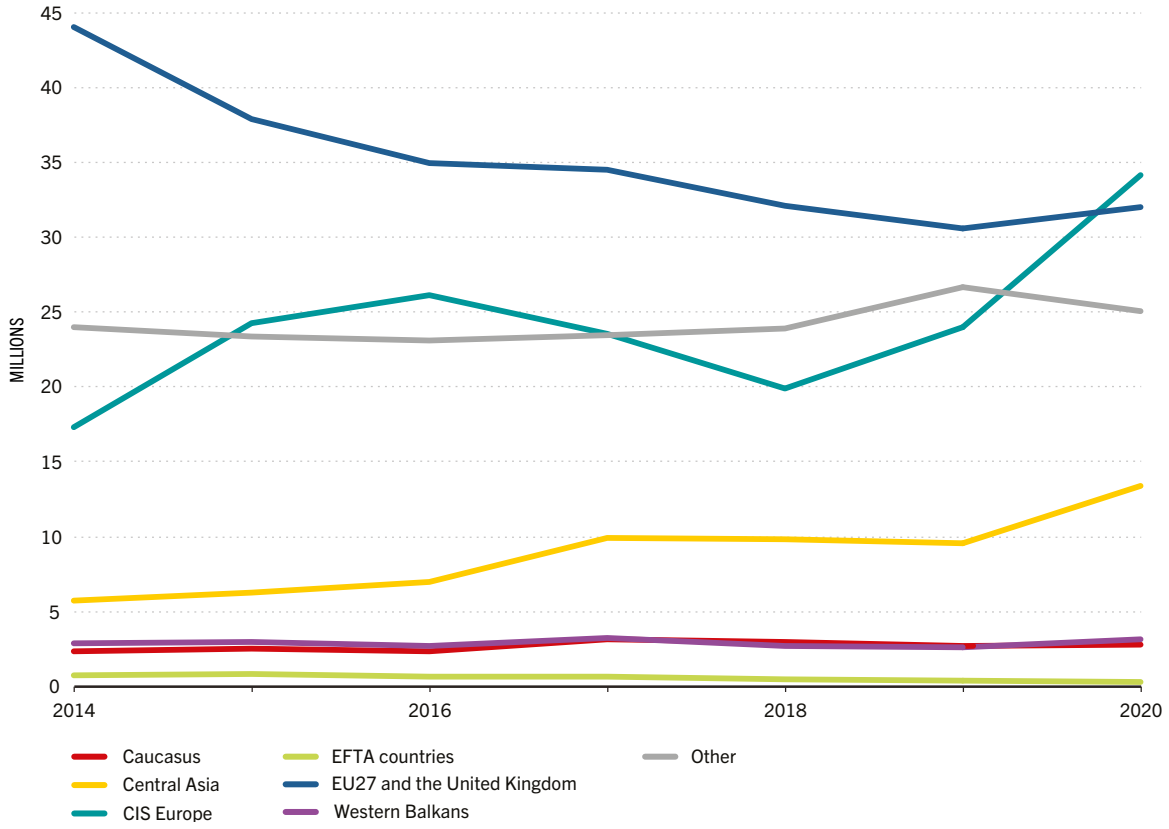
From 2019 to 2020, the world added 162 million to the tally of moderately or severely food insecure people, and 14.4 million of them were from the ECA region (TABLE 5), mainly from Central Asia (3.8 million) and CIS Europe (10.2 million). The prevalence of moderate or severe food insecurity in these two subregions has remained high and, in the past two years, has noticeably increased – from 13.2 percent to 18 percent in Central Asia and from 11.8 percent to 16.8 percent in CIS Europe. Similarly, the Caucasus, which has a historically high and rising prevalence of moderate or severe food insecurity – with an increase from 14 percent in 2014 to 16 percent in 2019 – saw a further jump to 16.7 percent in 2020. Many subregions saw both the prevalence and number of moderately and severely food insecure people holding steady or declining: the EU27 and the United Kingdom and EFTA countries have experienced significant reductions since 2014. EFTA countries reduced their prevalence from 5.1 percent in 2014 to 2.2 percent in 2020 while shrinking the number of moderately or severely food insecure people from 700 000 to 300 000. Similarly, the EU27 and the United Kingdom reduced its number of moderately or severely food insecure people from 44.1 million in 2014 to 30.6 million in 2019. Although the figure for 2020 points at a slight rise to 32 million, the recent trend has been promising overall.

On average, a total of 99.8 million people in the ECA region were moderately or severely food insecure in 2018–2020. Among the countries with a high prevalence, the largest number of moderately or severely food insecure people (6.5 million) lived in Uzbekistan. But as indicated in the figure breakdown by subregion, many countries with a low prevalence had significant numbers of people affected by moderate or severe food insecurity in 2018–2020: France (3.7 million), Germany (2.9 million), Italy (4 million), the Russian Federation (8.8 million) and Spain (4 million).

The data show that in many countries, the prevalence of moderate or severe food insecurity was high and trending upward even before the pandemic. FIGURE 6 (and TABLE 17) shows that in 2018–2020, the prevalence of moderate or severe food insecurity was higher than the world average of 27.6 percent in Albania (33.8 percent) and Georgia (39.7 percent) and just below the world average in the Republic of Moldova (27.6 percent). In many other countries, the prevalence – though well below the world average – hovered at or surpassed 10 percent.

In the ECA region, women are more likely to be food insecure than are men. FIGURE 7 shows that in 2020, the prevalence of moderate or severe food insecurity was higher for women in the region (13.4 percent) than it was for men (12.3 percent). This gender bias in access to food was widespread across all subregions. In 2020, 23.6 percent

FIGURE 5
Number of moderately or severely food insecure people in Europe and Central Asia by subregion



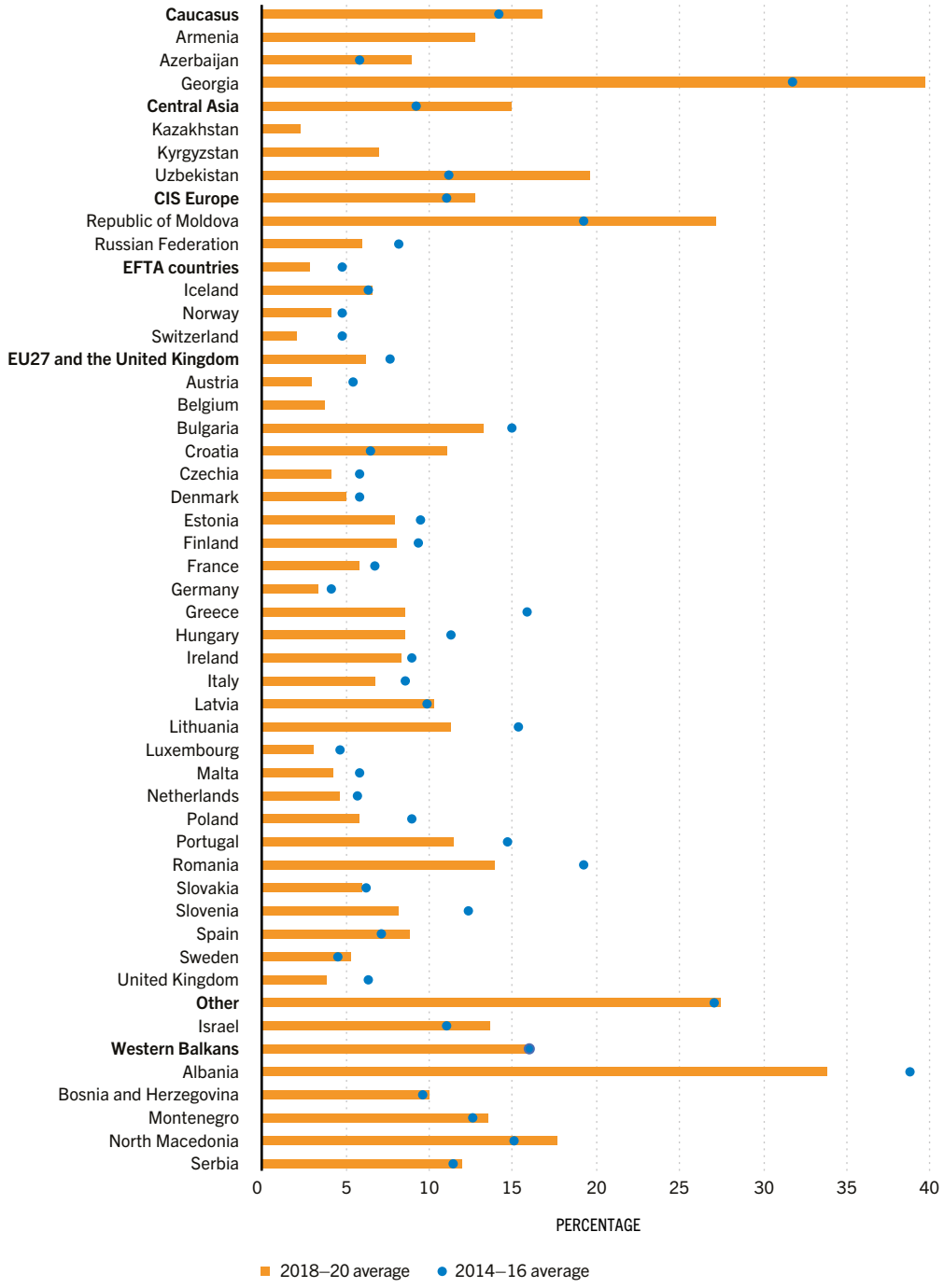
SOURCE: FAO.
https://doi.org/10.4060/cb7493en-fig05

TABLE 5
Number of moderately or severely food insecure people (millions)

	2014	2016	2018	2019	2020
World	**1 645.5**	**1 762.9**	**1 978.7**	**2 049.9**	**2 368.2**
Europe and Central Asia	97.0	96.7	91.9	96.6	111.0
Caucasus	2.3	2.3	3.0	2.7	2.8
Central Asia	5.7	7.0	9.8	9.6	13.4
CIS Europe	17.3	26.1	19.9	24.0	34.2
EFTA countries	0.7	0.6	0.5	0.4	0.3
EU27 and the United Kingdom	44.1	35.0	32.1	30.6	32.0
Other	24.0	23.1	23.9	26.7	25.1
Western Balkans	2.9	2.7	2.7	2.6	3.1

SOURCE: FAO.

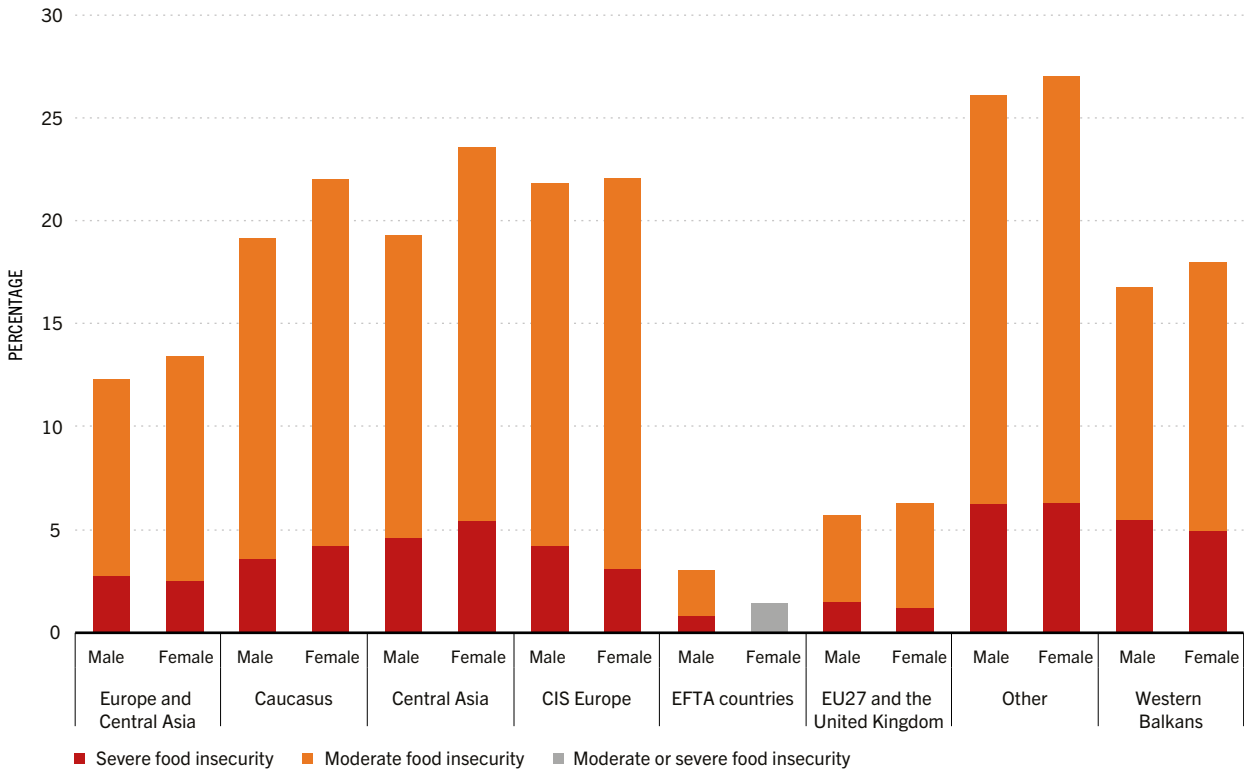
FIGURE 6
Prevalence of moderate or severe food insecurity in Europe and Central Asia by country



SOURCE: FAO.
https://doi.org/10.4060/cb7493en-fig06

of women in Central Asia were food insecure, 4.3 percentage points higher than men (19.3 percent). In the Caucasus, the prevalence among women (22 percent) was 2.8 percentage points higher than the prevalence among men (19.2 percent), and in the EU27 and the United Kingdom, where 6.3 percent of women and 5.7 percent of men were food insecure, the difference was 0.6 percentage points.

FIGURE 7
Prevalence of moderate or severe food insecurity in Europe and Central Asia by subregion and gender, adults 15 and older (2020)



SOURCE: FAO.
https://doi.org/10.4060/cb7493en-fig07

CHAPTER 2

SUSTAINABLE DEVELOPMENT GOAL 2.2: MALNUTRITION

Key messages

- The prevalence of stunting among children in the ECA region dropped to 7.3 percent in 2020, down from 8.9 percent in 2015, and that rate was much lower than the 2020 world average of 22 percent. Countries with a higher prevalence of stunting in 2020 in the region are Azerbaijan (16.3 percent), Ukraine (15.9 percent), Tajikistan (15.3 percent) and Kyrgyzstan (11.4 percent).
- The prevalence of wasting among children was below 2 percent in 2020 in the ECA region, much lower than the world average of 6.7 percent. Among the ECA subregions, the prevalence is highest in the Caucasus, Central Asia and the Western Balkans.
- In 2020, the regional prevalence of overweight among children was 7.1 percent, down from 8.5 percent in 2015 but higher than the world average of 5.7 percent.
- The prevalence of anaemia among women of reproductive age was 17.4 percent in 2019, the same as in 2000. The prevalence in some Caucasus and Central Asian countries is close to or above the world average of 29.9 percent.

This section reports on four global nutrition indicators: stunting, wasting and overweight in children under the age of five, and anaemia in women of reproductive age.

TABLE 6
Global nutrition targets and ECA progress (part 1)

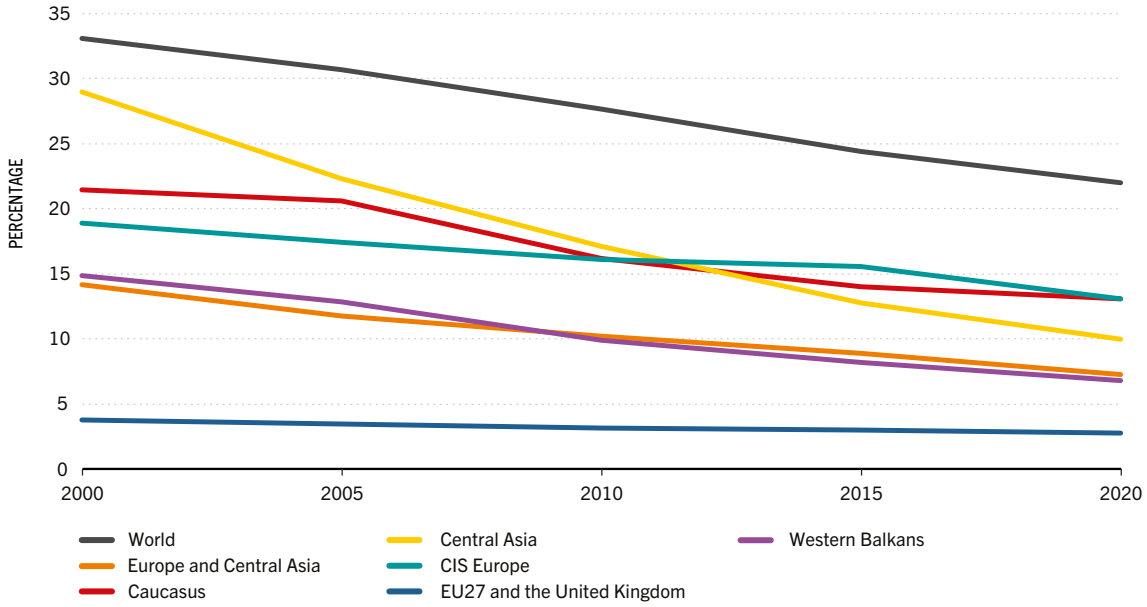
Indicators	2025 target	2030 target	Level in 2020 (or the latest year for which data are available)
Child stunting	40 percent reduction in the number children under five who are stunted	50 percent reduction	ECA: 7.3 percent World: 22 percent
Child wasting	Reduce and maintain childhood wasting to less than 5 percent	Reduction to less than 3 percent and maintenance at that level	ECA: 1.9 percent World: 6.7 percent
Child overweight	No increase	Reduce and maintain childhood overweight to less than 3 percent	ECA: 7.1 percent World: 5.7 percent
Anaemia in women of reproductive age	50 percent reduction in anaemia in women of reproductive age	50 percent reduction	ECA: 17.4 percent in 2019 World: 29.9 percent

SOURCE: WHO, UNICEF and FAO (in 2020 or most recent year for which data are available).

2.1 STUNTING AMONG CHILDREN UNDER FIVE

The prevalence of stunting in the ECA region was 7.3 percent in 2020, down by almost half from 14.2 percent in 2000 and reduced from 8.9 percent in 2015 (FIGURE 8 and TABLE 7) and far below the world average of 22 percent. Estimates for 2020 show that in all subregions

FIGURE 8
Prevalence of stunting among children under five in Europe and Central Asia by subregion



SOURCE: UNICEF, WHO and World Bank.
https://doi.org/10.4060/cb7493en-fig08

TABLE 7
Prevalence of stunting among children under five (percent)

	2000	2005	2010	2015	2020
World	**33.1**	**30.7**	**27.7**	**24.4**	**22.0**
Europe and Central Asia	14.2	11.8	10.2	8.9	7.3
Caucasus	21.5	20.6	16.2	14.0	13.1
Central Asia	29.0	22.3	17.1	12.8	10.0
CIS Europe	18.9	17.4	16.1	15.6	13.1
EFTA countries					
EU27 and the United Kingdom	3.8	3.5	3.2	3.0	2.8
Other					
Western Balkans	14.9	12.9	9.9	8.2	6.8

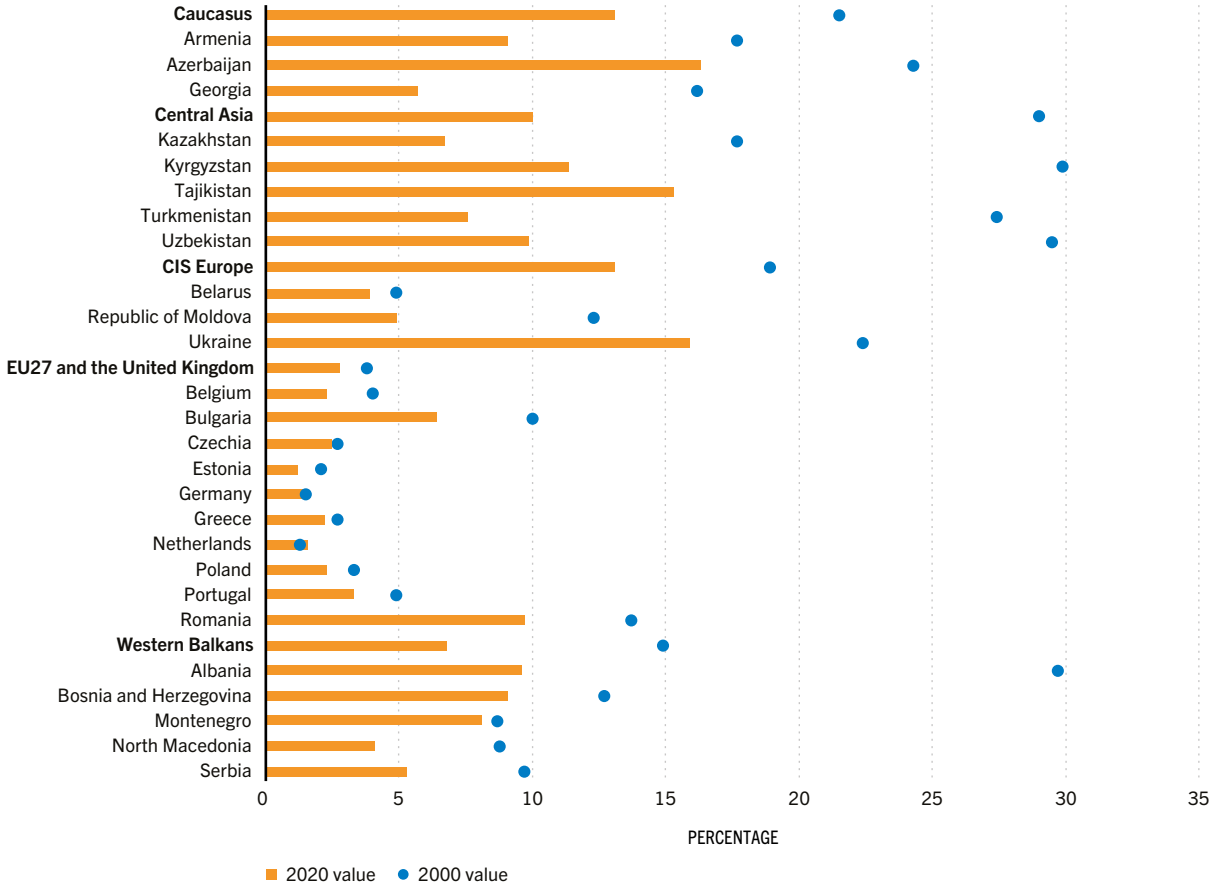
SOURCE: UNICEF, WHO and World Bank.

and in almost every ECA country, the prevalence of stunting declined continuously from 2015 to 2020.

However, the prevalence varies significantly by subregion. While the prevalence has been especially low in the EU27 and the United Kingdom, the rates in both the Caucasus and in CIS Europe remain relatively higher at 13.1 percent – below the world average but well above the regional average (TABLE 7).

Since 2000, most countries in the ECA region have reduced child stunting at a faster rate than has the world at large, and the prevalence of stunting in most countries in the region in 2020 was less than half the world average. As shown in FIGURE 9, the prevalence has declined greatly in Albania, Georgia, Kazakhstan, Kyrgyzstan, the Republic of Moldova, Tajikistan, Turkmenistan and Uzbekistan. Despite substantial progress, some countries in Central Asia, the Caucasus and CIS Europe still have a relatively higher prevalence of stunting in the region: Azerbaijan (16.3 percent), Ukraine (15.9 percent), Tajikistan (15.3 percent) and Kyrgyzstan (11.4 percent).

FIGURE 9
Prevalence of stunting among children under five in Europe and Central Asia by country

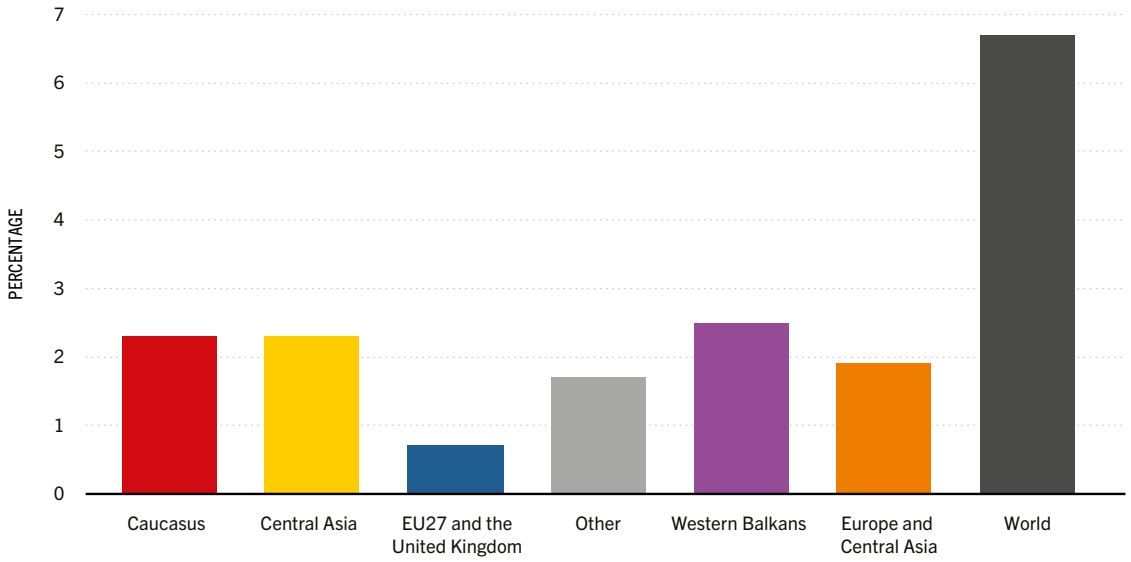


SOURCE: UNICEF, WHO and World Bank.
https://doi.org/10.4060/cb7493en-fig09

2.2 WASTING AMONG CHILDREN UNDER FIVE

The ECA region has succeeded in reducing the prevalence of wasting for children under five. FIGURE 10 and TABLE 8 show that the share of children under five affected by wasting in Europe and Central Asia was 1.9 percent in 2020, less than one-third of the world's average of 6.7 percent. Wasting affected 2.5 percent of children in the

FIGURE 10
Prevalence of wasting among children under five in Europe and Central Asia by subregion (2020)



SOURCE: UNICEF, WHO and World Bank.
https://doi.org/10.4060/cb7493en-fig10

TABLE 8
Prevalence of wasting among children under five (percent)

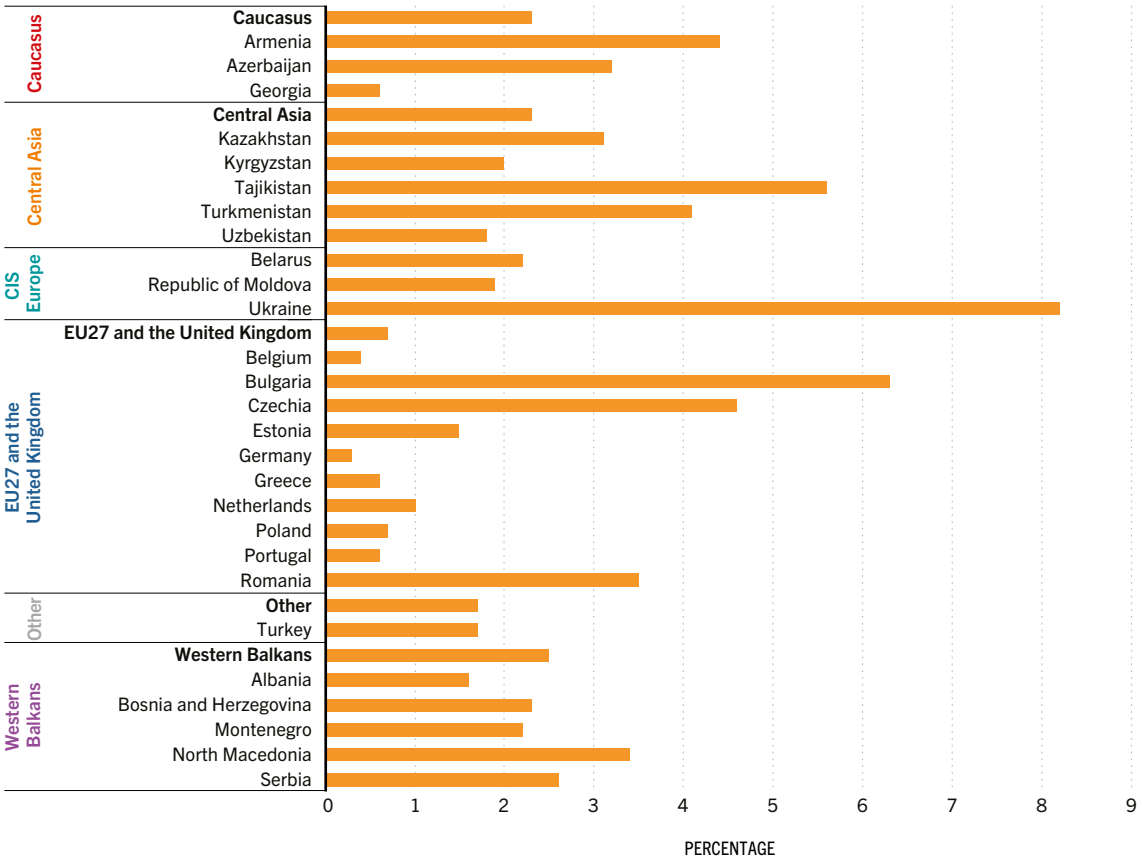
	2020
World	**6.7**
Europe and Central Asia	1.9
Caucasus	2.3
Central Asia	2.3
CIS Europe	
EFTA countries	
EU27 and the United Kingdom	0.7
Other	1.7
Western Balkans	2.5

SOURCE: UNICEF, WHO and World Bank.

Western Balkans, followed by the Caucasus (2.3 percent), the rest of the ECA region (1.7 percent), and the EU27 and the United Kingdom (0.7 percent) in 2020.

FIGURE 11 presents the situation in ECA countries for the latest available year. The prevalence of child wasting varies significantly by country: 17 of 27 countries have already met the 2030 target of 3 percent, while Armenia, Azerbaijan, Bulgaria, Czechia, Kazakhstan, Romania, North Macedonia, Tajikistan, Turkmenistan and Ukraine still have a prevalence higher than 3 percent.

FIGURE 11
Prevalence of wasting among children under five in Europe and Central Asia by country (latest year available)

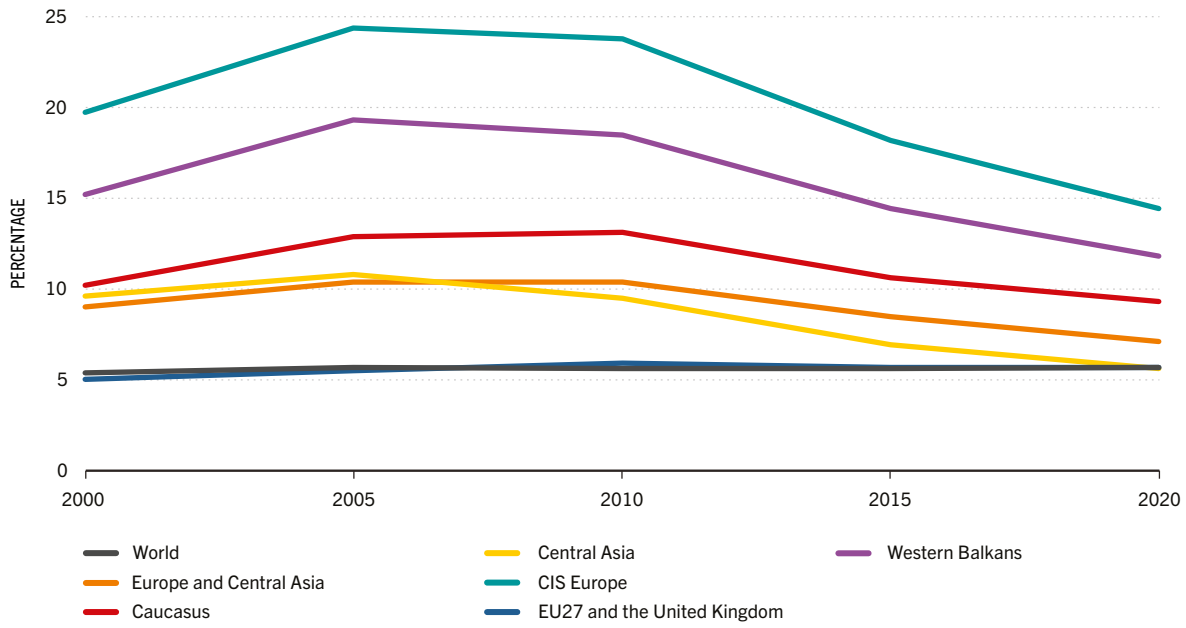


SOURCE: UNICEF, WHO and World Bank.
https://doi.org/10.4060/cb7493en-fig11

2.3 OVERWEIGHT AMONG CHILDREN UNDER FIVE

In 2020, the prevalence of overweight children under five in the ECA region was 7.1 percent, roughly 25 percent higher than the world average of 5.7 percent. FIGURE 12 and TABLE 9 show three distinct phases in the trends of the prevalence of

FIGURE 12
Prevalence of overweight among children under five in Europe and Central Asia by subregion



SOURCE: UNICEF, WHO and World Bank.
https://doi.org/10.4060/cb7493en-fig12

TABLE 9
Prevalence of overweight among children under five (percent)

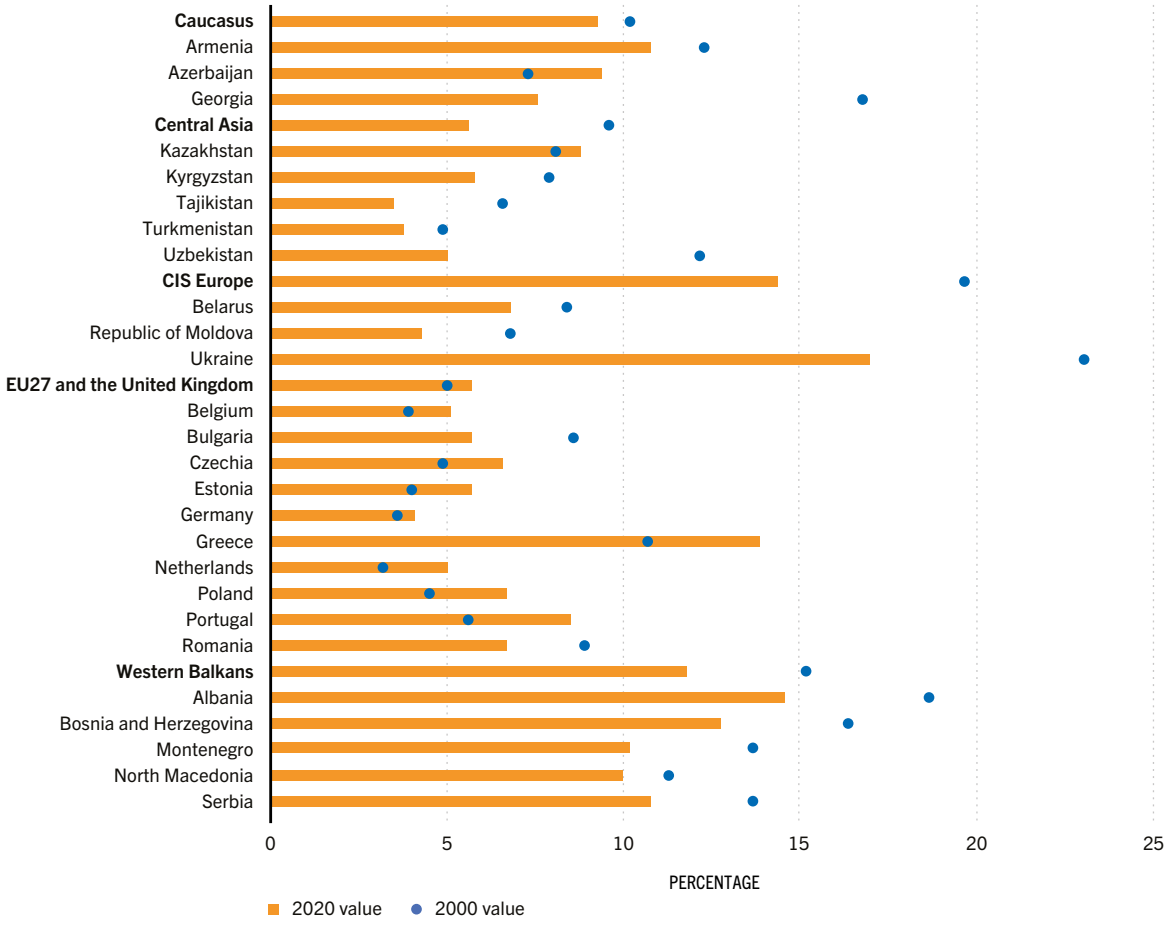
	2000	2005	2010	2015	2020
World	**5.4**	**5.7**	**5.6**	**5.6**	**5.7**
Europe and Central Asia	9.0	10.4	10.4	8.5	7.1
Caucasus	10.2	12.9	13.1	10.6	9.3
Central Asia	9.6	10.8	9.5	6.9	5.6
CIS Europe	19.7	24.4	23.8	18.2	14.4
EFTA countries					
EU27 and the United Kingdom	5.0	5.5	5.9	5.7	5.7
Other					
Western Balkans	15.2	19.3	18.5	14.4	11.8

SOURCE: UNICEF, WHO and World Bank.

child overweight in the ECA region: a sharp increase from 2000 to 2005, a steadying between 2005 and 2010, and a significant decline from 2010 to 2020. Different from the global trend, the ECA region made positive progress and saw reductions of overweight children from 10.4 percent in 2010 to 7.1 percent in 2020 and is on track to meet the 2025 target of no increase in child overweight. However, concerted efforts are needed for the region to meet the 2030 targets for the reduction of childhood overweight to less than 3 percent.

Except for Central Asia and the EU27 and the United Kingdom, which are at or slightly below the world average, all ECA subregions have percentages of overweight among children that are higher than the world average. The 2020 prevalence of overweight among young children in CIS Europe is 14.4 percent (2.5 times the world average),

FIGURE 13
Prevalence of overweight among children under five in Europe and Central Asia by country



SOURCE: UNICEF, WHO and World Bank.
https://doi.org/10.4060/cb7493en-fig13

followed by the Western Balkans (11.8 percent) and the Caucasus (9.3 percent). Although the EU27 and the United Kingdom has had the lowest prevalence in the region for the past 20 years, it has actually increased since 2000 while decreasing in all other subregions.

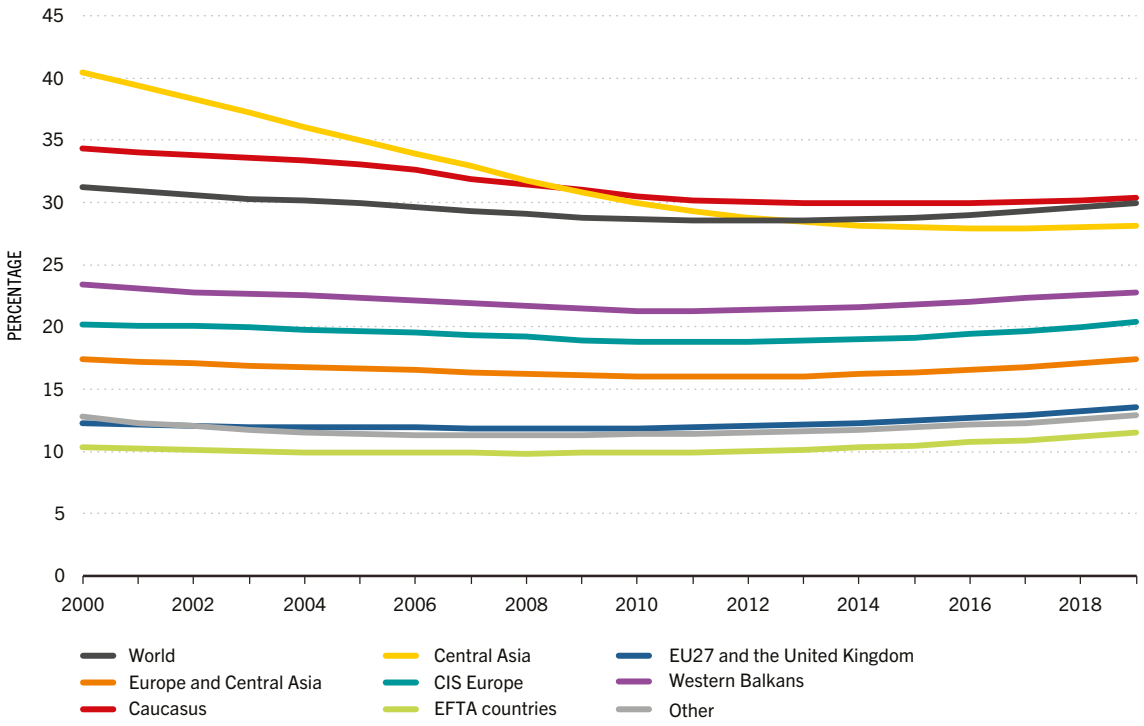
Among the 26 ECA countries with data available (FIGURE 13), 16 saw a reduction from 2000 to 2020, with the other ten experiencing an increase. Eleven ECA countries had a much higher (50 percent higher) prevalence of child overweight than the world average in 2020: Ukraine (17.0 percent), Albania (14.6 percent), Greece (13.9 percent), Bosnia and Herzegovina (12.8 percent), Armenia (10.8 percent), Serbia (10.8 percent), Montenegro (10.2 percent), North Macedonia (10 percent), Azerbaijan (9.4 percent), Kazakhstan (8.8 percent) and Portugal (8.5 percent).

2.4 ANAEMIA AMONG WOMEN OF REPRODUCTIVE AGE

The world prevalence of anaemia among women of reproductive age was 29.9 percent in 2019, barely different than its 2000 level of 31.2 percent (TABLE 10). Though the prevalence in the ECA region has always been below the world average, the region is not making progress: except for slight variations in some years, the prevalence has remained between 16 percent and 17.4 percent for the past 19 years. The prevalence of anaemia among women of reproductive age varies widely across the ECA subregions (FIGURE 14). Some subregions – such as CIS Europe (20.4 percent in 2019), the Western Balkans (22.8 percent in 2019) and the Caucasus (30.4 percent in 2019) – have had consistently higher trends. In regions with lower prevalence (EFTA countries, EU27 and the United Kingdom and the rest of ECA), anaemia has increased between 2000 and 2019.

The situation at the country level (FIGURE 15) among the 48 countries of the ECA region with data available confirms these regional divides. From 2000 to 2019, 18 countries made some progress in reducing the prevalence of anaemia, in particular Uzbekistan (21.7 percentage points), Kazakhstan (-6.2 percentage points), Turkmenistan (6.1 percentage points), Azerbaijan (5.9 percentage points), Georgia (4.0 percentage points) and Armenia (-3.1 percentage points), while 30 ECA countries saw increases in the prevalence of anaemia. In addition, three countries had values in 2019 that were higher than the world average: Kyrgyzstan (35.8 percent), Tajikistan (35.2 percent) and Azerbaijan (35.1 percent).

FIGURE 14
Prevalence of anaemia among women of reproductive age (15–49 years) in Europe and Central Asia by subregion



SOURCE: WHO.
https://doi.org/10.4060/cb7493en-fig14

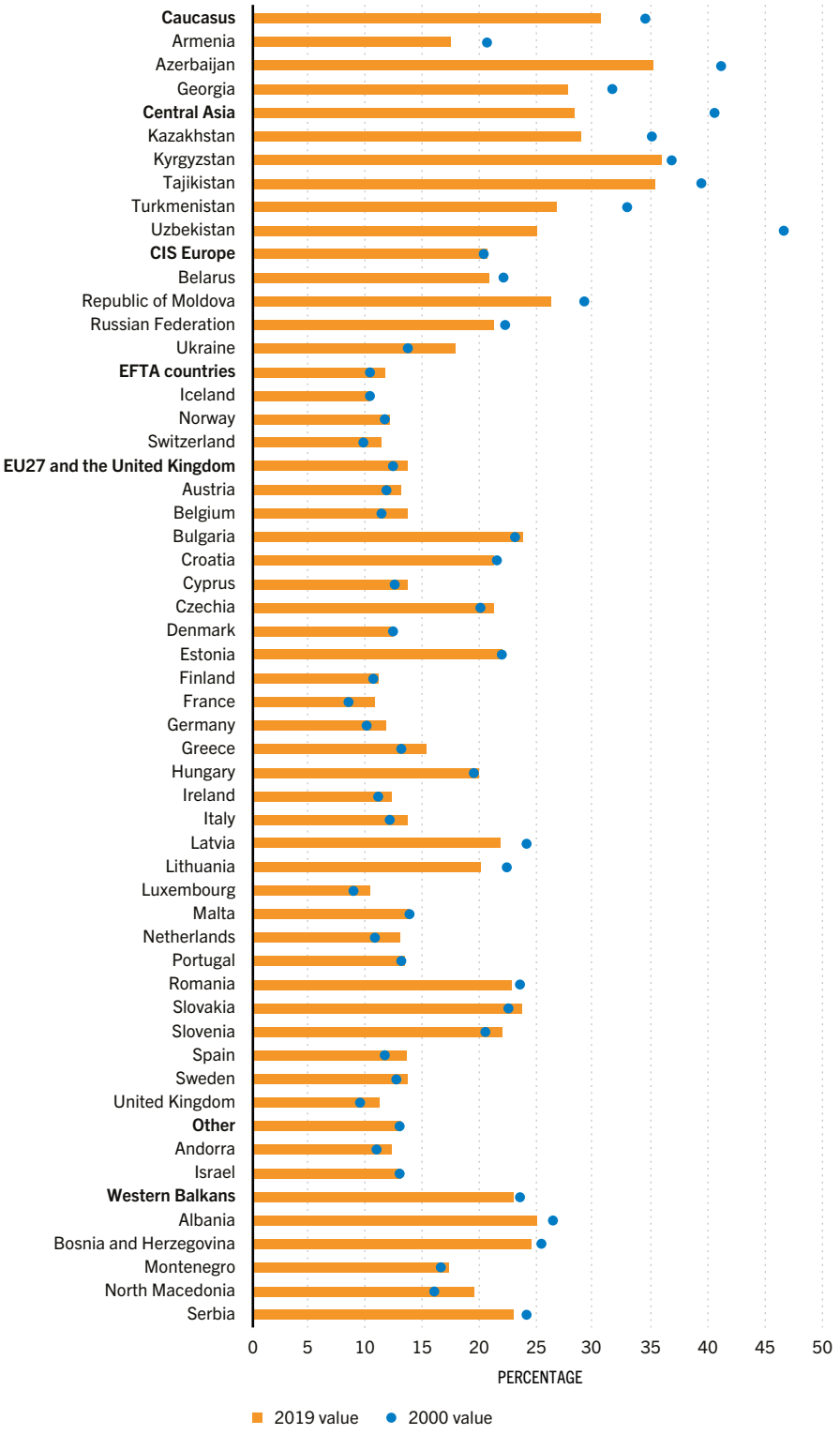
TABLE 10
Prevalence of anaemia among women of reproductive age (15–49 years) (percent)

	2000	2005	2010	2015	2019
World	**31.2**	**29.9**	**28.6**	**28.8**	**29.9**
Europe and Central Asia	17.4	16.6	16.0	16.3	17.4
Caucasus	34.3	33.0	30.5	29.9	30.4
Central Asia	40.4	35.0	29.9	28.0	28.1
CIS Europe	20.2	19.6	18.8	19.1	20.4
EFTA countries	10.3	9.9	9.9	10.4	11.5
EU27 and the United Kingdom	12.3	11.9	11.8	12.5	13.5
Other	12.8	11.4	11.4	11.9	12.9
Western Balkans	23.4	22.3	21.3	21.8	22.8

SOURCE: WHO.

FIGURE 15

Prevalence of anaemia among women of reproductive age (15–49 years) in Europe and Central Asia by country



SOURCE: WHO.
https://doi.org/10.4060/cb7493en-fig15

CHAPTER 3

ADDITIONAL WORLD HEALTH ASSEMBLY NUTRITION INDICATORS

Key messages

- The ECA region's prevalence of obese adults increased from 17.2 percent in 2000 to 23.3 percent in 2016. This is well above the global prevalence, which rose from 8.7 percent to 13.1 percent. All subregions had values above 20 percent, with CIS Europe (23.3 percent) and the EU27 and the United Kingdom (22.9 percent) among the most affected.
- Between 2012 and 2019, the global prevalence of exclusive breastfeeding of children younger than 6 months increased from 37 percent to 44 percent. The progress was even greater in the ECA region, increasing from 31.1 percent to 41.7 percent, driven by the Caucasus, with an increase from 24.1 percent to 31 percent, and Central Asia, with an increase from 29.2 percent to 44.8 percent.
- The proportion of low birthweight babies in the ECA region remains low and below the global level. The prevalence has declined, but at a slow pace. Neither the high-income countries nor the lower-income countries in the ECA region have substantially reduced the prevalence of low birthweight.

This section assesses progress towards three additional World Health Assembly (WHA) endorsed global nutrition targets: exclusive breastfeeding, low birthweight and adult obesity.

TABLE 11
Global nutrition targets and ECA progress (part 2)

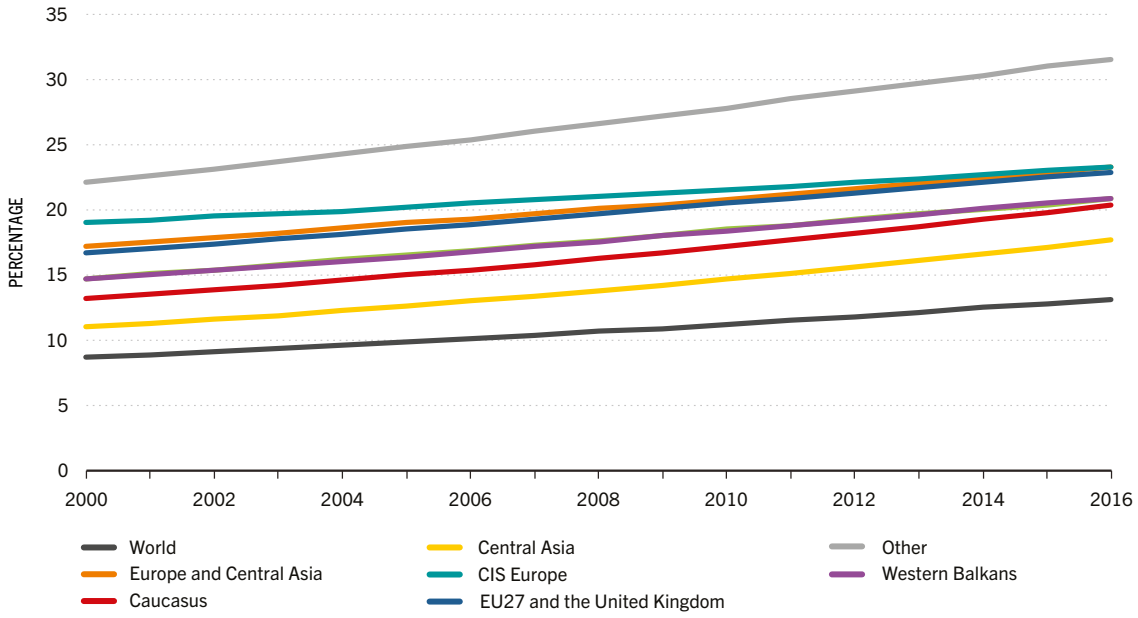
Indicators	2025 target	2030 revised target	Level in 2020 (or the latest year for which data are available)
Obesity (among adults)	No increase	No increase	ECA: 23.3 percent in 2016 and continuing to rise World: 13.1 percent
Breastfeeding (for first six months)	Increase to at least 50 percent	Increase to at least 70 percent	ECA: 41.7 percent in 2019 World: 44 percent
Low birthweight	30 percent reduction	30 percent reduction	ECA: 6.9 percent in 2015 World: 14.6 percent

SOURCE: WHO, UNICEF and FAO (in 2020 or most recent year for which data are available).

3.1 ADULT OBESITY

From 2010 to 2016, the prevalence of adult obesity rose from 11.2 percent to 13.1 percent worldwide and from 20.8 percent to 23.3 percent in the ECA region. These increases are part of an upward trend that has continued since 2000 (FIGURE 16 and TABLE 12). The trend is even more striking in the ECA subregions,

FIGURE 16
Prevalence of obesity among adults
in Europe and Central Asia by subregion



SOURCE: WHO.
https://doi.org/10.4060/cb7493en-fig16

TABLE 12
Prevalence of obesity among adults (percent)

	2000	2005	2010	2014	2015	2016
World	**8.7**	**9.9**	**11.2**	**12.5**	**12.8**	**13.1**
Europe and Central Asia	17.2	19.0	20.8	22.4	22.9	23.3
Caucasus	13.2	15.0	17.2	19.3	19.8	20.4
Central Asia	11.0	12.6	14.7	16.6	17.1	17.7
CIS Europe	19.0	20.2	21.5	22.7	23.0	23.3
EFTA countries	14.7	16.5	18.5	20.0	20.4	20.9
EU27 and the United Kingdom	16.7	18.5	20.5	22.1	22.5	22.9
Other	22.1	24.9	27.8	30.3	31.0	31.5
Western Balkans	14.7	16.4	18.4	20.1	20.5	20.9

SOURCE: WHO.

where the prevalence is consistently above global levels. The prevalence of adult obesity was above 20 percent in all ECA subregions except Central Asia (TABLE 12) in 2016. The most affected by this form of malnutrition are the EU27 and the United Kingdom (22.9 percent), CIS Europe (23.3 percent) and the rest of ECA countries (31.5 percent).

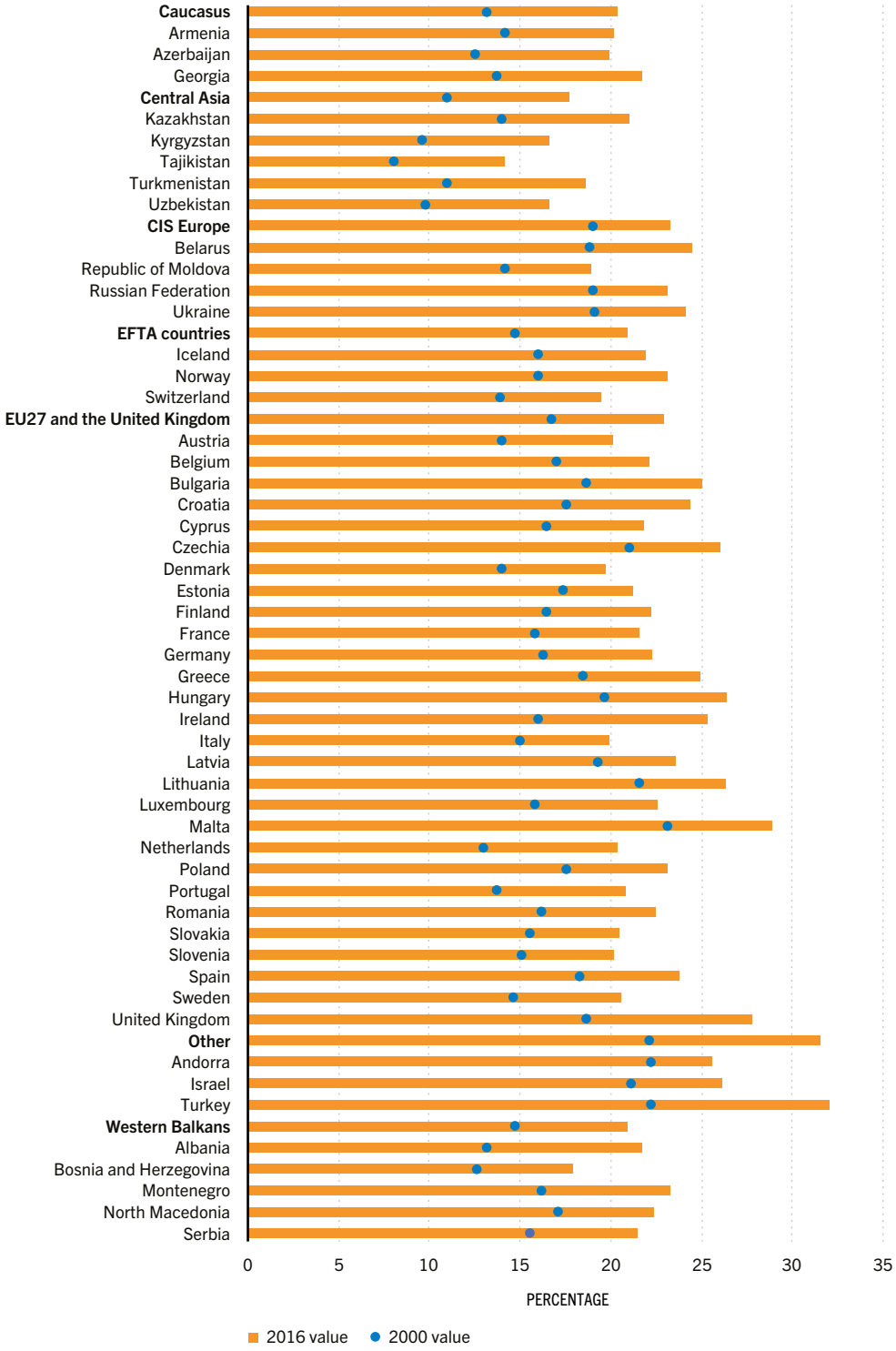
All the high-income countries in the ECA region (especially countries in the European Union and the EFTA) have a high prevalence of adult obesity that is well above the global prevalence. But adult obesity affects low- and middle-income countries, as well. FIGURE 17 shows that at least one in four adults is obese in Bulgaria (25 percent), Ireland (25.3 percent), Czechia (26 percent), Israel (26.1 percent), Lithuania (26.3 percent), Hungary (26.4 percent), the United Kingdom of Great Britain and Northern Ireland (27.8 percent) and Malta (28.9 percent). In Turkey, which is at 32.1 percent, almost one in three adults is obese. Lower prevalence of obesity among adults in the ECA region is found in Central Asian countries: Kyrgyzstan (16.6 percent), Uzbekistan (16.6 percent) and Tajikistan (14.1 percent). However, countries in Central Asia had larger increases in the prevalence of adult obesity from 2000 to 2016: 77.5 percent in Tajikistan, 72.9 percent in Kyrgyzstan, 69.4 percent in Uzbekistan and 69.1 percent in Turkmenistan.

3.2 PREVALENCE OF EXCLUSIVE BREASTFEEDING DURING THE FIRST SIX MONTHS OF LIFE

The ECA region has made significant progress in exclusive breastfeeding, but the prevalence remains below the global average. From 2012 to 2019, the prevalence of exclusive breastfeeding of infants increased from 37 percent to 44 percent worldwide – and more sharply in the ECA region, from 31.1 percent to 41.7 percent (TABLE 13 and FIGURE 18). Contributing to this regional performance was the Caucasus subregion, with an increase from 24.1 percent to 31 percent, and Central Asia, with an increase from 29.2 percent to 44.8 percent. Some countries had a higher prevalence than the world average, such as Uzbekistan (49.5 percent in 2018) and Turkmenistan (58.3 percent in 2015).

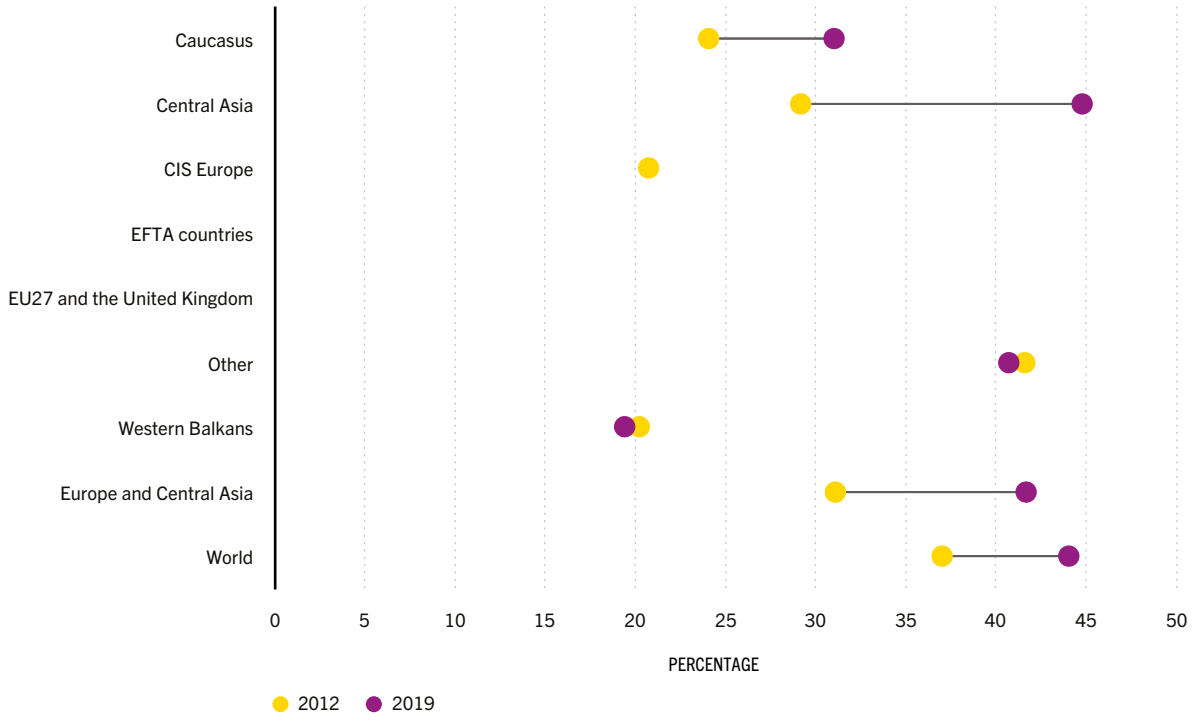
FIGURE 19 compares the levels of the prevalence of breastfeeding in ECA countries between the first year available and the last year available for each. In the Caucasus, Armenia increased the prevalence of exclusive breastfeeding for children 0–5 months old from 20.5 percent in 2000 to 44.5 percent in 2015. In Central Asia, Tajikistan achieved a notable jump from 14.2 percent in 2000 to 35.8 percent in 2017; the increase in Uzbekistan was even greater from 13.4 percent in 2000 to 49.5 percent in 2017. The most remarkable progress happened in Turkmenistan, where the rate was 12.1 percent in 2000 but jumped to 58.1 percent in 15 years.

FIGURE 17
Prevalence of obesity among adults
in Europe and Central Asia by country



SOURCE: WHO.
https://doi.org/10.4060/cb7493en-fig17

FIGURE 18
Prevalence of exclusive breastfeeding among infants 0–5 months of age in Europe and Central Asia by subregion



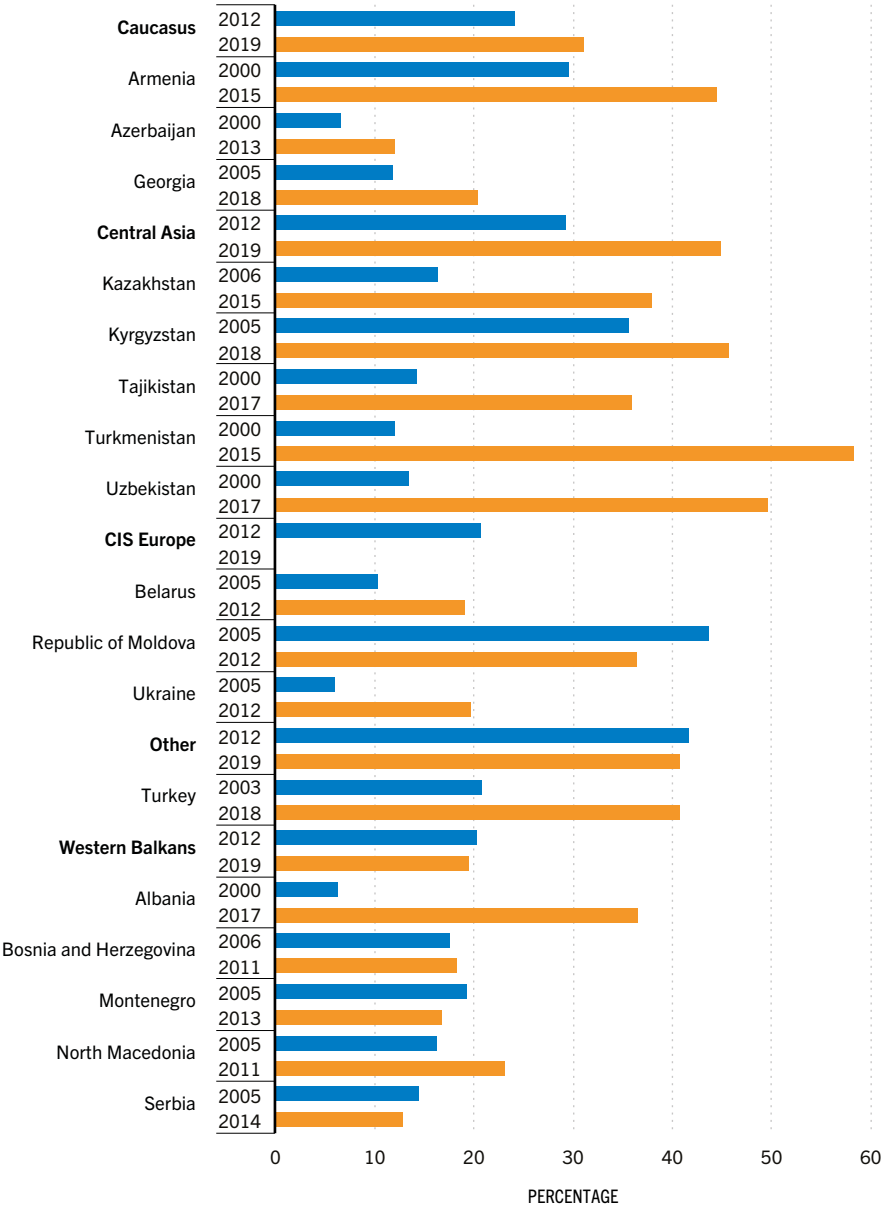
SOURCE: UNICEF.
https://doi.org/10.4060/cb7493en-fig18

TABLE 13
Prevalence of exclusive breastfeeding among infants 0–5 months of age (percent)

	2012	2019
World	**37.0**	**44.0**
Europe and Central Asia	31.1	41.7
Caucasus	24.1	31.0
Central Asia	29.2	44.8
CIS Europe	20.7	
EFTA countries		
EU27 and the United Kingdom		
Other	41.6	40.7
Western Balkans	20.2	19.4

SOURCE: UNICEF.

FIGURE 19
Prevalence of exclusive breastfeeding among infants 0–5 months of age in Europe and Central Asia by country

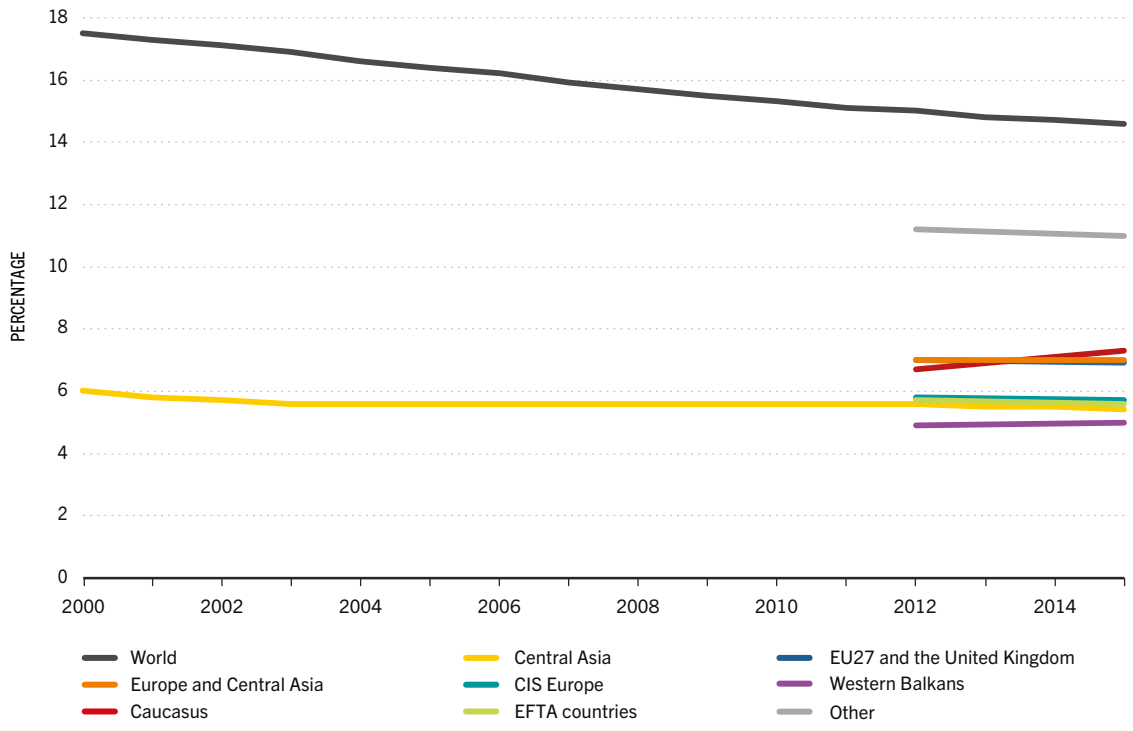


SOURCE: UNICEF.
https://doi.org/10.4060/cb7493en-fig19

3.3 PREVALENCE OF LOW BIRTHWEIGHT

The world's prevalence of low birthweight steadily declined, but at a slow pace from 2000 (17.5 percent) to 2015 (14.6 percent) (FIGURE 20 and TABLE 14). Although the data for the ECA region are incomplete, with some years missing, the regional trend seems to have followed the same slow pattern, with a prevalence of about half the world average but with a marginal decline, from 7 percent in 2012 to 6.9 percent in 2015. From 2012 to 2015, the prevalence of low birthweight declined in CIS Europe (from 5.8 percent to 5.7 percent) and EFTA (from 5.7 percent to 5.6 percent). It stayed at 7 percent in the EU27 and the United Kingdom and increased slightly in the Caucasus (6.7 percent to 7.3 percent) and the Western Balkans (4.9 percent to 5 percent).

FIGURE 20
Prevalence of low birthweight
in Europe and Central Asia by subregion



SOURCE: UNICEF and WHO.
https://doi.org/10.4060/cb7493en-fig20

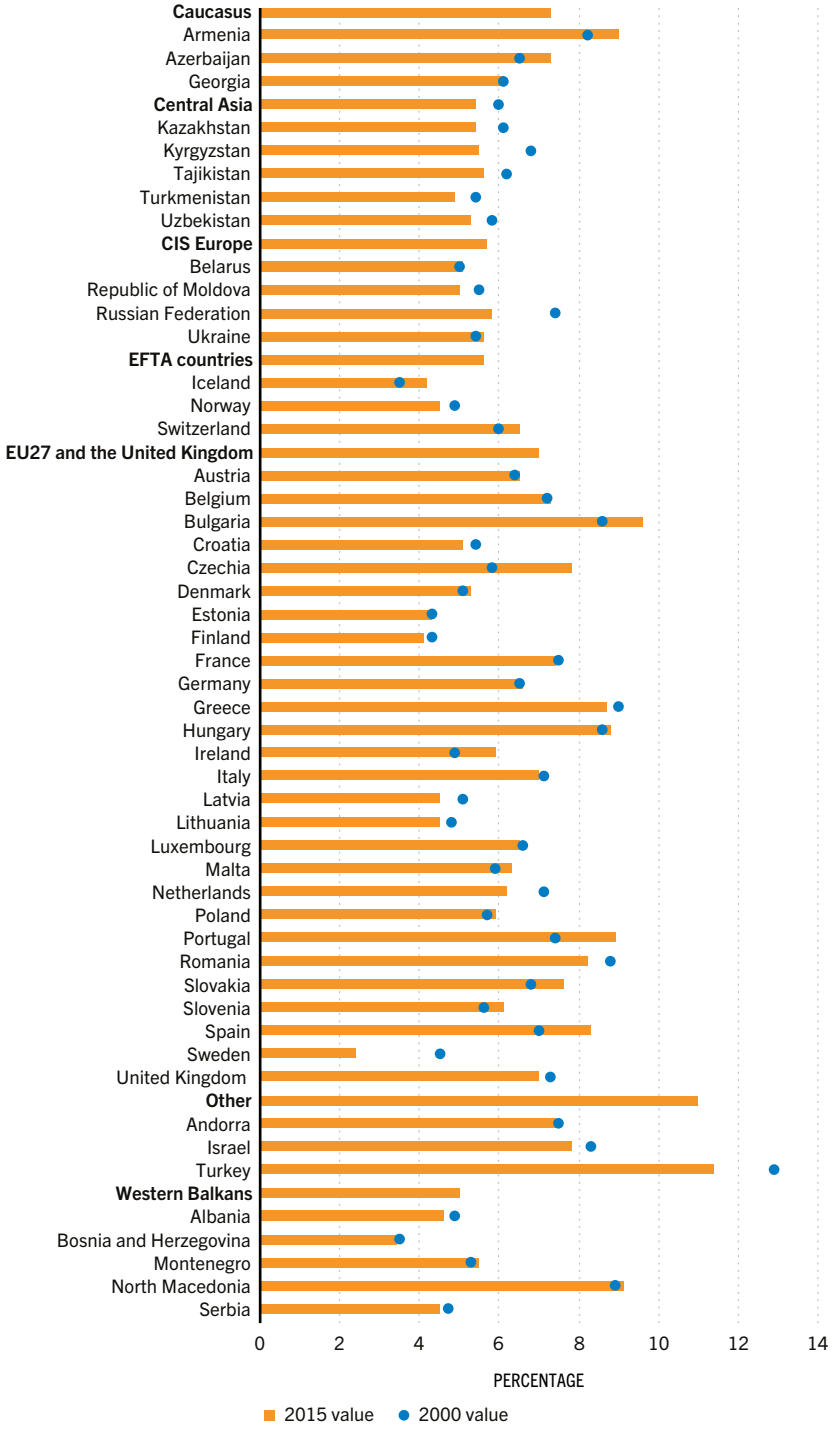
FIGURE 21 shows a fuller picture of the differences in the trends and levels among ECA countries. About half the 49 ECA countries with data available have not reduced their prevalence of low birthweight. In Czechia, the prevalence of low birthweight increased by 2 percentage points, from 5.8 percent in 2000 to 7.8 percent in 2015. Among the countries that have reduced their prevalence of low birthweight, the largest improvement took place in Sweden, where the prevalence decreased by 2.1 percentage points.

TABLE 14
Prevalence of low birthweight (percent)

	2000	2005	2010	2012	2014	2015
World	**17.5**	**16.4**	**15.3**	**15.0**	**14.7**	**14.6**
Europe and Central Asia				7.0		6.9
Caucasus				6.7		7.3
Central Asia	6.0	5.6	5.6	5.6	5.5	5.4
CIS Europe				5.8		5.7
EFTA countries				5.7		5.6
EU27 and the United Kingdom				7.0		7.0
Other				11.2		11.0
Western Balkans				4.9		5.0

SOURCE: UNICEF and WHO.

FIGURE 21
Prevalence of low birthweight in Europe and Central Asia by country



SOURCE: UNICEF and WHO.
https://doi.org/10.4060/cb7493en-fig21

ANNEX 1
DATA TABLES

TABLE 15
Prevalence of undernourishment (percent)

	2000–2002	2004–2006	2009–2011	2014–2016	2016–2018	2017–2019	2018–2020
WORLD	**13.2**	**12.3**	**9.4**	**8.3**	**8.2**	**8.3**	**8.9**
Europe and Central Asia	2.6	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Caucasus	16.2	6.0	3.0	3.3	3.2	3.1	3.3
Central Asia	13.4	10.8	5.5	3.0	3.2	3.1	3.2
CIS Europe	3.7	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
EFTA countries	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
EU27 and the United Kingdom	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Other	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Western Balkans	4.1	3.7	2.7	3.4	3.2	3.0	3.1
Albania	4.9	8.9	4.9	4.7	4.1	4.0	3.9
Andorra							
Armenia	26.1	12.3	4.3	2.8	3.1	3.2	3.4
Austria	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Azerbaijan	17.0	4.8	<2.5	<2.5	<2.5	<2.5	<2.5
Belarus	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Belgium	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Bosnia and Herzegovina	3.2	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Bulgaria	4.0	4.9	4.3	3.4	3.1	2.8	3.0
Croatia	6.8	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Cyprus	5.1	7.6	6.2	<2.5	<2.5	<2.5	<2.5
Czechia	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Denmark	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Estonia	3.6	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Finland	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
France	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Georgia	7.7	4.1	4.2	8.1	8.3	8.1	8.7
Germany	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Greece	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Hungary	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Iceland	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Ireland	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5

TABLE 15
(Continued)

	2000–2002	2004–2006	2009–2011	2014–2016	2016–2018	2017–2019	2018–2020
Israel	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Italy	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Kazakhstan	6.5	7.3	3.5	<2.5	2.6	2.5	<2.5
Kyrgyzstan	15.1	9.0	8.3	8.0	7.7	7.2	7.2
Latvia	4.6	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Lithuania	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Luxembourg	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Malta	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Montenegro	9.6	5.5	<2.5	<2.5	<2.5	<2.5	<2.5
Netherlands	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
North Macedonia	7.5	5.0	3.4	3.3	2.7	<2.5	2.7
Norway	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Poland	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Portugal	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Republic of Moldova							
Romania	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Russian Federation	4.0	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Serbia	3.1	<2.5	<2.5	4.1	4.0	3.8	3.9
Slovakia	6.1	5.5	3.5	5.9	4.5	4.1	4.0
Slovenia	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Spain	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Sweden	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Switzerland	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Tajikistan							
Turkey	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Turkmenistan	6.8	4.2	4.5	3.4	3.7	3.9	4.1
Ukraine	3.0	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
United Kingdom of Great Britain and Northern Ireland	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5	<2.5
Uzbekistan	17.9	14.7	5.4	<2.5	<2.5	<2.5	<2.5

SOURCE: FAO.

TABLE 16
Number of undernourished people
(millions)

	2000–2002	2004–2006	2009–2011	2014–2016	2016–2018	2017–2019	2018–2020
WORLD	**819.2**	**804.0**	**652.3**	**613.8**	**622.7**	**632.9**	**683.9**
Europe and Central Asia	22.7						
Caucasus	2.5	0.9	0.5	0.5	0.5	0.5	0.6
Central Asia	7.5	6.3	3.4	2.1	2.2	2.2	2.3
CIS Europe	7.7						
EFTA countries							
EU27 and the United Kingdom							
Other							
Western Balkans	0.8	0.7	0.5	0.6	0.6	0.5	0.5
Albania	0.2	0.3	0.1	0.1	0.1	0.1	0.1
Andorra							
Armenia	0.8	0.4	0.1	<0.1	<0.1	<0.1	0.1
Austria							
Azerbaijan	1.4	0.4					
Belarus							
Belgium							
Bosnia and Herzegovina	0.1						
Bulgaria	0.3	0.4	0.3	0.2	0.2	0.2	0.2
Croatia	0.3						
Cyprus	<0.1	<0.1	<0.1				
Czechia							
Denmark							
Estonia	<0.1						
Finland							
France							
Georgia	0.3	0.2	0.2	0.3	0.3	0.3	0.3
Germany							
Greece							
Hungary							
Iceland							
Ireland							
Israel							
Italy							
Kazakhstan	1.0	1.1	0.6		0.5	0.5	
Kyrgyzstan	0.8	0.5	0.5	0.5	0.5	0.5	0.5
Latvia	0.1						
Lithuania							
Luxembourg							
Malta							
Montenegro	<0.1	<0.1					

TABLE 16
(Continued)

	2000–2002	2004–2006	2009–2011	2014–2016	2016–2018	2017–2019	2018–2020
Netherlands							
North Macedonia	0.2	0.1	<0.1	<0.1	<0.1		<0.1
Norway							
Poland							
Portugal							
Republic of Moldova							
Romania							
Russian Federation	5.9						
Serbia	0.3			0.4	0.4	0.3	0.3
Slovakia	0.3	0.3	0.2	0.3	0.2	0.2	0.2
Slovenia							
Spain							
Sweden							
Switzerland							
Tajikistan							
Turkey							
Turkmenistan	0.3	0.2	0.2	0.2	0.2	0.2	0.2
Ukraine	1.4						
United Kingdom of Great Britain and Northern Ireland							
Uzbekistan	4.5	3.9	1.6				

SOURCE: FAO.

TABLE 17
Prevalence of food insecurity (percent)

	Moderate or severe food insecurity				Severe food insecurity			
	2014–2016	2016–2018	2017–2019	2018–2020	2014–2016	2016–2018	2017–2019	2018–2020
WORLD	**23.0**	**24.8**	**25.8**	**27.6**	**8.2**	**8.9**	**9.5**	**10.5**
Europe and Central Asia	10.6	10.4	10.3	10.7	1.9	1.8	1.7	1.9
Caucasus	14.2	16.5	17.3	16.8	2.0	2.1	2.0	2.5
Central Asia	9.2	12.5	13.6	15.0	1.7	2.4	2.4	3.1
CIS Europe	11.1	11.4	11.1	12.8	1.0	1.0	1.0	1.5
EFTA countries	4.8	3.9	3.6	2.9	1.4	0.9	0.9	0.6
EU27 and the United Kingdom	7.7	6.6	6.3	6.2	1.6	1.3	1.2	1.2
Other	27.1	26.2	27.2	27.4	5.1	5.6	5.5	5.8
Western Balkans	16.0	16.2	16.1	15.9	3.3	3.4	3.4	3.8
Albania	38.8	38.6	37.1	33.8	10.0	11.0	10.0	8.8
Andorra								
Armenia		17.1	14.8	12.7		1.2	1.1	1.1
Austria	5.5	4.4	3.6	3.0	1.1	1.1	1.1	0.9
Azerbaijan	5.9	8.6	9.6	8.9	<0.5	<0.5	<0.5	<0.5
Belarus								
Belgium				3.7				1.1
Bosnia and Herzegovina	9.6	8.7	9.2	10.0	1.5	1.3	1.5	2.0
Bulgaria	14.9	12.0	12.5	13.2	1.9	2.1	1.9	2.4
Croatia	6.5	7.8	10.0	11.0	0.6	0.8	0.9	1.3
Cyprus								
Czechia	5.8	3.9	3.8	4.2	0.7	<0.5	<0.5	0.8
Denmark	5.9	5.4	5.2	5.0	1.0	1.1	1.1	1.1
Estonia	9.5	8.2	7.4	7.9	0.9	1.0	0.9	0.8
Finland	9.3	8.3	7.7	8.0	2.4	2.1	2.0	1.9
France	6.8	6.3	6.0	5.8	1.6	0.9	0.7	0.7
Georgia	31.8	35.5	38.3	39.7	7.0	7.5	7.3	9.5
Germany	4.1	3.6	3.5	3.4	1.0	0.7	0.7	0.7
Greece	15.8	16.6	13.3	8.6	2.6	3.2	2.3	1.7
Hungary	11.3	8.8	6.9	8.6	1.4	0.9	0.8	1.4
Iceland	6.4	6.8	7.2	6.6	1.7	1.5	1.5	1.5
Ireland	8.9	6.6	7.2	8.3	3.4	2.9	3.5	4.3
Israel	11.0	12.3	12.9	13.7	1.3	1.6	1.7	1.9
Italy	8.6	7.5	7.2	6.7	1.2	1.1	1.1	1.2
Kazakhstan		2.1	2.1	2.3		<0.5	<0.5	<0.5
Kyrgyzstan		6.3	6.3	7.0		0.8	0.8	1.1
Latvia	9.9	9.4	9.5	10.2	0.6	0.6	0.6	0.7
Lithuania	15.3	12.3	10.7	11.3	2.5	1.6	1.1	1.7
Luxembourg	4.7	3.3	3.3	3.1	1.8	0.9	0.9	0.8

TABLE 17
(Continued)

	Moderate or severe food insecurity				Severe food insecurity			
	2014–2016	2016–2018	2017–2019	2018–2020	2014–2016	2016–2018	2017–2019	2018–2020
Malta	5.9	5.1	4.4	4.3	1.5	1.0	0.8	0.9
Montenegro	12.6	12.0	12.9	13.5	2.1	2.3	2.2	2.8
Netherlands	5.7	5.1	5.1	4.7	1.5	1.5	1.7	1.4
North Macedonia	15.1	14.3	14.4	17.7	3.6	3.1	3.2	5.0
Norway	4.8	4.8	4.8	4.1	1.1	1.1	1.1	1.0
Poland	8.9	5.3	4.3	5.8	1.8	0.7	0.5	<0.5
Portugal	14.7	11.6	10.7	11.5	4.1	3.2	2.9	3.2
Republic of Moldova	19.3	24.6	27.5	27.2	1.6	2.9	4.0	4.5
Romania	19.3	14.7	14.5	13.9	5.6	4.0	3.4	3.4
Russian Federation	8.2	7.9	7.1	6.0	0.7	0.6	0.5	<0.5
Serbia	11.4	12.5	12.4	12.0	1.7	1.9	2.0	2.6
Slovakia	6.2	5.0	5.0	6.0	1.1	0.9	0.8	1.1
Slovenia	12.3	11.2	10.2	8.2	0.9	0.6	0.5	<0.5
Spain	7.1	7.5	8.6	8.8	1.1	1.4	1.8	1.8
Sweden	4.5	5.4	5.7	5.3	0.8	1.0	1.2	1.2
Switzerland	4.8	3.1	2.6	2.0	1.5	0.8	0.7	<0.5
Tajikistan								
Turkey								
Turkmenistan								
Ukraine					2.0	2.0	1.6	2.5
United Kingdom of Great Britain and Northern Ireland	6.3	5.6	4.9	3.9	1.9	1.7	1.3	0.7
Uzbekistan	11.2	14.9	17.2	19.7	1.9	2.2	2.8	4.0

SOURCE: FAO.

TABLE 18
Number of food insecure people (millions)

	Moderate or severe food insecurity				Severe food insecurity			
	2014–2016	2016–2018	2017–2019	2018–2020	2014–2016	2016–2018	2017–2019	2018–2020
WORLD	**1 696.1**	**1 874.4**	**1 970.1**	**2 132.3**	**607.7**	**669.4**	**722.7**	**813.0**
Europe and Central Asia	97.2	95.7	95.7	99.8	17.1	16.6	16.1	17.8
Caucasus	2.3	2.8	2.9	2.9	0.3	0.4	0.3	0.4
Central Asia	6.3	8.9	9.8	10.9	1.1	1.7	1.8	2.3
CIS Europe	22.6	23.2	22.5	26.0	2.1	2.0	2.1	3.0
EFTA countries	0.7	0.5	0.5	0.4	0.2	0.1	0.1	0.1
EU27 and the United Kingdom	39.0	33.9	32.4	31.5	8.3	6.8	6.2	6.0
Other	23.5	23.5	24.7	25.2	4.5	5.0	5.0	5.3
Western Balkans	2.9	2.9	2.9	2.8	0.6	0.6	0.6	0.7
Albania	1.1	1.1	1.1	1.0	0.3	0.3	0.3	0.3
Andorra								
Armenia		0.5	0.4	0.4		<0.1	<0.1	<0.1
Austria	0.5	0.4	0.3	0.3	<0.1	<0.1	<0.1	<0.1
Azerbaijan	0.6	0.8	1.0	0.9	<0.1	<0.1	<0.1	<0.1
Belarus								
Belgium				0.4				0.1
Bosnia and Herzegovina	0.3	0.3	0.3	0.3	<0.1	<0.1	<0.1	<0.1
Bulgaria	1.1	0.9	0.9	0.9	0.1	0.2	0.1	0.2
Croatia	0.3	0.3	0.4	0.5	<0.1	<0.1	<0.1	<0.1
Cyprus								
Czechia	0.6	0.4	0.4	0.4	<0.1	<0.1	<0.1	<0.1
Denmark	0.3	0.3	0.3	0.3	<0.1	<0.1	<0.1	<0.1
Estonia	0.1	0.1	<0.1	0.1	<0.1	<0.1	<0.1	<0.1
Finland	0.5	0.5	0.4	0.4	0.1	0.1	0.1	0.1
France	4.4	4.1	3.9	3.7	1.0	0.6	0.5	0.4
Georgia	1.3	1.4	1.5	1.6	0.3	0.3	0.3	0.4
Germany	3.3	3.0	2.9	2.9	0.8	0.6	0.6	0.6
Greece	1.7	1.8	1.4	0.9	0.3	0.3	0.2	0.2
Hungary	1.1	0.9	0.7	0.8	0.1	<0.1	<0.1	0.1
Iceland	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1
Ireland	0.4	0.3	0.3	0.4	0.2	0.1	0.2	0.2
Israel	0.9	1.0	1.1	1.2	0.1	0.1	0.1	0.2
Italy	5.2	4.6	4.4	4.0	0.7	0.7	0.7	0.7
Kazakhstan		0.4	0.4	0.4		<0.1	<0.1	<0.1
Kyrgyzstan		0.4	0.4	0.4		<0.1	<0.1	<0.1
Latvia	0.2	0.2	0.2	0.2	<0.1	<0.1	<0.1	<0.1
Lithuania	0.4	0.3	0.3	0.3	<0.1	<0.1	<0.1	<0.1
Luxembourg	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1

TABLE 18
(Continued)

	Moderate or severe food insecurity				Severe food insecurity			
	2014–2016	2016–2018	2017–2019	2018–2020	2014–2016	2016–2018	2017–2019	2018–2020
Malta	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1
Montenegro	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1
Netherlands	1.0	0.9	0.9	0.8	0.3	0.3	0.3	0.2
North Macedonia	0.3	0.3	0.3	0.4	<0.1	<0.1	<0.1	0.1
Norway	0.2	0.3	0.3	0.2	<0.1	<0.1	<0.1	<0.1
Poland	3.4	2.0	1.6	2.2	0.7	0.3	0.2	0.2
Portugal	1.5	1.2	1.1	1.2	0.4	0.3	0.3	0.3
Republic of Moldova	0.8	1.0	1.1	1.1	<0.1	0.1	0.2	0.2
Romania	3.8	2.9	2.8	2.7	1.1	0.8	0.7	0.6
Russian Federation	11.9	11.5	10.3	8.8	1.0	0.9	0.7	0.4
Serbia	1.0	1.1	1.1	1.1	0.2	0.2	0.2	0.2
Slovakia	0.3	0.3	0.3	0.3	<0.1	<0.1	<0.1	<0.1
Slovenia	0.3	0.2	0.2	0.2	<0.1	<0.1	<0.1	<0.1
Spain	3.3	3.5	4.0	4.1	0.5	0.7	0.8	0.9
Sweden	0.4	0.5	0.6	0.5	<0.1	0.1	0.1	0.1
Switzerland	0.4	0.3	0.2	0.2	0.1	<0.1	<0.1	<0.1
Tajikistan								
Turkey								
Turkmenistan								
Ukraine					0.9	0.9	0.7	1.1
United Kingdom of Great Britain and Northern Ireland	4.1	3.7	3.3	2.6	1.2	1.1	0.9	0.5
Uzbekistan	3.5	4.8	5.6	6.5	0.6	0.7	0.9	1.3

SOURCE: FAO.

TABLE 19
Prevalence of stunting among children under five (percent)

	2000	2005	2010	2015	2018	2019	2020
WORLD	**33.1**	**30.7**	**27.7**	**24.4**	**22.9**	**22.4**	**22.0**
Europe and Central Asia	14.2	11.8	10.2	8.9	8.0	7.7	7.3
Caucasus	21.5	20.6	16.2	14.0	13.4	13.2	13.1
Central Asia	29.0	22.3	17.1	12.8	10.9	10.4	10.0
CIS Europe	18.9	17.4	16.1	15.6	14.9	14.3	13.1
EFTA countries							
EU27 and the United Kingdom	3.8	3.5	3.2	3.0	2.9	2.9	2.8
Other							
Western Balkans	14.9	12.9	9.9	8.2	7.4	7.1	6.8
Albania	29.7	27.5	20.3	14.3	11.4	10.4	9.6
Armenia	17.7	19.3	15.6	12.0	10.0	9.5	9.1
Azerbaijan	24.3	23.1	18.4	16.5	16.3	16.3	16.3
Belarus	4.9	4.5	4.1	3.9	3.9	3.9	3.9
Belgium	4.0	3.4	2.8	2.5	2.4	2.4	2.3
Bosnia and Herzegovina	12.7	10.9	9.8	9.0	9.1	9.1	9.1
Bulgaria	10.0	9.1	7.9	7.1	6.8	6.6	6.4
Czechia	2.7	2.6	2.5	2.5	2.5	2.5	2.5
Estonia	2.1	1.6	1.4	1.3	1.2	1.2	1.2
Georgia	16.2	14.3	10.3	7.6	6.3	5.9	5.7
Germany	1.5	1.4	1.4	1.5	1.6	1.6	1.6
Greece	2.7	2.3	2.1	2.1	2.2	2.2	2.2
Kazakhstan	17.7	15.3	12.3	9.1	7.6	7.1	6.7
Kyrgyzstan	29.9	23.1	17.7	13.6	12.1	11.7	11.4
Montenegro	8.7	8.5	8.3	8.0	8.1	8.1	8.1
Netherlands	1.3	1.4	1.5	1.5	1.6	1.6	1.6
North Macedonia	8.8	8.7	6.6	5.0	4.4	4.2	4.1
Poland	3.3	2.7	2.4	2.3	2.3	2.3	2.3
Portugal	4.9	4.5	4.0	3.6	3.4	3.3	3.3
Republic of Moldova	12.3	9.9	7.8	6.2	5.4	5.1	4.9
Romania	13.7	12.7	11.1	10.2	10.0	9.9	9.7
Serbia	9.7	8.1	6.5	6.0	5.7	5.5	5.3
Tajikistan	41.6	36.9	29.5	21.2	17.0	16.0	15.3
Turkmenistan	27.4	20.4	14.7	10.4	8.5	8.0	7.6
Ukraine	22.4	20.8	19.2	18.9	18.3	17.5	15.9
Uzbekistan	29.5	21.0	15.8	12.1	10.7	10.3	9.9

SOURCE: UNICEF, WHO and World Bank.

TABLE 20
Prevalence of wasting among children under five (percent)

	2000	2005	2010	2015	2018	2019	2020
WORLD							**6.7**
Europe and Central Asia							1.9
Caucasus							2.3
Central Asia							2.3
CIS Europe							
EFTA countries							
EU27 and the United Kingdom							0.7
Other							1.7
Western Balkans							2.5
Albania	12.2	7.3					
Armenia	2.5	5.4	4.1				
Azerbaijan	9.0						
Belarus		2.2					
Bosnia and Herzegovina	7.4						
Georgia		3.0			0.6		
Kazakhstan			4.1	3.1			
Kyrgyzstan					2.0		
Montenegro		4.2			2.2		
North Macedonia		3.4				3.4	
Republic of Moldova		5.8					
Romania	4.3						
Serbia		4.5	3.5			2.6	
Tajikistan	9.4	8.7					
Turkey					1.7		
Turkmenistan	7.1			4.2		4.1	
Ukraine	8.2						

SOURCE: UNICEF, WHO and World Bank.

TABLE 21
Prevalence of overweight among children under five (percent)

	2000	2005	2010	2015	2018	2019	2020
WORLD	**5.4**	**5.7**	**5.6**	**5.6**	**5.7**	**5.7**	**5.7**
Europe and Central Asia	9.0	10.4	10.4	8.5	7.5	7.3	7.1
Caucasus	10.2	12.9	13.1	10.6	9.6	9.4	9.3
Central Asia	9.6	10.8	9.5	6.9	6.0	5.8	5.6
CIS Europe	19.7	24.4	23.8	18.2	15.5	14.9	14.4
EFTA countries							
EU27 and the United Kingdom	5.0	5.5	5.9	5.7	5.7	5.7	5.7
Other							
Western Balkans	15.2	19.3	18.5	14.4	12.5	12.1	11.8
Albania	18.7	24.5	23.6	18.3	15.7	15.1	14.6
Armenia	12.3	16.0	15.9	12.6	11.3	11.0	10.8
Azerbaijan	7.3	9.9	11.3	10.2	9.6	9.5	9.4
Belarus	8.4	10.4	10.0	7.8	7.0	6.9	6.8
Belgium	3.9	4.0	4.3	4.7	4.9	5.0	5.1
Bosnia and Herzegovina	16.4	21.4	20.6	15.7	13.6	13.2	12.8
Bulgaria	8.6	10.1	9.1	6.7	5.9	5.7	5.7
Czechia	4.9	5.2	5.7	6.2	6.4	6.5	6.6
Estonia	4.0	4.3	4.9	5.3	5.6	5.6	5.7
Georgia	16.8	19.2	16.0	10.5	8.4	8.0	7.6
Germany	3.6	3.5	3.6	3.8	4.0	4.1	4.1
Greece	10.7	12.5	13.8	14.3	14.1	14.1	13.9
Kazakhstan	8.1	11.3	12.0	10.1	9.2	9.0	8.8
Kyrgyzstan	7.9	9.2	8.4	6.5	5.9	5.8	5.8
Montenegro	13.7	17.4	16.7	12.6	10.9	10.6	10.2
Netherlands	3.2	3.4	3.8	4.4	4.8	4.9	5.0
North Macedonia	11.3	14.6	14.4	11.5	10.4	10.2	10.0
Poland	4.5	5.0	5.6	6.2	6.5	6.6	6.7
Portugal	5.6	6.4	7.3	8.1	8.4	8.5	8.5
Republic of Moldova	6.8	7.7	6.9	5.1	4.5	4.4	4.3
Romania	8.9	10.9	10.3	7.9	7.0	6.8	6.7
Serbia	13.7	17.3	16.8	13.0	11.3	11.0	10.8
Tajikistan	6.6	7.5	6.4	4.4	3.7	3.6	3.5
Turkmenistan	4.9	5.9	5.4	4.3	3.9	3.8	3.8
Ukraine	23.1	28.8	27.9	21.4	18.3	17.6	17.0
Uzbekistan	12.2	12.9	10.1	6.6	5.4	5.2	5.0

SOURCE: UNICEF, WHO and World Bank.

TABLE 22

Prevalence of anaemia among women of reproductive age (15–49 years) (percent)

	2000	2005	2010	2015	2017	2018	2019
WORLD	**31.2**	**29.9**	**28.6**	**28.8**	**29.3**	**29.6**	**29.9**
Europe and Central Asia	17.4	16.6	16.0	16.3	16.8	17.1	17.4
Caucasus	34.3	33.0	30.5	29.9	30.0	30.1	30.4
Central Asia	40.4	35.0	29.9	28.0	27.9	28.0	28.1
CIS Europe	20.2	19.6	18.8	19.1	19.7	20.0	20.4
EFTA countries	10.3	9.9	9.9	10.4	10.9	11.2	11.5
EU27 and the United Kingdom	12.3	11.9	11.8	12.5	12.9	13.2	13.5
Other	12.8	11.4	11.4	11.9	12.3	12.6	12.9
Western Balkans	23.4	22.3	21.3	21.8	22.3	22.5	22.8
Albania	26.2	23.5	21.1	22.9	24.2	24.5	24.8
Armenia	20.4	20.0	18.0	17.1	17.1	17.1	17.3
Austria	11.7	11.3	11.3	12.0	12.5	12.7	13.0
Azerbaijan	41.0	39.2	35.4	34.6	34.7	34.8	35.1
Belarus	21.9	21.0	19.1	19.5	20.1	20.3	20.6
Belgium	11.2	10.8	10.9	12.0	12.8	13.2	13.6
Bosnia and Herzegovina	25.3	24.4	23.9	23.8	23.9	24.1	24.4
Bulgaria	22.9	23.5	22.6	22.8	23.1	23.4	23.6
Croatia	21.3	20.8	20.4	20.5	20.6	20.7	21.0
Cyprus	12.4	12.0	11.8	12.4	12.9	13.2	13.6
Czechia	19.9	19.3	19.6	20.5	20.8	20.9	21.1
Denmark	12.2	11.6	11.2	11.6	12.0	12.1	12.2
Estonia	21.7	20.9	20.5	21.2	21.3	21.5	21.7
Finland	10.5	9.9	9.6	10.0	10.4	10.6	10.9
France	8.4	8.5	8.6	9.4	10.0	10.3	10.6
Georgia	31.5	28.9	27.4	26.8	26.9	27.2	27.5
Germany	9.9	9.5	9.4	10.2	10.9	11.3	11.7
Greece	13.0	12.5	12.6	13.6	14.3	14.7	15.1
Hungary	19.3	18.9	19.5	19.6	19.4	19.5	19.7
Iceland	10.2	9.4	9.3	9.6	9.9	10.1	10.3
Ireland	11.0	10.5	10.8	11.2	11.6	11.8	12.1
Israel	12.8	11.4	11.4	11.9	12.3	12.6	12.9
Italy	12.0	11.6	11.5	12.5	13.0	13.3	13.6
Kazakhstan	34.9	30.8	27.5	27.7	28.2	28.4	28.7
Kyrgyzstan	36.6	35.4	34.2	34.8	35.2	35.5	35.8
Latvia	23.9	21.7	20.7	21.2	21.3	21.4	21.6
Lithuania	22.2	19.5	18.5	19.1	19.4	19.6	19.9
Luxembourg	8.8	8.6	8.8	9.3	9.7	10.0	10.2
Malta	13.7	12.6	12.3	12.6	13.0	13.3	13.7
Montenegro	16.5	16.2	16.0	16.3	16.7	16.9	17.2
Netherlands	10.6	10.9	10.7	11.5	12.2	12.5	12.8

TABLE 22
(Continued)

	2000	2005	2010	2015	2017	2018	2019
North Macedonia	15.8	16.4	16.8	17.9	18.5	18.9	19.3
Norway	11.6	10.9	10.7	11.0	11.4	11.7	12.0
Portugal	13.0	12.3	12.0	12.4	12.7	13.0	13.2
Republic of Moldova	29.0	26.9	26.0	25.9	26.0	26.0	26.1
Romania	23.4	22.3	22.1	22.0	22.1	22.3	22.7
Russian Federation	22.1	21.3	20.2	20.1	20.6	20.8	21.1
Serbia	23.9	22.8	21.9	22.0	22.4	22.6	22.8
Slovakia	22.4	22.1	22.0	22.9	23.2	23.3	23.5
Slovenia	20.3	20.1	20.1	20.6	21.1	21.4	21.8
Spain	11.5	11.3	11.8	12.4	12.8	13.1	13.4
Sweden	12.6	11.8	11.6	12.2	12.8	13.2	13.6
Switzerland	9.6	9.4	9.4	10.1	10.7	11.0	11.3
Tajikistan	39.2	34.4	31.2	32.0	33.8	34.5	35.2
Turkmenistan	32.7	28.7	25.5	25.4	25.9	26.2	26.6
Ukraine	13.5	13.4	13.8	15.5	16.5	17.1	17.7
United Kingdom of Great Britain and Northern Ireland	9.4	9.0	9.2	9.9	10.4	10.7	11.1
Uzbekistan	46.5	38.6	31.0	26.3	25.3	25.0	24.8

SOURCE: WHO.

TABLE 23
Prevalence of obesity among adults (percent)

	2000	2005	2010	2013	2014	2015	2016
WORLD	**8.7**	**9.9**	**11.2**	**12.1**	**12.5**	**12.8**	**13.1**
Europe and Central Asia	17.2	19.0	20.8	22.0	22.4	22.9	23.3
Caucasus	13.2	15.0	17.2	18.7	19.3	19.8	20.4
Central Asia	11.0	12.6	14.7	16.1	16.6	17.1	17.7
CIS Europe	19.0	20.2	21.5	22.4	22.7	23.0	23.3
EFTA countries	14.7	16.5	18.5	19.7	20.0	20.4	20.9
EU27 and the United Kingdom	16.7	18.5	20.5	21.7	22.1	22.5	22.9
Other	22.1	24.9	27.8	29.7	30.3	31.0	31.5
Western Balkans	14.7	16.4	18.4	19.6	20.1	20.5	20.9
Albania	13.2	15.4	18.2	19.9	20.5	21.1	21.7
Armenia	14.2	15.7	17.5	18.8	19.2	19.7	20.2
Austria	14.0	15.8	17.6	18.8	19.2	19.7	20.1
Azerbaijan	12.5	14.3	16.6	18.2	18.8	19.3	19.9
Belarus	18.8	20.5	22.3	23.4	23.7	24.1	24.5
Belgium	17.0	18.5	20.1	21.0	21.4	21.7	22.1
Bosnia and Herzegovina	12.6	14.0	15.6	16.7	17.1	17.5	17.9
Bulgaria	18.6	20.4	22.4	23.7	24.1	24.5	25.0
Croatia	17.5	19.4	21.6	22.9	23.4	23.9	24.4
Cyprus	16.4	18.2	19.8	20.7	21.1	21.4	21.8
Czechia	21.0	22.3	23.9	24.9	25.2	25.6	26.0
Denmark	14.0	15.7	17.4	18.5	18.9	19.3	19.7
Estonia	17.4	18.4	19.6	20.4	20.7	20.9	21.2
Finland	16.4	18.2	20.0	21.1	21.4	21.8	22.2
France	15.8	17.6	19.3	20.4	20.8	21.2	21.6
Georgia	13.7	15.7	18.2	19.9	20.5	21.1	21.7
Germany	16.3	18.0	19.9	21.1	21.5	21.9	22.3
Greece	18.5	20.4	22.4	23.6	24.0	24.4	24.9
Hungary	19.6	21.3	23.5	25.0	25.4	25.9	26.4
Iceland	16.0	17.8	19.6	20.7	21.1	21.5	21.9
Ireland	16.0	18.7	21.6	23.4	24.0	24.7	25.3
Israel	21.1	22.7	24.2	25.1	25.5	25.8	26.1
Italy	15.0	16.5	18.1	19.0	19.3	19.6	19.9
Kazakhstan	14.0	15.9	18.0	19.5	20.0	20.5	21.0
Kyrgyzstan	9.6	11.3	13.4	14.9	15.5	16.0	16.6
Latvia	19.3	20.5	21.8	22.7	23.0	23.3	23.6
Lithuania	21.6	22.9	24.4	25.3	25.6	26.0	26.3
Luxembourg	15.8	17.9	20.0	21.3	21.7	22.2	22.6
Malta	23.1	25.0	26.8	27.8	28.2	28.5	28.9
Montenegro	16.2	18.6	20.8	22.0	22.4	22.8	23.3
Netherlands	13.0	15.4	17.7	19.1	19.5	20.0	20.4

TABLE 23
(Continued)

	2000	2005	2010	2013	2014	2015	2016
North Macedonia	17.1	18.5	20.1	21.2	21.6	22.0	22.4
Norway	16.0	18.2	20.4	21.7	22.2	22.6	23.1
Poland	17.5	19.1	20.8	21.9	22.3	22.7	23.1
Portugal	13.7	15.9	18.1	19.5	19.9	20.4	20.8
Republic of Moldova	14.2	15.5	16.9	17.8	18.2	18.5	18.9
Romania	16.2	17.8	19.8	21.1	21.6	22.1	22.5
Russian Federation	19.0	20.2	21.4	22.2	22.5	22.8	23.1
Serbia	15.5	17.3	19.2	20.3	20.7	21.1	21.5
Slovakia	15.5	16.9	18.4	19.4	19.8	20.1	20.5
Slovenia	15.1	16.5	18.1	19.1	19.5	19.8	20.2
Spain	18.3	20.0	21.7	22.7	23.1	23.4	23.8
Sweden	14.6	16.3	18.2	19.4	19.8	20.2	20.6
Switzerland	13.9	15.5	17.3	18.4	18.7	19.1	19.5
Tajikistan	8.0	9.4	11.3	12.7	13.2	13.7	14.2
Turkey	22.2	25.1	28.2	30.2	30.8	31.5	32.1
Turkmenistan	11.0	12.9	15.3	16.9	17.4	18.0	18.6
Ukraine	19.1	20.5	22.0	23.0	23.4	23.7	24.1
United Kingdom of Great Britain and Northern Ireland	18.6	21.4	24.2	26.0	26.6	27.2	27.8
Uzbekistan	9.8	11.4	13.5	14.9	15.4	16.0	16.6

SOURCE: WHO.

TABLE 24

Prevalence of exclusive breastfeeding among infants 0–5 months of age (percent)

	2000	2005	2010	2015	2017	2018	2019
WORLD							**44.0**
Europe and Central Asia							41.7
Caucasus							31.0
Central Asia							44.8
CIS Europe							
EFTA countries							
EU27 and the United Kingdom							
Other							40.7
Western Balkans							19.4
Albania	6.3	3.4			36.5		
Armenia	29.5	32.5	34.1	44.5			
Azerbaijan	6.5						
Belarus		10.3					
Georgia		11.8				20.4	
Kazakhstan			31.8	37.8			
Kyrgyzstan		35.6				45.6	
Montenegro		19.3					
North Macedonia		16.2					
Republic of Moldova		43.6					
Serbia		14.5	13.4				
Tajikistan	14.2	24.9			35.8		
Turkey						40.7	
Turkmenistan	12.1			58.3			
Ukraine		6.0					
Uzbekistan	13.4				49.5		

SOURCE: UNICEF.

TABLE 25
Prevalence of low birthweight (percent)

	2000	2005	2010	2012	2013	2014	2015
WORLD	**17.5**	**16.4**	**15.3**	**15.0**	**14.8**	**14.7**	**14.6**
Europe and Central Asia				7.0			6.9
Caucasus				6.7			7.3
Central Asia	6.0	5.6	5.6	5.6	5.5	5.5	5.4
CIS Europe				5.8			5.7
EFTA countries				5.7			5.6
EU27 and the United Kingdom				7.0			7.0
Other				11.2			11.0
Western Balkans				4.9			5.0
Albania	4.9	4.8	4.7	4.6	4.6	4.6	4.6
Armenia	8.2	7.5	7.6	8.0	8.2	8.6	9.0
Austria	6.4	7.0	7.0	6.9	6.8	6.6	6.5
Azerbaijan	6.5	7.4	7.1	7.0	7.1	7.1	7.3
Belarus	5.0	5.3	5.0	4.9	4.9	5.0	5.1
Belgium	7.2	7.1	6.9	6.9	7.0	7.1	7.3
Bosnia and Herzegovina	3.5	3.5	3.4	3.4	3.4	3.4	3.4
Bulgaria	8.6	8.8	9.3	9.4	9.5	9.5	9.6
Croatia	5.4	5.1	4.8	4.8	4.9	5.0	5.1
Czechia	5.8	6.9	7.7	7.9	7.9	7.9	7.8
Denmark	5.1	5.3	5.3	5.3	5.3	5.3	5.3
Estonia	4.3	4.5	4.4	4.4	4.4	4.4	4.3
Finland	4.3	4.2	4.2	4.2	4.2	4.2	4.1
France	7.5	7.5	7.5	7.4	7.4	7.4	7.4
Georgia	6.1	5.8	4.8	4.8	5.1	5.5	6.1
Germany	6.5	6.9	6.9	6.8	6.8	6.7	6.6
Greece	9.0	8.8	8.7	8.7	8.7	8.8	8.7
Hungary	8.6	8.3	8.5	8.6	8.6	8.7	8.8
Iceland	3.5	3.6	3.7	3.9	4.0	4.1	4.2
Ireland	4.9	5.0	5.1	5.3	5.5	5.7	5.9
Israel	8.3	8.3	8.1	8.0	8.0	7.9	7.8
Italy	7.1	7.0	7.0	7.0	7.0	7.0	7.0
Kazakhstan	6.1	5.2	6.0	6.1	6.0	5.8	5.4
Kyrgyzstan	6.8	6.2	5.7	5.6	5.6	5.5	5.5
Latvia	5.1	4.9	4.6	4.5	4.5	4.5	4.5
Lithuania	4.8	4.7	4.6	4.5	4.5	4.5	4.5
Luxembourg	6.6	5.6	6.5	6.8	6.8	6.7	6.5
Malta	5.9	6.8	7.1	7.0	6.8	6.6	6.3
Montenegro	5.3	4.5	5.0	5.2	5.3	5.4	5.5
Netherlands	7.1	6.3	6.2	6.2	6.2	6.2	6.2
North Macedonia	8.9	8.7	8.7	8.8	8.9	8.9	9.1

TABLE 25
(Continued)

	2000	2005	2010	2012	2013	2014	2015
Norway	4.9	5.0	4.8	4.7	4.6	4.6	4.5
Poland	5.7	6.0	5.7	5.7	5.7	5.8	5.9
Portugal	7.4	7.6	8.2	8.5	8.6	8.8	8.9
Republic of Moldova	5.5	5.1	5.1	5.0	5.0	5.0	5.0
Romania	8.8	8.6	8.3	8.3	8.2	8.2	8.2
Russian Federation	7.4	5.8	6.0	6.0	6.0	6.0	5.8
Serbia	4.7	4.6	4.6	4.6	4.5	4.5	4.5
Slovakia	6.8	7.2	7.9	8.0	8.0	7.8	7.6
Slovenia	5.6	6.0	6.2	6.2	6.2	6.2	6.1
Spain	7.0	7.7	8.1	8.2	8.2	8.3	8.3
Sweden	4.5	4.2	4.2	3.8	3.4	3.0	2.4
Switzerland	6.0	6.3	6.5	6.5	6.5	6.5	6.5
Tajikistan	6.2	5.9	5.7	5.7	5.7	5.6	5.6
Turkey	12.9	12.2	11.7	11.6	11.5	11.4	11.4
Turkmenistan	5.4	5.2	5.1	5.0	5.0	5.0	4.9
Ukraine	5.4	5.1	5.2	5.4	5.4	5.5	5.6
United Kingdom of Great Britain and Northern Ireland	7.3	7.3	7.0	6.9	6.9	6.9	7.0
Uzbekistan	5.8	5.6	5.4	5.3	5.3	5.3	5.3

SOURCE: UNICEF and WHO.

ANNEX 2
FOOD SECURITY AND NUTRITION INDICATORS DEFINITIONS

Undernourishment

Undernourishment is defined as the condition of an individual whose habitual food consumption is insufficient to provide, on average, the amount of dietary energy required to maintain a normal, active and healthy life. The indicator is reported as a prevalence and is denominated as "prevalence of undernourishment", which is an estimate of the percentage of individuals in the total population who are in a condition of undernourishment.

Data source: FAOSTAT

Food insecurity as measured by the Food Insecurity Experience Scale

Food insecurity as measured by the FIES indicator refers to limited access to food, at the level of individuals or households, due to lack of money or other resources. The severity of food insecurity is measured using data collected with the FIES survey module (FIES-SM), a set of eight questions asking respondents to self-report conditions and experiences typically associated with limited access to food. For purposes of annual SDG monitoring, the questions are asked with reference to the 12 months preceding the survey.

FAO provides estimates of food insecurity at two different levels of severity: moderate or severe food insecurity and severe food insecurity. People affected by moderate food insecurity face uncertainties about their ability to obtain food and have been forced to reduce, at times during the year, the quality and/or quantity of food they consume due to lack of money or other resources. Severe food insecurity refers to situations when individuals have likely run out of food, experienced hunger and, at the most extreme, gone for days without eating. The prevalence of moderate or severe food insecurity is the combined prevalence of food insecurity at both severity levels.

Data source: FAOSTAT

Stunting, wasting and overweight in children under five years of age

Stunting (children under five years of age): Height/length (cm) for age (months) < -2 SD of the WHO Child Growth Standards median. Low height-for-age is an indicator that reflects the cumulative effects of undernutrition and infections since and even before birth. It may be the result of long-term nutritional deprivation, recurrent infections and lack of water and sanitation infrastructures. Stunted children are at greater risk for illness and death. Stunting often adversely affects the cognitive and physical growth of children, making for poor performance in school and reduced intellectual capacity.

Prevalence cut-off values for public health significance are as follows: very low <2.5 percent; low 2.5–<10 percent; medium 10–<20 percent; high 20–<30 percent; very high >=30 percent.

Wasting: Weight (kg) for height/length (cm) < -2 SD of the WHO Child Growth Standards median. Low weight-for-height is an indicator of acute weight loss or a failure to gain weight and can be the result of insufficient food intake and/or an incidence of infectious diseases, especially diarrhoea. Wasting indicates acute malnutrition and increases the risk of death in childhood from infectious diseases such as diarrhoea, pneumonia and measles.

Prevalence cut-off values for public health significance for wasting are as follows: very low <2.5 percent; low 2.5–<5 percent; medium 5–<10 percent; high 10–<15 percent; very high >=15 percent.

Overweight: Weight (kg) for height/ length (cm) > +2 SD of the WHO Child Growth Standards median. This indicator reflects excessive weight gain for height generally due to energy intakes exceeding children's energy requirements. Childhood overweight and obesity is associated with a higher probability of overweight and obesity in adulthood, which can lead to various non-communicable diseases, such as diabetes and cardiovascular diseases.

Prevalence cut-off values for public health significance for child overweight are as follows: very low <2.5 percent; low 2.5–<5 percent; medium 5–<10 percent; high 10–<15 percent; very high >=15 percent.

Data source: UNICEF, WHO & World Bank. 2021. *Levels and Trends in Child Malnutrition*. UNICEF/WHO/World Bank Group Joint Child Malnutrition Estimates. Key findings of the 2021 edition. https://data.unicef.org/resources/jme-report-2021, www.who.int/data/gho/data/themes/topics/joint-child-malnutrition-estimates-unicef-who-wb, https://datatopics.worldbank.org/child-malnutrition

Exclusive breastfeeding

Exclusive breastfeeding for infants under 6 months of age is defined as receiving only breastmilk and no additional food or drink, not even water. Exclusive breastfeeding is a cornerstone of child survival and is the best food for newborns, as breastmilk shapes the baby's microbiome, strengthens the immune system and reduces the risk of developing chronic diseases. Breastfeeding also benefits mothers by preventing postpartum haemorrhage and promoting uterine involution, decreasing risk of iron-deficiency anaemia, reducing the risk of various types of cancer and providing psychological benefits.

Data source: UNICEF. 2020. Infant and young child feeding. In: *UNICEF*. New York, USA. Cited 19 April 2021. https://data.unicef.org/topic/nutrition/infant-and-young-child-feeding

Low birthweight

Low birthweight is defined as a weight at birth of less than 2 500 g (less than 5.51 lbs), regardless of gestational age. A newborn's weight at birth is an important marker of maternal and foetal health and nutrition.

Data source: UNICEF & WHO. 2019. UNICEF-WHO joint low birthweight estimates. In: *United Nations Children's Fund*. New York, USA and Geneva, Switzerland. Cited 28 April 2020. www.unicef.org/reports/UNICEF-WHO-low-birthweight-estimates-2019, www.who.int/nutrition/publications/UNICEF-WHO-lowbirthweight-estimates-2019

Adult obesity

The body mass index (BMI) is the ratio of weight-to-height commonly used to classify the nutritional status of adults. It is calculated as the body weight in kilograms divided by the square of the body height in metres (kg/m^2). Obesity includes individuals with BMI equal to or higher than 30 kg/m^2.

Data source: WHO. 2020. Global Health Observatory (GHO) data repository. In: *World Health Organization*. Geneva, Switzerland. Cited 28 April 2020. https://apps.who.int/gho/data/node.main.A900A?lang=en

Anaemia in women of reproductive age

Definition: percentage of women aged 15–49 years with a haemoglobin concentration less than 120 g/L for non-pregnant women and lactating women, and less than 110 g/L for pregnant women, adjusted for altitude and smoking.

Prevalence cut-off values for public health significance are as follows: no public health problem <5 percent; mild 5–19.9 percent; moderate 20–39.9 percent; severe ≥40 percent.

Data source: WHO. 2021. Vitamin and Mineral Nutrition Information System (VMNIS). In: *WHO*. Geneva, Switzerland. Cited 25 May 2021. www.who.int/teams/nutrition-food-safety/databases/vitamin-and-mineral-nutrition-information-system. WHO. 2021. Global anaemia estimates, Edition 2021. In: *Global Health Observatory (GHO) data repository*. Geneva, Switzerland. Cited 25 May 2021. www.who.int/data/gho/data/indicators/indicator-details/GHO/prevalence-of-anaemia-in-women-of-reproductive-age-(-)

ANNEX 3
NOTES

For specific country notes, please refer to Tables A.1.1 and A.1.2 in FAO, IFAD, UNICEF, WFP & WHO. 2021. *The State of Food Security and Nutrition in the World 2021. Transforming food systems for food security, improved nutrition and affordable healthy diets for all*. Rome, FAO. http://www.fao.org/3/cb4474en/cb4474en.pdf

Prevalence of undernourishment

Regional estimates were included when more than 50 percent of the population was covered. National estimates are reported as three-year moving averages to control for the low reliability of some of the underlying parameters such as the year-to-year variation in food commodity stocks, one of the components of the annual FAO Food Balance Sheets, for which complete and reliable information is scarce. Regional and global aggregates are reported as annual estimates on account of the fact that possible estimation errors are expected not to be correlated across countries.

Food insecurity

Regional estimates were included when more than 50 percent of the population was covered. To reduce the margin of error, national estimates are presented as three-year averages.

FAO estimates refer to the number of people living in households where at least one adult has been found to be food insecure.

Country-level results are presented only for those countries for which estimates are based on official national data or as provisional estimates, based on FAO data collected through the Gallup© World Poll, for countries whose national relevant authorities expressed no objection to their publication. Note that consent to publication does not necessarily imply validation of the estimate by the national authorities involved and that the estimate is subject to revision as soon as suitable data from official national sources are available. Global, regional and subregional aggregates are based on data collected in approximately 150 countries.

Child stunting, wasting and overweight

The collection of household survey data on child height and weight were limited in 2020 due to the physical distancing measures required to prevent the spread of COVID-19. Only four national surveys included in the database were carried out (at least partially) in 2020. The estimates on child stunting, wasting and overweight are therefore based almost entirely on data collected before 2020 and do not take into account the impact of the COVID-19 pandemic.

For child wasting regional estimates, values correspond to the model predicted estimates for the year 2020 only. Wasting is an acute condition that can change often and rapidly over the course of a calendar year. This makes it difficult to generate reliable trends over time with the input data available – as such, this report provides only the most recent global and regional estimates.

Some aggregates are calculated by FAO.

Exclusive breastfeeding

Regional estimates are included when more than 50 percent of the population is covered.

Some aggregates are calculated by FAO.

Low birthweight

Some aggregates are calculated by FAO.

Adult obesity

Some aggregates are calculated by FAO.

Anaemia in women of reproductive age

Some aggregates are calculated by FAO.

ANNEX 4
COUNTRY GROUPINGS

The groupings are:

- **Caucasus**: Armenia, Azerbaijan, Georgia;
- **Central Asia**: Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan, Uzbekistan;
- **CIS Europe**: Belarus, the Republic of Moldova, the Russian Federation, Ukraine;
- **EFTA countries**: Iceland, Norway, Switzerland;
- **EU27 and the United Kingdom**: Austria, Belgium, Bulgaria, Croatia, Cyprus, Czechia, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, the Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, the United Kingdom of Great Britain and Northern Ireland;
- **Other**: Andorra, Israel, Turkey; and
- **Western Balkans**: Albania, Bosnia and Herzegovina, Montenegro, North Macedonia and Serbia.

ISBN 978-92-5-135249-6

9 789251 352496

CB7493EN/1/11.21