Although the malnutrition situation has been improving since 2008, the Ebola epidemic outbreak in 2014 has slowed down the fight against hunger. After the epidemic, there has been no significant improvement in acute or chronic malnutrition rates. On the contrary, there has been a minor increase in acute malnutrition rates particularly in the urban areas. At the same time, chronic malnutrition (stunting) remains high; more than 30% of the children are stunted which indicates a serious situation. If stunting is not prevented in the first two years of life, then the effects are irreversible in the later years: decrease of cognitive, motor, language development and learning capacity. Moreover, a history of low birth weight or stunting is a risk factor for children to become overweight or obese and to develop cardiovascular disease or diabetes in later life.

CHILD UNDERNUTRITION
- 31.3% stunting
  - Among which 10% severe stunting
  - Boys are more at risk of stunting than girls (X1.5)
- 5.1% global acute malnutrition
  - Among which 1% severe acute malnutrition
  - 61.6% of children 0-6 months are exclusively breastfed

OVERWEIGHT
- In poor urban areas and slums, more than 30% of the women surveyed are overweight.
  → A direct consequence of an early childhood undernutrition status.

PREGNANT AND LACTATING WOMEN
- Have higher prevalence of acute malnutrition than other women; 5.7% compared to 0.1%

WATER, SANITATION AND HYGIENE
- 28% of households surveyed do not have access to a protected source of drinking water
  - 80% of the households surveyed do not have access to toilet
  - 70% of the households surveyed use soap but only 30% of those wash their hands at least three critical times