



Existing rates of: **Wasting:** 8.1% **Stunting:** 42.6% **Proportion of population underweight:** 23.4%

Source: Gov. of DR Congo (DHS, 2013)

### Strong Performance

**Relative to** other HANCI countries, DR Congo's medium/long term national development policy (GPRSP II) assigns strong importance to nutrition.

**DR Congo** has devised a National Nutrition Policy/Strategy.

**DR Congo** has introduced a multisectoral and multistakeholder policy coordination mechanism to support delivery of the National Nutrition Policy/Strategy.

**Polymakers in** DR Congo benefit from regular nutrition surveys that are statistically representative at national level. The last survey was published in 2013-2014.

**The Government** has enshrined aspects of the International Code of Marketing of Breastmilk Substitutes into domestic law.

**The Government** of DR Congo promotes complementary feeding practices and has achieved two high doses of vitamin A supplementation for 98% of children in 2013.

**In DR Congo**, constitutional protection of the right to food and the right to social security is strong.

### Areas for improvement

**Spending on** agriculture (2.66% of public spending in 2013), does not meet government commitments set out in the African Union's Maputo Declaration (10% of public spending).

**DR Congo's** spending in its health sector (12.8% of public spending in 2012) is close to, yet not fully meeting government commitments set out in the African Union's Abuja Declaration (15% of public spending).

**In DR Congo**, the law does not give women economic rights equal to men. Men and women have equal legal access to agricultural land, but this is not effectively enforced and discriminatory practices against women continue, increasing their vulnerability to hunger and undernutrition.

**DR Congo** does not have a separate budget line for nutrition; this prevents transparency and accountability for spending.

**Even though** DR Congo has developed a National Nutrition Policy/Strategy and a multisectoral and multistakeholder policy coordination mechanism, clear time-bound nutrition targets are still lacking.

**Weak access** to an improved source of drinking water (46.5% in 2012) and an improved sanitation facility (31.4% in 2012) prevents positive outcomes for hunger and nutrition in DR Congo.

**The Government** of DR Congo does not provide social safety nets.

**Civil registration** rates are weak (27.8% in 2010) and potentially hold back children's access to critical public services such as health and education.



## Hunger Reduction Commitment Index (HRCI)

Public spending	Score*	Year	HRCI Rank of 45
Public spending on agriculture as share of total public spending <sup>1</sup>	2.66%	2013	33rd
Public spending on health as share of total public spending <sup>1</sup>	12.8%	2012	Joint 11th
<b>Policies</b>			
Access to land (security of tenure) <sup>2</sup>	Moderate	2013	Joint 25th
Access to agricultural research and extension services <sup>2</sup>	Moderate	2013	Joint 32nd
Civil registration system — coverage of live births	27.8%	2010	39th
Functioning of social protection systems <sup>2</sup>	Very Weak	2014	Joint 41st
<b>Laws</b>			
Level of constitutional protection of the right to food <sup>3</sup>	Strong	2011	Joint 1st
Equality of women's access to agricultural land (property rights) <sup>4</sup>	In Law, not in Practice	2014	Joint 4th
Equality of women's economic rights <sup>4</sup>	Not in Law	2011	Joint 30th
Constitution recognises the right to social security (yes/no)	Yes	2006	Joint 1st

<sup>1</sup> Possible scores are: ● <75% of agriculture (Maputo) and health (Abuja) spending pledges ● >=75% and <100% ● >=100%

<sup>2</sup> Possible scores are: ● Weak ● Moderate ● Strong

<sup>3</sup> Possible scores are: ● Weak ● Moderate ● Strong

<sup>4</sup> Possible scores are: ● Not in Law ● In Law Not in Practice ● In Law & Practice

## Nutrition Commitment Index (NCI)

Public spending	Score*	Year	NCI Rank of 45
Separate budget for nutrition (No/Sectoral only/Yes)	No	2014	Joint 28th
<b>Policies</b>			
Vitamin A supplementation coverage for children	98%	2013	Joint 11th
Government promotes complementary feeding (yes/no)	Yes	2014	Joint 1st
Population with access to an improved water source	46.5%	2012	45th
Population with access to improved sanitation	31.4%	2012	25th
Health care visits for pregnant women	88.8%	2010	25th
Nutrition features in national development policy <sup>1</sup>	Strong	2011-2015	11st
National Nutrition Policy/Strategy (yes/no)	Yes	2014	Joint 1st
Multisector and multistakeholder policy coordination (yes/no)	Yes	2014	Joint 1st
Time bound nutrition targets (yes/no)	No	2012	Joint 37th
National nutrition survey in last 3 years (yes/no)	Yes	2013-2014	Joint 1st
<b>Laws</b>			
ICMBS <sup>^</sup> Enshrined in domestic law <sup>2</sup>	Aspects Enshrined	2014	Joint 21st

<sup>1</sup> Possible scores are: ● Weak ● Moderate ● Strong (Note: Performance relative to other countries).

<sup>2</sup> Possible scores are: ● Not Enshrined in Law ● Voluntary Adoption ● Fully enshrined.

<sup>^</sup> International Code of Marketing of Breastmilk Substitutes