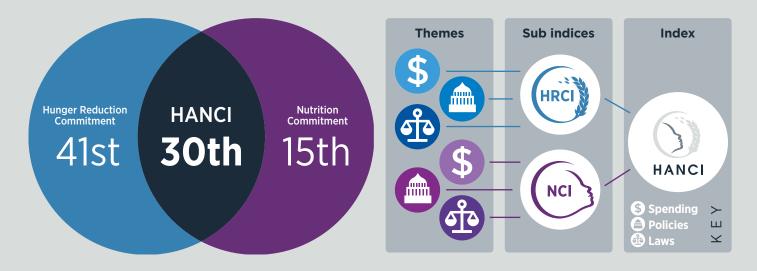


Key data for Cameroon





Existing rates of: Wasting: 5.2% Stunting: 31.7% Proportion of population underweight: 14.8% Source: Government of Cameroon (MICSS, 2014)

Strong Performance

- The Government encourages varied agricultural research and extension services, and local farmer organisations are involved in setting policy priorities. The extension system is effective and properly reaches out to poor farmers. Government policies, strategies and mechanisms seek to ensure gender equity in access to extension services.
- The National Nutrition Policy/Strategy identifies time bound nutrition targets and a multisectoral and multistakeholder policy coordination mechanism has been set up.
- Policymakers in Cameroon benefit from regular nutrition surveys that are statistically representative at national level. The last survey was published in 2014.
- The Government has fully enshrined the International Code of Marketing of Breastmilk Substitutes into domestic law.
- The Government of Cameroon promotes complementary feeding practices and has achieved two high doses of vitamin A supplementation for 99% of children in 2015.

Areas for improvement

- Spending on agriculture (4.3% of public spending in 2016), does not meet government commitments set out in the African Union's Maputo Declaration (10% of public spending).
- Cameroon's spending in its health sector (3.1% of public spending in 2015) does not fully meet (15%) commitments set out in the Abuja Declaration.
- In Cameroon, 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.
- Relative to other HANCI countries, Cameroon's medium/long term national development policy (Growth and Employment Strategy Paper (GESP)) places weak importance to nutrition.
- Weak access to improved sanitation facilities (38.8% in 2015) obstructs better hunger and nutrition outcomes.
- In Cameroon, constitutional protection of the right to food and the right to social security is weak.
- Social safety nets in Cameroon are basic and only cover few risks for a limited number of beneficiaries.
- Civil registration rates are weak (66.1% in 2014) and potentially hold back children's access to critical public services such as health and education.

Key data for Cameroon



Hunger Reduction Commitment Index (HRCI)

Public spending	Score*	Year	HRCI Rank of 45	
S Public spending on agriculture as share of total public spending 1	4.3%	2016	25th	
S Public spending on health as share of total public spending ²	3.1%	2015	40th	
Policies				
Access to land (security of tenure) 3	Moderate	2016	Joint 28th	
Access to agricultural research and extension services ³	Strong	2013	Joint 12th	
Civil registration system — coverage of live births	66.1%	2014	25th	
Eunctioning of social protection systems ³	Weak	2016	Joint 11th	
Laws				
a Level of constitutional protection of the right to food ³	Weak	2016	Joint 30th	
a Equality of women's access to agricultural land (property rights) ⁴	In Law, not in Practice	2014	Joint 4th	
Equality of women's economic rights 4	Not in Law	2014	Joint 30th	
constitution recognises the right to social security (yes/no)	No	2017	Joint 34th	
Possible scores are: <75% of AU's commitments set out in the Maputo Declaration >=75 % and <100% >=100% Possible scores are: <75% of AU's commitments set out in the Abuja Declaration >=75 % and <100% >=100% Possible scores are: < Very weak/Weak Moderate Strong/Very strong 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)	Sectoral only	2017	Joint 22nd
Policies			
Vitamin A supplementation coverage for children	99%	2015	Joint 1st
Government promotes complementary feeding (yes/no)	Yes	2012	Joint 1st
Population with access to an improved water source	75.5%	2015	29th
Population with access to improved sanitation	38.8%	2015	23rd
Health care visits for pregnant women	82.8%	2014	Joint 30th
Nutrition features in national development policy 1	Weak	2010-2020	36th
National nutrition policy/strategy (yes/no)	Yes	2017	Joint 1st
Multisector and multistakeholder policy coordination (yes/no)	Yes	2017	Joint 1st
Time bound nutrition targets (yes/no)	Yes	2017	Joint 1st
National nutrition survey in last 3 years (yes/no)	Yes	2014	Joint 1st
Laws			
(b) ICMBS [^] enshrined in domestic law ²	Fully Enshrined	2016	Joint 1st

¹ Possible scores are: • Weak • Moderate • Strong (Note: Performance relative to other countries)





² Possible scores are: Not enshrined in law Few/Many aspects enshrined Fully enshrined

[^] International Code of Marketing of Breastmilk Substitutes