



Existing rates of: **Wasting: 8.9%** **Stunting: 19.2%** **Proportion of population underweight: 16.8%**

Source: Gov. of Senegal (DHS, 2013)

### 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.
- Relative to other HANCI countries, Senegal's medium/long term national development policy (Stratégie Nationale de Développement Economique et Social) assigns strong importance to nutrition.
- Senegal instituted a separate budget line for nutrition, enabling transparency and accountability for spending.
- The National Nutrition Policy/Strategy identifies time bound nutrition targets and a multisectoral and multistakeholder policy coordination mechanism has been set up.
- Policymakers in Senegal benefit from regular nutrition surveys that are statistically representative at national level. The last survey was published in 2014.
- The Government has enshrined aspects of the International Code of Marketing of Breastmilk Substitutes into domestic law.
- The Government of Senegal promotes complementary feeding practices and has achieved two high doses of vitamin A supplementation for 99% of children in 2013.
- In Senegal 94.5% of women aged 15-49 were visited at least once during pregnancy by skilled health personnel in 2013.

### Areas for improvement

- Spending on agriculture (9.2% of public spending in 2013) is close to, yet not fully meeting government commitments set out in the African Union's Maputo Declaration (10% of public spending).
- Senegal's spending in its health sector (9.6% of public spending in 2012) does not fully meet (15%) commitments set out in the Abuja Declaration.
- In Senegal, 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.
- Weak access to improved sanitation facilities (51.9% in 2012) obstructs better hunger and nutrition outcomes.
- In Senegal, constitutional protection of the right to food and the right to social security is weak.

## 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>	 9.2%	2013	5th
 Public spending on health as share of total public spending <sup>1</sup>	 9.6%	2012	28th
<b>Policies</b>			
 Access to land (security of tenure) <sup>2</sup>	 Moderate	2013	Joint 19th
 Access to agricultural research and extension services <sup>2</sup>	 Strong	2013	12nd
 Civil registration system — coverage of live births	 73%	2012-2013	19th
 Functioning of social protection systems <sup>2</sup>	 Weak	2014	Joint 9th
<b>Laws</b>			
 Level of constitutional protection of the right to food <sup>2</sup>	 Weak	2011	Joint 18th
 Equality of women's access to agricultural land (property rights) <sup>3</sup>	 In Law, not in Practice	2014	Joint 1st
 Equality of women's economic rights <sup>3</sup>	 Not in Law	2011	Joint 26th
 Constitution recognises the right to social security (yes/no)	 No	2006	Joint 27th

<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>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)	 Yes	2014	Joint 1st
<b>Policies</b>			
 Vitamin A supplementation coverage for children	 99%	2013	Joint 2nd
 Government promotes complementary feeding (yes/no)	 Yes	2014	Joint 1st
 Population with access to an improved water source	 74.1%	2012	Joint 25th
 Population with access to improved sanitation	 51.9%	2012	13rd
 Health care visits for pregnant women	 94.5%	2013	14th
 Nutrition features in national development policy <sup>1</sup>	 Strong	2013-2017	5th
 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)	 Yes	2014	Joint 1st
 National nutrition survey in last 3 years (yes/no)	 Yes	2014	Joint 1st
<b>Laws</b>			
 ICMSB <sup>^</sup> Enshrined in domestic law <sup>2</sup>	 Aspects Enshrined	2014	Joint 16th

<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