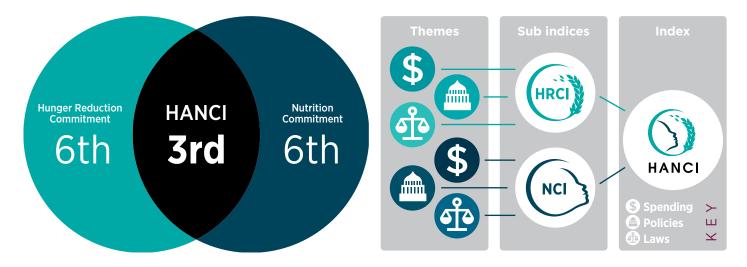


Key data for Madagascar





Existing rates of: Wasting: % Stunting: 47% Proportion of population underweight: 32%

Source: Gov. of Madagascar (FNSOMD, 2012)

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.
- Madagascar 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 Madagascar benefit from regular nutrition surveys that are statistically representative at national level. The last survey was published in 2012-2013.
- The Government has fully enshrined the International Code of Marketing of Breastmilk Substitutes into domestic law.
- The Government of Madagascar promotes complementary feeding practices and has achieved two high doses of vitamin A supplementation for 99% of children in 2014.
- In Madagascar, constitutional protection of the right to social security is strong.

Areas for improvement

- Spending on agriculture (6.07% of public spending in 2014), does not meet government commitments set out in the African Union's Maputo Declaration (10% of public spending).
- Madagascar's spending in its health sector (10.2% of public spending in 2014) does not fully meet (15%) commitments set out in the Abuja Declaration.
- In Madagascar, the law gives women and men equal economic rights and equal legal access to agricultural land. However, these laws are not effectively enforced and discriminatory practices against women continue, increasing their vulnerability to hunger and undernutrition.
- Weak access to an improved source of drinking water (51.5% in 2015) and an improved sanitation facility (12% in 2015) prevents positive outcomes for hunger and nutrition in Madagascar.
- Social safety nets in Madagascar are basic and only cover few risks for a limited number of beneficiaries.



Key data for Madagascar



Hunger Reduction Commitment Index (HRCI)

Public spending	Score*	Year	HRCI Rank of 45
\$ Public spending on agriculture as share of total public spending 1	6.07%	2014	18th
\$ Public spending on health as share of total public spending 1	10.2%	2014	21st
Policies			
♠ Access to land (security of tenure) ²	Moderate	2014	Joint 16th
Access to agricultural research and extension services ²	Strong	2013	Joint 5th
Civil registration system — coverage of live births	83%	2012-2013	11st
Functioning of social protection systems ²	Weak	2016	Joint 20th
Laws			
£ Level of constitutional protection of the right to food ²	Moderate	2016	Joint 8th
£ Equality of women's access to agricultural land (property rights) 3	In Law, not in Practice	2014	Joint 1st
Equality of women's economic rights ³	In Law, not in Practice	2011	Joint 1st
② Constitutional right to social security (yes/no)	Yes	2006	Joint 1st
¹ Possible scores are: ● <75% of agriculture (Maputo) and health (Abuja) spend ² Possible scores are: ● Very Weak/Weak ● Moderate ● Strong/Very Strong ³ Possible scores are: ● Not in Law ● In Law Not in Practice ● In Law & Practice ● In La	g	<100% >=100	0%

Nutrition Commitment Index (NCI)

Public spending	Score*	Year	NCI Rank of 45
\$ Separate budget for nutrition (No/Sectoral only/Yes)	Yes	2015	Joint 1st
Policies			
Vitamin A supplementation coverage for children	99%	2014	Joint 2nd
Government promotes complementary feeding (yes/no)	Yes	2010	Joint 1st
Population with access to an improved water source	51.5%	2015	42nd
Population with access to improved sanitation	12%	2015	43rd
Health care visits for pregnant women	82.1%	2013	37th
Nutrition features in national development policy 1	Moderate	2015-2019	19th
National nutrition policy/strategy (yes/no)	Yes	2015	Joint 1st
Multisector and multistakeholder policy coordination (yes/no)	Yes	2015	Joint 1st
Time bound nutrition targets (yes/no)	Yes	2014	Joint 1st
National nutrition survey in last 3 years (yes/no)	Yes	2012-2013	Joint 1st
Laws			
(f) ICMBS^ Enshrined in domestic law ²	Fully Enshrined	2016	Joint 1st
	ALL D. C		

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

[^] International Code of Marketing of Breastmilk Substitutes







² Possible scores are: Not Enshrined in Law Few/Many Aspects Enshrined Fully enshrined.