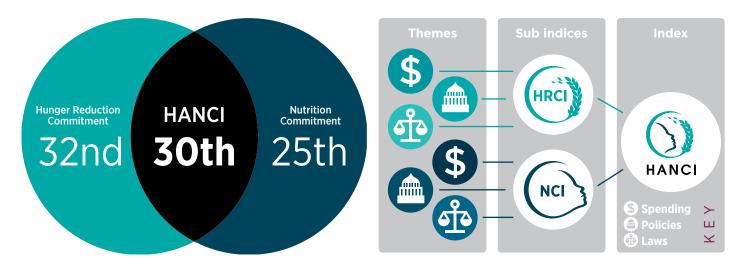


Key data for Sierra Leone





Existing rates of: Wasting: 9.4% Stunting: 37.9% Proportion of population underweight: 18.1% Source: Gov. of Sierra Leone (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, Sierra Leone's medium/long term national development policy (The Agenda for Properity. Thrid generation PRSP) assigns strong importance to nutrition.
- Sierra Leone 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 Sierra Leone benefit from regular nutrition surveys that are statistically representative at national level. The last survey was published in 2013.
- The Government of Sierra Leone promotes complementary feeding practices.
- In Sierra Leone 97.1% of women aged 15-49 were visited at least once during pregnancy by skilled health personnel in 2013.
- In Sierra Leone, constitutional protection of the right to social security is strong.

Areas for improvement

- Spending on agriculture (6.65% of public spending in 2014), does not meet government commitments set out in the African Union's Maputo Declaration (10% of public spending).
- Sierra Leone's spending in its health sector (10.8% of public spending in 2014) does not fully meet (15%) commitments set out in the Abuja Declaration.
- In Sierra Leone, law does neither give women economic rights or agricultural land access rights equal to men. This increases women and children's vulnerability to hunger and undernutrition.
- The Government of Sierra Leone has not enshrined the International Code of Marketing of Breastmilk Substitutes into domestic law.
- The Government of Sierra Leone has only achieved two high doses of vitamin A supplementation for 8% of children in 2014.
- Weak access to an improved source of drinking water (62.6% in 2015) and an improved sanitation facility (13.3% in 2015) prevents positive outcomes for hunger and nutrition in Sierra Leone.
- In Sierra Leone, constitutional protection of the right to food is weak.
- Social safety nets in Sierra Leone are basic and only cover few risks for a limited number of beneficiaries.



Key data for Sierra Leone



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	6.65%	2014	14th		
\$ Public spending on health as share of total public spending 1	10.8%	2014	20th		
Policies					
♠ Access to land (security of tenure) ²	Moderate	2014	Joint 33rd		
Access to agricultural research and extension services ²	Strong	2013	Joint 14th		
Civil registration system — coverage of live births	78%	2010	14th		
♠ Functioning of social protection systems ²	Weak	2016	Joint 20th		
Laws					
b Level of constitutional protection of the right to food ²	Weak	2011	Joint 31st		
a Equality of women's access to agricultural land (property rights) ³	Not in Law	2014	Joint 41st		
Equality of women's economic rights ³	Not in Law	2011	Joint 26th		
Constitutional right to social security (yes/no)	Yes	2006	Joint 1st		
Possible scores are: <-75% of agriculture (Maputo) and health (Abuja) spending pledges >=75 % and <100% >=100% Possible scores are: Very Weak/Weak Moderate Strong/Very Strong					

Nutrition Commitment Index (NCI)

³ Possible scores are: Not in Law In Law Not in Practice In Law & Practice

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		8%	2014	43rd
Government promotes complementary feeding (yes/no)		Yes	2014	Joint 1st
Population with access to an improved water source		62.6%	2015	35th
Population with access to improved sanitation		13.3%	2015	41st
Health care visits for pregnant women		97.1%	2013	Joint 7th
Nutrition features in national development policy		Strong	2013-2018	13rd
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	2015	Joint 1st
National nutrition survey in last 3 years (yes/no)		Yes	2013	Joint 1st
Laws				
② ICMBS^ Enshrined in domestic law ²		Not Enshrined in Law	2016	Joint 33rd
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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.