

Existing rates of: **Wasting: 11.2%** **Stunting: 31.6%** **Proportion of population underweight: 14.4%**

Source: Gov. of Sao Tome and Principe (DHS, 2008)











### Strong Performance




- Sao Tome and Principe has devised a National Nutrition Policy/Strategy.
- Policymakers in Sao Tome and Principe benefit from regular nutrition surveys that are statistically representative at national level. The last survey was published in 2014.
- 97.1% of the population of Sao Tome and Principe in 2015 has access to an improved drinking water source.
- In Sao Tome and Principe 97.5% of women aged 15-49 were visited at least once during pregnancy by skilled health personnel in 2014.
- In Sao Tome and Principe, constitutional protection of the right to social security is strong.




### Areas for improvement


- Spending on agriculture (8.45% of public spending in 2014) is close to, yet not fully meeting government commitments set out in the African Union's Maputo Declaration (10% of public spending).
- Sao Tome and Principe's spending in its health sector (12.4% of public spending in 2014) is close to, yet not fully meeting government commitments set out in the African Union's Abuja Declaration (15% of public spending).
- In Sao Tome and Principe, 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.
- Even though Sao Tome and Principe has developed a National Nutrition Policy/Strategy, clear time-bound nutrition targets and a multisectoral and multistakeholder policy coordination mechanism are still lacking.
- The Government of Sao Tome and Principe has not enshrined the International Code of Marketing of Breastmilk Substitutes into domestic law.
- The Government of Sao Tome and Principe does not promote complementary feeding practices and has only achieved two high doses of vitamin A supplementation for 56% of children in 2013.
- Weak access to improved sanitation facilities (34.7% in 2015) obstructs better hunger and nutrition outcomes.
- Social safety nets in Sao Tome and Principe are basic and only cover few risks for a limited number of beneficiaries.

## 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>	8.45%	2014	9th
 Public spending on health as share of total public spending <sup>1</sup>	12.4%	2014	11st
<b>Policies</b>			
 Access to land (security of tenure) <sup>2</sup>	Moderate	2014	Joint 21st
 Access to agricultural research and extension services <sup>2</sup>	Moderate	2013	26th
 Civil registration system — coverage of live births	75.1%	2008-2009	18th
 Functioning of social protection systems <sup>2</sup>	Weak	2014	Joint 40th
<b>Laws</b>			
 Level of constitutional protection of the right to food <sup>2</sup>	Moderate	2013	Joint 8th
 Equality of women's access to agricultural land (property rights) <sup>3</sup>	In Law, not in Practice	2013	Joint 1st
 Equality of women's economic rights <sup>3</sup>	In Law, not in Practice	2011	Joint 1st
 Constitutional 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:  Very Weak/Weak  Moderate  Strong/Very Strong

<sup>3</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)	Sectoral only	2013	Joint 18th
<b>Policies</b>			
 Vitamin A supplementation coverage for children	56%	2013	34th
 Government promotes complementary feeding (yes/no)	No	2014	Joint 42nd
 Population with access to an improved water source	97.1%	2015	3rd
 Population with access to improved sanitation	34.7%	2015	21st
 Health care visits for pregnant women	97.5%	2014	6th
 Nutrition features in national development policy <sup>1</sup>	Moderate	2012-2016	28th
 National nutrition policy/strategy (yes/no)	Yes	2013	Joint 1st
 Multisector and multistakeholder policy coordination (yes/no)	No	2013	Joint 36th
 Time bound nutrition targets (yes/no)	No	2014	Joint 32nd
 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>	Not Enshrined in Law	2016	Joint 33rd

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

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

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