

Existing rates of: **Wasting: 7.2%** **Stunting: 17%** **Proportion of population underweight: 13.5%**

Source: Government of Senegal (DHS, 2016)





















### Strong Performance

- Spending on agriculture (11% of public spending in 2016) meets government commitments set out in the African Union's Maputo Declaration (10% of public spending).
- 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 (SNDES)) 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 2016.
- The Government of Senegal promotes complementary feeding practices.
- In Senegal 96.2% of women aged 15-49 were visited at least once during pregnancy by skilled health personnel in 2014.




### Areas for improvement




- Senegal's spending in its health sector (4.2% of public spending in 2015) 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.
- The Government of Senegal has achieved two high doses of vitamin A supplementation for only 29% of children in 2015.
- Weak access to improved sanitation facilities (51.3% in 2016) obstructs better hunger and nutrition outcomes.
- In Senegal, constitutional protection of the right to social security is weak.
- Social safety nets in Senegal 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>	 11%	2016	8th
 Public spending on health as share of total public spending <sup>2</sup>	 4.2%	2015	Joint 36th
Policies			
 Access to land (security of tenure) <sup>3</sup>	 Moderate	2016	Joint 25th
 Access to agricultural research and extension services <sup>3</sup>	 Strong	2013	12th
 Civil registration system — coverage of live births	 72.7%	2014	20th
 Functioning of social protection systems <sup>3</sup>	 Weak	2016	Joint 8th
Laws			
 Level of constitutional protection of the right to food <sup>3</sup>	 Moderate	2016	Joint 8th
 Equality of women's access to agricultural land (property rights) <sup>4</sup>	 In Law, not in Practice	2014	Joint 1st
 Equality of women's economic rights <sup>4</sup>	 Not in Law	2014	Joint 26th
 Constitutional right to social security (yes/no)	 No	2009	Joint 29th

























<sup>1</sup> Possible scores are:  <75% of agri. spending pledges (AU commitments set out in the Maputo Declaration)  >=75% & <100%  >=100%

<sup>2</sup> Possible scores are:  <75% of health spending pledges (AU commitments set out in the Abuja Declaration)  >=75% & <100%  >=100%

<sup>3</sup> Possible scores are:  Very Weak/Weak  Moderate  Strong/Very 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	2017	Joint 1st
Policies			
 Vitamin A supplementation coverage for children	 29%	2015	38th
 Government promotes complementary feeding (yes/no)	 Yes	2014	Joint 1st
 Population with access to an improved water source	 80%	2016	20th
 Population with access to improved sanitation	 51.3%	2016	12th
 Health care visits for pregnant women	 96.2%	2014	8th
 Nutrition features in national development policy <sup>1</sup>	 Strong	2013-2017	8th
 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	2016	Joint 1st
Laws			
 ICMSB <sup>^</sup> Enshrined in domestic law <sup>2</sup>	 Many Aspects Enshrined	2016	Joint 15th

<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