# Burundi

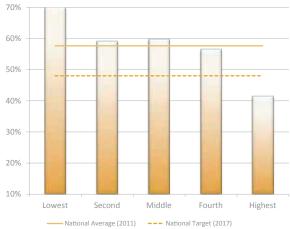


Joined: February 2013

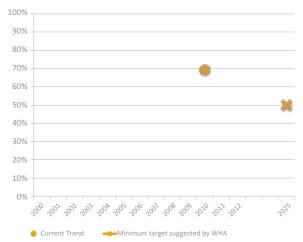
Demographic data	
National Population (million, 2010)	9.3
Children under 5 (million, 2010)	1.7
Adolescent Girls (15-19) (million, 2010)	0.50
Average Number of Births (million, 2010)	0.40
Population growth rate (2010)	3.45%
WHA nutrition target indicators (DHS 2010)	31.1370
Low birth weight	10.7%
0-5 months Exclusive Breastfeeding	69.3%
Under five stunting	57.5%
Under five wasting	6.1%
Under five overweight	2.9%
Coverage of Nutrition-relevant Factors	2.370
Infant and young child feeding practice	
6-23 months with Minimum Acceptable Diet	3.1%
6-23 months with Minimum Diet Diversity	6.0%
Programs for vitamin and mineral deficiencies	0.070
Zinc Supplementation for Diarrhea	0.1%
Pregnant Women Attending 4	33.4%
or more Antenatal Care Visits	33.470
Vitamin A supplementation (6-59 months)	-
Households Consuming Adequately Iodized Salt	95.6%
Women's Empowerment	
Female literacy	61.5%
Female employment rate	78.6%
Median age at first marriage	20.3
Access to skilled birth attendant	60.3%
Women who have first birth before age 18	10.5%
Fertility rate	6.4
Other Nutrition-relevant indicators	
Rate of urbanization	9.66%
Income share held by lowest 20%	8.96%
Calories per capita per day (kcal/capita/day)	1,668.3
Energy from non-staples in supply	41.40%
Iron availability from animal products (mg/capita/day)	0.4
Access to Improved Sanitation Facilities	34.5%
Open defecation	2.9%
Access to Improved Drinking Water Sources	75.5%
Access to Piped Water on Premises	5.7%
Surface Water as Drinking Water Source	8.5%
GDP per capita (current USD, 2013)	267.00
Exports-Agr Products per capita (current USD, 2012)	7.23
Imports-Agr Products per capita (current USD, 2012)	1.62

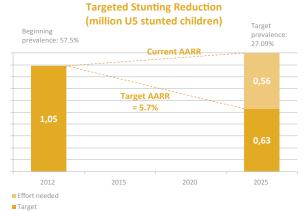






#### **Trend of Exclusive Breastfeeding Rate**





## Bringing people together into a shared space for action

The multi-sectoral food and nutritional security platform (PMSAN) comprises a steering committee, a secretariat, a technical committee and ten working groups. A number of ministries, international organizations, religious groups, research institutes, the private sector and civil society are involved. While these structures operate well at national level, decentralizing and disseminating PMSAN work must be stepped up to promote commitment and accountability among all stakeholders.

The government and United Nations agencies work in a spirit of cooperation.

Civil society has been brought together on a platform that is not specifically focused on nutrition.

Advocacy aimed at parliamentarians is perceived as necessary to achieve better results in drafting legislation to promote nutrition.

### Aligning actions around a Common Results Framework

Nutrition is a national priority. Burundi finalized its multi-sectoral roadmap for enhancing nutrition in January 2012 and validated its multi-sectoral strategic plan for food security and nutrition in June 2013. The strategic plan has four strategic priorities including reducing the prevalence of undernutrition, promoting breastfeeding, micronutrient supplementation, responding to chronic food security deficits.

The monitoring and evaluation plan that will serve as the common results framework will be developed in the future but the National Agricultural Investment Plan (PNIA) is already being aligned with existing policies. The donor-financed programs have not yet been aligned but civil society activities have been, to a certain extent.

Interventions are implemented in the form of projects with limited geographical coverage. A project aiming to step up the achievement of MDGs (2012) has been rolled out in eight provinces by the Ministry of Public Health and for the Fight against AIDS, the Ministry of Agriculture, PAM, UNICEF and the FAO. The other programs, focused on communities or food security, are implemented by the Health Ministry, sometimes in collaboration with the Agriculture Ministry.

Discussions are under way to improve data collection and analysis on food security and nutrition.

## Ensuring a coherent policy and legal framework

The contextual analysis of malnutrition has been completed. Burundi has legislative provisions on food fortification, labor laws, the importation and marketing of salt for human consumption and free healthcare for children under five and pregnant women.

Burundi is committed to enhancing the protection of maternity leave, adopting a new code on the marketing of breast milk substitutes, launching an alliance for food fortification, applying national directives on food for babies and young children, and focusing more on food output and diversification, food security and nutrition education. Burundi also intends to develop a communication plan for its multi-sectoral plan.

The drafting and dissemination of guidelines on including nutrition in sectoral strategies and a plan to enhance capacity are perceived as necessary to incorporate nutrition in all sectors.

### Financial Tracking and resource mobilization

Burundi is confident that once plans have been costed, it can start to effectively mobilize government and donor funds. The creation of specific budget lines for nutrition is perceived as positive. The Ministry of Public Health and for the Fight against AIDS has already established a budget line for nutrition. However, these changes will need to be accompanied by transparent fund management.

# Progress Across Four SUN Processes **Burundi**

