Cameroon

Joined: February 2013
### Demographic data

<table>
<thead>
<tr>
<th>Category</th>
<th>Value (2010)</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Population</td>
<td>20.6 million</td>
</tr>
<tr>
<td>Children under 5</td>
<td>3.4 million</td>
</tr>
<tr>
<td>Adolescent Girls (15-19)</td>
<td>1.10 million</td>
</tr>
<tr>
<td>Average Number of Births</td>
<td>0.80</td>
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<tr>
<td>Population growth rate</td>
<td>2.57%</td>
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</tbody>
</table>

### WHA nutrition target indicators (DHS 2011)

- **Low birth weight**: 7.6%
- **0-5 months Exclusive Breastfeeding**: 20.4%
- **Under five stunting**: 32.6%
- **Under five wasting**: 5.8%
- **Under five overweight**: 6.5%

### Coverage of Nutrition-relevant Factors

#### Infant and young child feeding practice

- 6-23 months with Minimum Acceptable Diet: -
- 6-23 months with Minimum Diet Diversity: -

#### Programs for vitamin and mineral deficiencies

- Zinc Supplementation for Diarrhea: 0.1%
- Pregnant Women Attending 4 or more Antenatal Care Visits: 62.2%
- Vitamin A supplementation (6-59 months): 88.0%
- Households Consuming Adequately Iodized Salt: 90.9%

#### Women’s Empowerment

- Female literacy: 69.2%
- Female employment rate: 61.5%
- Median age at first marriage: 18.7
- Access to skilled birth attendant: 63.6%
- Women who have first birth before age 18: 25.2%
- Fertility rate: 5.2

#### Other Nutrition-relevant indicators

- Rate of urbanization: 48.95%
- Income share held by lowest 20%: 6.73%
- Calories per capita per day (kcal/capita/day): 2,322.7
- Energy from non-staples in supply: 37.61%
- Iron availability from animal products (mg/capita/day): 1.4
- Access to Improved Sanitation Facilities: 39.9%
- Open defecation: 7.2%
- Access to Improved Drinking Water Sources: 68.6%
- Access to Piped Water on Premises: 13.3%
- Surface Water as Drinking Water Source: 9.6%
- GDP per capita (current USD, 2013): 1,315.00
- Exports-Agr Products per capita (current USD, 2012): 1.90
- Imports-Agr Products per capita (current USD, 2012): 0.93

### Stunting Reduction Trend and Target

- **Current AARR**: 1.4%
- **Government Reduction target**: 10%
- **Minimum target suggested by WHA**: 20%

### Distribution of stunting across wealth quintiles

- **Current Trend**
  - Lowest income quantile:
    - Prevalence: 10%
  - Highest income quantile:
    - Prevalence: 40%
  - Government Reduction target:
    - Prevalence: 70%

### Trend of Exclusive Breastfeeding Rate

- **Beginning prevalence**: 32.6%
- **Target prevalence**: 16.31%
- **Current AARR**: 5.19%
- **Target AARR**: 5.19%

### Targeted Stunting Reduction (million U5 stunted children)

- 2012: 1.16
- 2015: 0.56
- 2020: 0.47
- 2025: 0.56
SUN Movement Compendium 2014

The costing of the plan can only be achieved once the multi-sector action plan is complete. There is currently no system for monitoring credit financing for nutrition activities and programs. While there is no specific budget line for nutrition, the share of the budget allocated to nutrition by the sector ministries is stable. Some partners noted a significant increase in resources allocated to emergency interventions in 2013.

The analysis of existing texts on nutrition has been completed and shows that nutrition is well integrated in key sectors: water and sanitation, agriculture, food and nutrition security (National Agricultural Investment Program and New National Food Security Program, which includes a support component for “production and nutrition education” to raise awareness of the consumption of food with a high nutritional value), education and scientific research, rural development, social protection, poverty reduction/growth stimulation. However, the maternal and child mortality rate reduction program does not take nutrition into account.

There are also laws and decrees on the marketing of breast milk-substitutes, food fortification and maternity leave.

As a result of the advocacy efforts of the platform, the Presidency of the Republic recently requested the Government to establish a National program for the fight against malnutrition.

The policy implementation and dissemination efforts need to be strengthened and the drafting of a multi-sector action plan for the fight against malnutrition is ongoing.

The United Nations network, under the leadership of UNICEF, is preparing its action plan. French Cooperation is working towards creating a platform for donors. A private sector network was launched at the Business Forum on Nutrition (May 2014).

A network of parliamentarians for the fight against malnutrition is also very active.

Cameroon joined the SUN Movement in March 2013. The multi-stakeholder platform is in the development stage, the focal point has been designated and the participants, identified but not yet appointed, continue to be immersed in the operation of the structure.

Regulatory formalization and allocation of human and financial resources would make its action more effective.

The platform is coordinated with the Interdepartmental Committee for Food Security, created in 2009, comprising 19 ministries and chaired by the Secretary General of the Prime Minister’s Office. Its mission is to develop policy and strategy for food security actions and the implementation of the National Food Security Program.

The civil society platform chaired by Helen Keller International includes NGOs from various sectors (health, education and agriculture). The terms of reference and a work program has been developed, which includes seeking equity capital.

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The common results framework has not yet been developed as the multi-sector action plan has not been finalized, but Cameroon has already indicated that it would need outside support for this.

From the perspective of the programs, direct interventions in the area of nutrition have focused on the “window of opportunity” in the first 1,000 days. The activities are centered on essential actions concerning nutrition, the fight against micronutrient deficiencies (through a major campaign on food fortification and home fortification using micronutrients in powder form, vitamin A, iron and folic acid supplements), management of acute malnutrition, water, sanitation and hygiene, and maternal nutrition.
Progress Across Four SUN Processes
Cameroon

2013\(^1\) and 2014\(^2\) Scoring of Progress Markers

- Bringing people together into a shared space for action
- Ensuring a coherent policy and legal framework
- Aligning actions around a Common Results Framework
- Financial Tracking and resource mobilization

2014 Dashboard for Progress Markers

Stage of Preparedness

- 23% in 2013
- 36% in 2014
- 0% in 2013
- 4% in 2014

\(^1\)Externally assessed by the SUN Movement Secretariat
\(^2\)Internally assessed by in-country self-assessment exercise