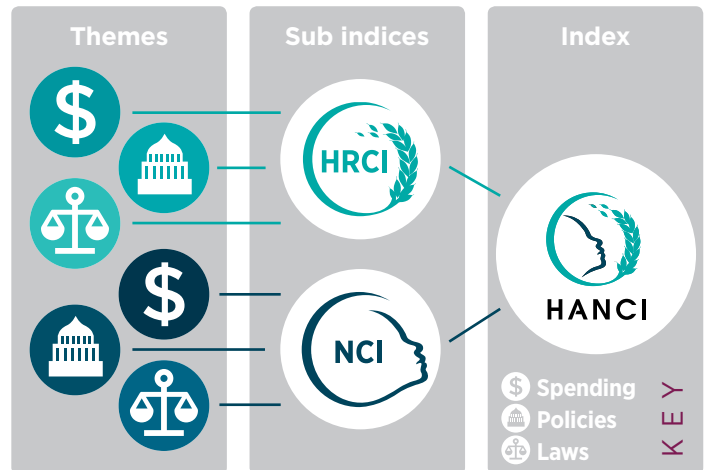
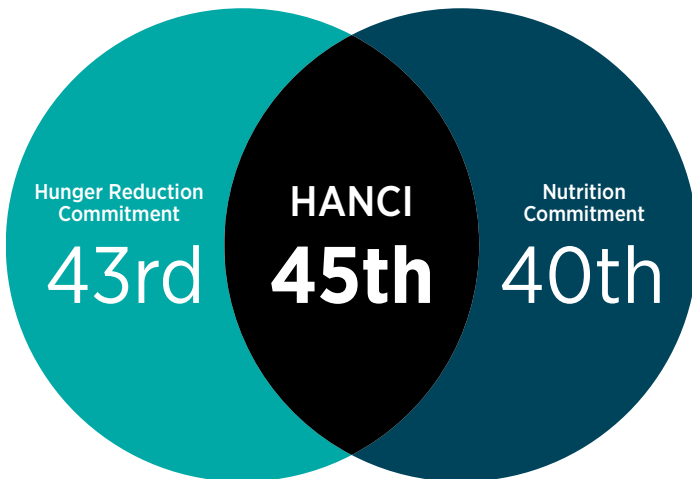




## Key data for Comoros



Existing rates of: **Wasting: 11.1%** **Stunting: 32.1%** **Proportion of population underweight: 16.9%**

Source: Government of Comoros (DHS and MICS, 2012)





















### Strong Performance

- Comoros has devised a National Nutrition Policy/Strategy.
- Comoros has introduced a multisectoral and multistakeholder policy coordination mechanism to support delivery of the National Nutrition Policy/Strategy.
- In Comoros 92.1% of women aged 15-49 were visited at least once during pregnancy by skilled health personnel in 2012.




### Areas for improvement




- Spending on agriculture (1% of public spending in 2015), does not meet government commitments set out in the African Union's Maputo Declaration (10% of public spending).
- Comoros's spending in its health sector (3.8% of public spending in 2015) does not fully meet (15%) commitments set out in the Abuja Declaration.
- Extension services are the preserve of government and poor farmers have no say in setting policy priorities. The agricultural research and extension system is not properly reaching out to poor farmers. There is no policy promoting gender equity in access to extension services.
- In Comoros, 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.
- Comoros does not have a separate budget line for nutrition; this prevents transparency and accountability for spending.
- Even though Comoros has developed a National Nutrition Policy/Strategy and a multisectoral and multistakeholder policy coordination mechanism, clear time-bound nutrition targets are still lacking.
- Policymakers in Comoros do not benefit from regular nutrition surveys that are statistically representative at national level. The last survey was published in 2012.
- The Government of Comoros does not promote complementary feeding practices and has achieved two high doses of vitamin A supplementation for only 12% of children in 2015.
- Weak access to improved sanitation facilities (34.2% in 2015) obstructs better hunger and nutrition outcomes.
- In Comoros, constitutional protection of the right to food and the right to social security is weak.
- Social safety nets in Comoros 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>	 1%	2015	43rd
 Public spending on health as share of total public spending <sup>2</sup>	 3.8%	2015	38th
<b>Policies</b>			
 Access to land (security of tenure) <sup>3</sup>	 Moderate	2016	Joint 25th
 Access to agricultural research and extension services <sup>3</sup>	 Weak	2013	44th
 Civil registration system — coverage of live births	 87.3%	2012	9th
 Functioning of social protection systems <sup>3</sup>	 Weak	2014	Joint 41st
<b>Laws</b>			
 Level of constitutional protection of the right to food <sup>3</sup>	 Weak	2016	Joint 29th
 Equality of women's access to agricultural land (property rights) <sup>4</sup>	 In Law, not in Practice	2012	Joint 1st
 Equality of women's economic rights <sup>4</sup>	 In Law, not in Practice	2011	Joint 1st
 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)	 No	2017	Joint 33rd
<b>Policies</b>			
 Vitamin A supplementation coverage for children	 12%	2015	43rd
 Government promotes complementary feeding (yes/no)	 No	2014	Joint 42nd
 Population with access to an improved water source	 89.9%	2015	9th
 Population with access to improved sanitation	 34.2%	2015	21st
 Health care visits for pregnant women	 92.1%	2012	23rd
 Nutrition features in national development policy <sup>1</sup>	 Moderate	2016-2020	25th
 National nutrition policy/strategy (yes/no)	 Yes	2013	Joint 1st
 Multisector and multistakeholder policy coordination (yes/no)	 Yes	2017	Joint 1st
 Time bound nutrition targets (yes/no)	 No	2017	Joint 39th
 National nutrition survey in last 3 years (yes/no)	 No	2012	Joint 36th
<b>Laws</b>			
 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