

Existing rates of: **Wasting: 6.9%** **Stunting: 21.4%** **Proportion of population underweight: 11.8%**

Source: Government of Cabo Verde (Ministry of Health, 1994)





















Strong Performance

- The Government of Cape Verde has ensured tenure security for rural populations. Land titling is common and land markets function well. Policy promotes equitable access to common property resources.
- 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.
- In Cape Verde, the law gives women equal access to agricultural land as men and these rights are upheld in practice. This reduces women's vulnerability to hunger and undernutrition.
- Cape Verde has devised a National Nutrition Policy/Strategy.
- The Government has fully enshrined the International Code of Marketing of Breastmilk Substitutes into domestic law.
- The Government of Cape Verde promotes complementary feeding practices and has achieved two high doses of vitamin A supplementation for 98% of children in 1996.
- 96.2% of the population of Cape Verde in 2017 has access to an improved drinking water source.
- In Cape Verde, constitutional protection of the right to social security is strong.
- Strong civil registration rates (91% in 2010) potentially enable children's access to critical public services such as health and education.

Areas for improvement




- Spending on agriculture (5.9% of public spending in 2018), does not meet government commitments set out in the African Union's Maputo Declaration (10% of public spending).
- Cape Verde's spending in its health sector (9.9% of public spending in 2017) does not fully meet (15%) commitments set out in the Abuja Declaration.
- In Cape Verde, the law gives women and men equal economic rights. However, these laws are not effectively enforced and discriminatory practices against women continue, increasing their vulnerability to hunger and undernutrition.
- Relative to other HANCI countries, Cape Verde's medium/long term national development policy (Plano Estratégico de Desenvolvimento Sustentável (PEDS)) places weak importance to nutrition.
- Even though Cape Verde has developed a National Nutrition Policy/Strategy and clear time-bound nutrition targets, a multisectoral and multistakeholder policy coordination mechanism is still lacking.
- Policymakers in Cape Verde do not benefit from regular nutrition surveys that are statistically representative at national level. The last survey was published in 2005.
- Social safety nets in Cape Verde 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 ¹	 5.9%	2018	17th
 Public spending on health as share of total public spending ²	 9.9%	2017	12th
Policies			
 Access to land (security of tenure) ³	 Strong	2016	Joint 11th
 Access to agricultural research and extension services ³	 Strong	2013	16th
 Civil registration system — coverage of live births	 91%	2010	7th
 Functioning of social protection systems ³	 Weak	2018	Joint 8th
Laws			
 Level of constitutional protection of the right to food ³	 Moderate	2014	Joint 8th
 Equality of women's access to agricultural land (property rights) ⁴	 In Law & Practice	2015	Joint 1st
 Equality of women's economic rights ⁴	 In Law, not in Practice	2019	Joint 3rd
 Constitutional right to social security (yes/no)	 Yes	2014	Joint 1st

























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

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

³ Possible scores are:  Very Weak/Weak  Moderate  Strong/Very Strong

⁴ 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	2019	Joint 16th
Policies			
 Vitamin A supplementation coverage for children	 98%	1996	6th
 Government promotes complementary feeding (yes/no)	 Yes	2012	Joint 1st
 Population with access to an improved water source	 96.2%	2017	6th
 Population with access to improved sanitation	 73.9%	2017	7th
 Health care visits for pregnant women	 87.4%	2010	31st
 Nutrition features in national development policy ¹	 Weak	2017-2021	36th
 National nutrition policy/strategy (yes/no)	 Yes	2019	Joint 1st
 Multisector and multistakeholder policy coordination (yes/no)	 No	2019	Joint 36th
 Time bound nutrition targets (yes/no)	 Yes	2019	Joint 1st
 National nutrition survey in last 3 years (yes/no)	 No	2005	Joint 37th
Laws			
 ICMBMS [^] Enshrined in domestic law ²	 Fully Enshrined	2019	Joint 1st

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

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

[^] International Code of Marketing of Breastmilk Substitutes