Key data for Lesotho

**Strong Performance**
- The Government of Lesotho 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 National Nutrition Policy/Strategy identifies time bound nutrition targets and a multisectoral and multistakeholder policy coordination mechanism has been set up.
- Policymakers in Lesotho benefit from regular nutrition surveys that are statistically representative at national level. The last survey was published in 2018.
- The Government of Lesotho promotes complementary feeding practices.
- In Lesotho 91.3% of women aged 15-49 were visited at least once during pregnancy by skilled health personnel in 2018.

**Areas for improvement**
- Spending on agriculture (2.8% of public spending in 2019), does not meet government commitments set out in the African Union’s Maputo Declaration (10% of public spending).
- Lesotho’s spending in its health sector (11.8% of public spending in 2017) is close to, yet not fully meeting government commitments set out in the African Union’s Abuja Declaration (15% of public spending).
- In Lesotho, 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.
- Lesotho does not have a separate budget line for nutrition; this prevents transparency and accountability for spending.
- The Government of Lesotho has not enshrined the International Code of Marketing of Breastmilk Substitutes into domestic law.
- The Government of Lesotho has achieved two high doses of vitamin A supplementation for only 18% of children in 2017.
- Weak access to improved sanitation facilities (42.8% in 2017) obstructs better hunger and nutrition outcomes.
- In Lesotho, constitutional protection of the right to food and the right to social security is weak.
- Social safety nets in Lesotho are basic and only cover few risks for a limited number of beneficiaries.

Existing rates of: **Wasting:** 2.1%  **Stunting:** 34.6%  **Proportion of population underweight:** 10.5%

*Source: Government of Lesotho (MICS, 2018)*
### Hunger Reduction Commitment Index (HRCI)

<table>
<thead>
<tr>
<th>Public spending</th>
<th>Score*</th>
<th>Year</th>
<th>HRCI Rank of 45</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public spending on agriculture as share of total public spending ¹</td>
<td>2.8%</td>
<td>2019</td>
<td>Joint 29th</td>
</tr>
<tr>
<td>Public spending on health as share of total public spending ²</td>
<td>11.8%</td>
<td>2017</td>
<td>6th</td>
</tr>
</tbody>
</table>

**Policies**

- **Access to land (security of tenure) ³**
  - Strong 2019 Joint 5th
- **Access to agricultural research and extension services ³**
  - Moderate 2019 Joint 21st
- **Civil registration system — coverage of live births**
  - 44.5% 2018 35th
- **Functioning of social protection systems ³**
  - Weak 2018 Joint 25th

**Laws**

- **Level of constitutional protection of the right to food ³**
  - Weak 2019 Joint 29th
- **Equality of women’s access to agricultural land (property rights) ⁴**
  - In Law, not in Practice 2019 Joint 3rd
- **Equality of women’s economic rights ⁴**
  - Not in Law 2019 Joint 16th
- **Constitutional right to social security (yes/no)**
  - No 2014 Joint 26th

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)

<table>
<thead>
<tr>
<th>Public spending</th>
<th>Score*</th>
<th>Year</th>
<th>NCI Rank of 45</th>
</tr>
</thead>
<tbody>
<tr>
<td>Separate budget for nutrition (No/Sectoral only/Yes)</td>
<td>No</td>
<td>2019</td>
<td>Joint 39th</td>
</tr>
</tbody>
</table>

**Policies**

- **Vitamin A supplementation coverage for children**
  - 18% 2017 Joint 1st
- **Government promotes complementary feeding (yes/no)**
  - Yes 2012 Joint 1st
- **Population with access to an improved water source**
  - 78.2% 2017 27th
- **Population with access to improved sanitation**
  - 42.8% 2017 Joint 15th
- **Health care visits for pregnant women**
  - 91.3% 2018 Joint 27th
- **Nutrition features in national development policy ¹**
  - Moderate 2013-2017 18th
- **National nutrition policy/strategy (yes/no)**
  - Yes 2019 Joint 1st
- **Multisector and multistakeholder policy coordination (yes/no)**
  - Yes 2019 Joint 1st
- **Time bound nutrition targets (yes/no)**
  - Yes 2019 Joint 1st
- **National nutrition survey in last 3 years (yes/no)**
  - Yes 2018 Joint 1st

**Laws**

- **ICMBS^ Enshrined in domestic law ²**
  - Not Enshrined in Law 2019 Joint 33rd

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

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