



WFP Cameroon MALNUTRITION PREVENTION AND TREATMENT

Context

According to the 2022 Global Nutrition Report, Cameroon suffers from the triple burden of malnutrition - stunting, anaemia, and overweight in women and children. There has been no progress towards reducing anaemia among women of reproductive age and achieving the low-birth-weight targets, (12 percent of infants are still affected). However, Cameroon is 'on course' towards achieving the exclusive breastfeeding and wasting targets (39.4 percent of infants aged 0 to 5 months are exclusively breastfed out of a target of 50 percent by 2025, and 4.3 percent of children under 5 years are affected by wasting which is lower than the African average of 6 percent).

Nonetheless, preliminary results of the 2022 SMART nutrition survey in the Adamawa, East Far North and North regions revealed a worrying prevalence of global acute malnutrition (GAM) and severe acute malnutrition (SAM).

intervention and emergency thresholds of 10 and 15 percent. Children populations in all refugee settings in these three regions have rates above the emergency threshold of two percent.

According to the Global Nutrition Report, Cameroon has made progress to reduce the chronic malnutrition, however 29 percent of children under 5 years of age in the Adamawa, East and North regions are still affected. Amongst refugee children out-of-camp in the Adamawa, North and East regions, the prevalence is above the emergency threshold of 40 percent. In the Far North region, 49.2 percent of children who are internally displaced are stunted, while in the refugee camp, 44.1 percent are affected.

The deep-rooted issues such as poverty, food insecurity, insufficient access to health facilities, inadequate water, sanitation and hygiene (WASH) infrastructure and practices, gender disparities, etc. are slowing down progress towards improving the nutritional and health status of pregnant and breastfeeding women and girls (PBWG) and children. Economic access to a nutritious diet is also an important underlying driver of nutrition outcomes. According to 2021 Fill the Nutrient Gap study, 48 percent of households in Cameroon cannot afford a nutritious diet, and up to 70 percent in the Far North and East regions. This is also closely tied to inadequate dietary diversity, resulting in only 11 percent of children under two years of age who have a minimum acceptable diet.

Regions	GAM rate (%)	SAM rate (%)	Chronic Malnutr rate (%)
Far North	8.0	1.7	35.5
North	6.9	2.6	39.4
Adamawa	6.6	1.3	32.1
East	3.9	1.1	36.9

Further analysis revealed alarming acute malnutrition rates in children under 5 years in refugee populations in the North, Adamawa and East regions. The rates vary between 10 percent in those living outside of camps in the North and 17.4 percent in the Adamawa and East campsites, respectively, which are above the

WFP RESPONSE

WFP's nutrition strategy is aligned with the Government of Cameroon's draft multisectoral nutrition development plan, integrating nutrition-specific and nutrition-sensitive interventions. WFP continues to support the government in revising the national nutrition policy and its operational plan developed in 2015 and also supported the budget elaboration of the multisectoral national nutrition development plan. Together with UNICEF and UNHCR, WFP financed the SMART survey in December 2022, which assessed the nutrition situation of children under 5 years old in the four most affected regions of the country – East, Adamawa, North and Far North regions. WFP is supporting the cost of hunger (COHA) study in Cameroon coordinated by the Ministry of Economy, Planning and Regional Development (MINEPAT).

WFP contributes to national efforts by providing nutrition support to the most vulnerable through prevention and treatment of malnutrition, focusing on delivering support to mothers and children during the 1,000-day window – from conception to two years of age. WFP implements a two-pronged approach to respond to immediate needs with emergency response and longer-term support to build resilience. in six crisis-affected regions of Cameroon: Adamawa, East, Far North, North, Northwest, Southwest.

Emergency Nutrition Response

The emergency nutrition response aims to manage wasting – when a child rapidly loses weight – through prevention and treatment activities that are integrated into WFP's food assistance to severely food-insecure communities. Food assistance, in the form of in-kind or cash transfers, meets the macro and micro-nutrient needs and is complemented by specialized nutritious foods (SNF) to meet the special nutritional needs of children aged 6-23 months and pregnant and breastfeeding women and girls (PBWG). Working with partners, WFP systematically screens children by measuring their mid-upper arm circumference to determine if they are malnourished and refers them for treatment if they are severely malnourished Children 6-23 months old automatically qualify for supplementary feeding whereby, they receive specialised nutritious food on a regular basis until their nutritional status improves. An integrated approach is taken by WFP and partners at nutrition distribution sites to provide vitamin A, iron and folic acid supplementation, vaccinations, deworming, family planning services, and sensitisation of populations on good WASH and other essential family care practices. In 2022, more than 88,500 children aged 6-23 months and PBWG were assisted by providing SNF (super-cereal plus). In 2023, WFP plans to assist 99,500 children and 11,400 PBWG in 32 health districts in Cameroon.

To promote local and sustainable solutions in the Far North, WFP and partners set up community sites called positive deviance homes to prevent and treat acute malnutrition using local nutritious food. Community-identified parents known as *Mères et Pères Lumières* lead the initiative. Under this approach a nutritional assessment is carried out and a local porridge is used to treat moderate acute malnutrition. Additional activities include culinary demonstrations, nutrition education and complementary health services like vaccination, micronutrient supplementation, deworming and referrals for appropriate care. Between December 2022 and February 2023, 364 children with moderate acute malnutrition (MAM) enrolled in 11 positive deviance homes in the Far North Region and 10 in the East. The recovery rate is about 85 percent.

WFP also supports the promotion of appropriate Infant and Young Child Feeding (IYCF) practices, feeding practices for pregnant and breastfeeding women and

girls through sensitisation campaigns and counselling conducted by community health workers, IYCF support group leads and community-identified model parents. They use existing platforms like distribution sites, IYCF support groups, village savings and loans associations (VSLA) and positive deviance homes to deliver social behaviour change communication (SBCC) sessions. Through SBCC, WFP reached 110,000 parents and caregivers and assisted 52 IYCF support groups in 2022.

In collaboration with the Ministry of Public Health, WFP implements nutrition assessment, counselling and support (NACS) for people living with HIV (PLHIV). This intervention aims at preventing and treating moderate acute malnutrition in anti-retroviral treatment (ART) clients in 10 accredited HIV care units in the East and Adamawa regions. WFP provides specialised nutritious foods to treat acute malnutrition, trains service providers on HIV-related nutrition, and supports healthy feeding practices while promoting SBCC. In 2022, almost 4,000 malnourished ART clients (71 percent women) were assisted in the East and Adamawa regions.

WFP also provides livelihood support to vulnerable ART clients in the East and Adamawa regions. WFP and partners have structured ART clients into groups through VSLAs and cooperatives to facilitate access to income-generating activities. In addition to boosting their incomes, these activities have encouraged social cohesion, solidarity, and facilitated psycho-social support. One of these cooperatives in the East Region has supplied more than seven tons of agricultural products to schools under the home-grown school meals initiative, a hallmark of WFP's work to support local and sustainable solutions by linking smallholder farmers to markets. In 2022, three new cooperatives were created and provided with inputs to start food production and transformation. In 2023, WFP will strengthen the capacity of 37 VSLAs grouped into cooperatives to facilitate access to credit and markets.

To further efforts at early recovery, more than 2,200 households with PLHIV (65 percent women) were integrated into WFP's cash transfer assistance in 2022. The unrestricted cash assistance gives dignity and flexibility in deciding on the foods to purchase. In 2023, WFP will extend food assistance to 500 additional households in the Southwest, East and Adamawa regions.

Resilience building

WFP works to transition from emergency nutrition assistance to programmes that build the resilience of women and children. This is done through layered activities related to improved access to diversified, nutritious and safe foods; nutrition and health services; women's empowerment; community nutrition; strengthening healthy food value chains; and SBCC.

Effective management of malnutrition depends on early detection and treatment of identified cases. As such, WFP partners perform systematic nutritional screening of children aged 6-59 months and referral of severely malnourished persons to appropriate treatment and care centres. In 2022, about 45,000 children aged between 6-59 months were screened in the target communities of the Adamawa, East and Far North regions. In these communities, 3,600 children were identified as malnourished, recording an overall GAM rate of eight percent. All the 981 SAM cases identified during screening were referred to treatment centres.

In the last quarter of 2022, WFP initiated cash transfers to 1,865 pregnant and breastfeeding women to improve feeding practices and the use of maternal and child health care services. This initiative is linked to the Ministry of public health's *cheque santé* programme, which allows women to do all their pre- and post-natal consultations at a registration cost of 6,000 FCFA. This support increased by 27 percent from January to February 2023 the number

of women who participated in at least one post-natal consultation and the number of children vaccinated. Similarly, the number of women registered in the programme *cheque santé* increased by 32 percent in the same period and over 200 more children were vaccinated in February than in January 2023. However, due to a lack of resources, WFP could not continue the activity after February 2023. WFP plans to support 28,650 pregnant and breastfeeding women in the Far North Region in 2023.

WFP piloted rice fortification in the Far North region alongside a local partner with the longer-term aim of linking it to the homegrown school feeding programme. The fortified rice increases micronutrient intake and consequently contribute to building resistance to anaemia in children, while providing a market for smallholder farmers. A total of 590 mt of rice was fortified and distributed to schools participating in WFP's school meal programme in the Far North region in 2022. WFP will scale up this activity in 2023.

WFP also promotes the diversification of food sources. To meet the basic nutritional needs of the most vulnerable populations in the Adamawa, East and Far North regions and strengthen their long-term resilience, WFP has assisted targeted community groups, particularly cooperatives set up by PLHIV to set up and maintain community fields and gardens, poultry and fish farming projects, and VSLAs.

People Assisted

Indicator	2018	2019	2020	2021	2022
Children 6-23 months that received blanket supplementary feeding	155,614	45,669	116,813	116,759	88,340
Pregnant and breastfeeding women and girls (PBWG) that received targeted supplementary feeding	-	3,655	21,285	13,087	6,488
Parents and child carers sensitised on infant and young childfeeding practices	100,000	174,483	129,661	121,983	110,000
Malnourished ART clients who received supplementary feeding	1,602	1,860	5,776	3,797	3,954
ART clients reached with economic support, including training and start-up kits	500	575	750	637	637
Parents trained in early detection of acute malnutrition	-	571	-	664	-
Community and government health workers trained in nutrition in emergency topics	2,981	50	3,168	395	32
MT of specialised nutritious foods provided to children, PLHIV and PBWG	4,554	2,641	3,201	3,001	579

Resource outlook

WFP urgently needs USD 9.5 million to continue implementing nutrition activities, representing 84 percent of the total requirements from May to October 2023. The primary concern is the shortfall in funding for nutrition resilience activities (88 percent representing 3.2 million).

Donors / Partnership

WFP has been able to implement its interventions thanks to the support of and collaboration with partners including the Government of Cameroon, donors, UN CERF and other multilateral contributors, other UN agencies and cooperating partners:

France, USAID, Germany, France, Private donors



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