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Fill the Nutrient Gap (FNG) Cameroon

Executive Summary

The Government of Cameroon, with technical assistance from WFP, undertook the FNG analysis in an effort to reduce malnutrition. Multisectoral stakeholders were mobilized and consensus was reached on how to improve the availability and affordability of nutritious diets.

Context

Despite economic development in recent decades, Cameroon has made little progress in reducing malnutrition. Stunting affects nearly 30 percent of children under 5 and is prevalent in the most vulnerable regions including the Far North, North, Adamawa and East. The triple burden of malnutrition in Cameroon is underscored by persistently high rates of stunting and wasting, multiple micronutrient deficiencies (particularly of iron in children and women), and an increasing burden of overweight in urban areas and among more affluent groups. This burden contributes to high levels of social and economic loss and slows national development.

Process of the FNG

The FNG Task Force was established in 2020 under the direction of the Technical Secretariat for the Interministerial Committee for the Fight Against Malnutrition under the Office of the Prime Minister. A multistakeholder workshop was held in December 2020 to identify objectives, define model parameters, and identify data for the analysis. Analysis took place in early 2021 with two virtual technical validation sessions in March and June. In September 2021, a multiday workshop was held in Douala with the FNG Taskforce and multisectoral stakeholders to disseminate the findings of the analysis and identify priorities and recommendations based on the findings.

Methodology

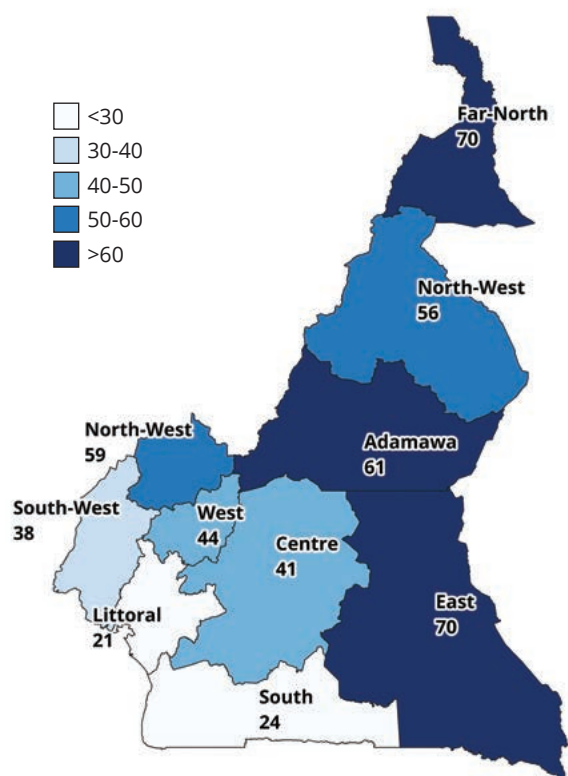
The FNG analysis is composed of two components: a comprehensive secondary review of the food system and supporting systems, and a quantitative analysis

using Cost of the Diet (CotD) software. CotD enables the FNG to estimate the lowest-cost diet that meets nutritional needs using local foods for each of the 10 regions of Cameroon, calculates the affordability of that diet for the population, and models the impact of various interventions across sectors. The analysis provides entry points for how multiple sectors can support nutrition and increase access to nutritious diets.

Main findings

1. Nearly half of Cameroonians (48 percent) cannot afford a diet that meets their nutritional requirements, and 24 percent cannot afford a diet that meets just their energy needs. Figure one shows that the level of non-affordability of a nutritious diet is highest in the Far North (70 percent), East (70 percent), and Adamawa (61 percent), and is lowest in the Littoral region (21 percent). It is higher in rural than in urban areas.

Figure 1: Non-affordability of the nutritious diet (%)



2. There is a strong correlation between non-affordability of nutritious diets and stunting across the regions of Cameroon. Regions with the highest rates of non-affordability, such as Far-North, North, East, and Adamawa, have the highest rates of stunting. Enabling access to food through market and non-market mechanisms is pivotal in the fight against chronic malnutrition. Infrastructure underdevelopment, conflict and displacement,

widespread poverty, and climate shocks undermine the food system and exacerbate malnutrition in the most vulnerable regions.

3. For a 5 person household¹, a nutritious diet costs FCFA 38,430 per month on average, almost twice as much as a diet that only meets energy needs. The cost of a nutritious diet varies across the country, from FCFA (Central African CFA Franc) 30,000 in the South to FCFA 45,000 in the Northwest and Centre. Even in regions where the cost is lower, high levels of poverty prevent many households from being able to afford nutritious diets.
4. The nutritional needs of adolescent girls and pregnant and lactating women require nutrient-dense foods that are more costly. Together they account for 56 percent of the household cost of a nutritious diet. These individuals are especially vulnerable because they have increased requirements for nutrients such as iron and folic acid, which come from costly foods. When micronutrients cannot be attained from local diets, providing a multiple micronutrient tablet or iron and folic acid supplement to adolescent girls and pregnant and lactating women can meet their needs.
5. Breastfeeding and complementary feeding practices for young children are suboptimal. Only 40 percent of children under 6 months are exclusively breastfed per WHO recommendations, and only 11 percent of those aged 6–23 months receive a minimal acceptable diet. Promotion of optimal breastfeeding is essential, as are nutrition education on complementary feeding practices, and actions across sectors to bring nutritious foods within reach for all households, thus reducing stunting and morbidity.
6. The agricultural production system in Cameroon is underdeveloped and needs to be reoriented to increase the availability of nutritious foods at scale locally, and to increase the competitiveness of Cameroonian production for international trade. Currently over 40 percent of Cameroonians are involved in agriculture which employs 70 percent of the workforce and contributes 42 percent to GDP, yet the majority are smallholders with fewer than 2 hectares. These small farms are characterized by low levels of productivity, inefficient production systems and very high levels of post-harvest loss. Investments in nutritious food production and diversification, post-harvest processing, transportation infrastructure, and cold chains are necessary to improve the production and availability of nutritious foods of plant and animal origin.

¹ The 5 person household modelled in the FNG includes a child under two, a school-age child, an adolescent girl, a breastfeeding woman, and an adult man.

7. In the most vulnerable regions where chronic conflict and displacement continue to disrupt livelihoods and food systems, safety nets are essential for the most vulnerable. These include food assistance, blanket supplementary feeding for women and girls, cash-based transfers, and school meals, which can secure nutritional gains for children. Resilience and livelihood programmes can support long-term outcomes but many refugees, internally displaced people and host communities remain highly dependent on integrated food and nutrition assistance. In less vulnerable regions access to nutritious diets is higher and dietary diversity with animal source foods and nutritious fruit and vegetables can contribute to meeting nutrient needs for vulnerable groups.
8. Multisectoral actions are required to sustainably improve access to nutritious diets in Cameroon. Actions are required across food and health systems. The education sector can deliver nutritious school meals and provide nutrition education, the private sector can enable food products to reach remote areas and can support the scale up of fortified foods, and the social protection sector can ensure that the most vulnerable have access to nutritious diets. Regular monitoring and evaluation of actions is essential to inform the different ministries and implementors of the results achieved.

Insight from co-located nutrition modelling initiative

The FNG modelling in Cameroon was complemented by two other nutrition modelling and optimization tools: MINIMOD and Optima Nutrition. These tools provide policymakers with a coordinated set of analyses that allow them to reallocate scarce resources towards nutrition-specific and nutrition-sensitive actions for maximum impact on target groups. Optima Nutrition shows that from 2021 to 2030, reallocating current nutrition spending optimally could mean 60,000 fewer child deaths, 20,000 fewer severely malnourished children, and 125,000 fewer stunted children. MINIMOD explores how micronutrient interventions can more cost-effectively reach vulnerable groups based on current Cameroonian diets.

Stakeholder recommendations by sector

Health sector

- Strengthen multiple micronutrient and iron and folic acid supplementation for women and adolescent girls.
- To address the triple burden of malnutrition, design nutrition education programmes to promote healthy diets that include nutrient-dense fruit, vegetables and animal source foods.
- Reinforce initiatives to promote breastfeeding as the foundation of good nutrition for infants and young children.
- Plan reallocation of financial resources according to the insights from Optima Nutrition to minimize mortality, stunting and wasting over ten years.

Education sector

- Implement an Integrated National Programme of School Nutrition and Hygiene in all schools; include school gardens, WASH, nutrition education, and physical activity.
- Develop normative documents on school feeding to include nutritious vegetables in school meals and establish linkages with local farmers to promote resilience.

Agriculture and livestock and infrastructure and energy sectors

Agriculture and livestock

- Strengthen programmes to diversify production and increase supply of nutritious foods in markets, especially small livestock, poultry, fish and milk. Combine this with communications on consumption of nutritious foods, especially for vulnerable individuals.
- In regions where a nutritious diet is least affordable, roll out regional food security and livelihoods programmes that integrate nutrition based on locally available foods, including from smallholder farmers. Create healthy recipes from local foods and promote them through community education. Integrate aquaculture and the cultivation of nutritious fresh produce (including moringa and green leafy vegetables) into livelihoods programmes.
- Build capacity on the integration of nutrition objectives and of monitoring indicators for improving dietary diversity in plans and programmes.

Infrastructure and energy

- Prioritize investments and development of infrastructure and energy for production, transportation, processing and marketing of nutritious foods to reduce post-harvest losses.

Fortification, private sector, and trade

- Develop rice and other food/condiment fortification programmes, in addition to strengthening existing fortification programmes according to the potential benefits identified in the FNG and MINIMOD analyses. Ensure a behaviour change communication plan to promote consumption of fortified rice by target individuals.
- Identify opportunities for the development of locally produced fortified complementary foods targeting children aged 6 – 23 months.
- Create a regulatory environment conducive to implementing fortification, considering imports of micronutrient premixes and the competitiveness of local production in relation to imports.

Social protection and gender

- Build capacity and provide nutrition education for social workers and managers of programmes responsible for the supervision of women, children and socially vulnerable groups, including indigenous populations.
- Ensure cash transfer values are sufficient to cover the local cost of a nutritious diet. Improve the quality of accompanying measures on nutrition education and feeding practices.
- Sensitize and mobilize communities for Essential Family Practices, including dietary practices and the fight against harmful cultural practices such as early marriage and pregnancy.

Cross-cutting/coordination

- Align National Nutrition Policy documents with the National Development Strategy (SND) 30, incorporating the results of the FNG analysis. Implement a results monitoring framework for the Interministerial Committee for the Fight Against Malnutrition (CILM) based on the results of the FNG analysis.
- Improve the national human resources capacity for nutrition through the creation of the Nutritionist Corps within the public service.
- Improve nutrition data collection and sharing of national surveys to ensure nutrition goals and monitoring are considered.
- Partner with media and well-known celebrities in Cameroon to create social campaigns and messages on healthy and nutritious diets.



Interministerial Committee for the Fight Against Malnutrition in Cameroon

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