The Continental Nutrition Accountability Scorecard
A Call for Better Advocacy and Accountability for Nutrition Investments in Africa
February 2019
ALN
AFRICAN LEADERS FOR NUTRITION
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FOREWORD

The devastating effects of malnutrition are one of the most complex challenges facing the global community. Malnutrition robs our bodies and minds of proper development, it steals from our economic potential – malnutrition deprives infants and children of a fair chance in life. Malnutrition’s hold on Africa’s growth and development has worsened. Compared to the rest of the world, Africa’s levels of malnutrition remain unacceptably high and progress to reverse them is slow. Since the new millennium, the number of stunted children in Africa has gone up from 50.6 million in 2000 to 58.7 million in 2017. Africa has 13.8 million wasted children and 9.7 million children are overweight. A growing body of evidence recognizes malnutrition and economic development are deeply interlinked. Poor nutrition is responsible for stunting children’s growth, harming children’s educational development and future economic prospects. African economies are losing 11% of their annual gross domestic product to malnutrition-related costs. According to UNICEF, African economies are losing approximately $25 billion a year due to malnutrition. Stunted children today lead to stunted economies tomorrow, and the African Governments recognize this and have decided to take decisive actions.

The African Union Assembly Heads of State and Government adopted the Declaration on Nutrition Security for Inclusive Economic Growth and Sustainable Development in 2014 in Malabo. These are aligned to the United Nations’ Sustainable Development Goals (SDGs), and the African Union Vision 2063 both adopted in 2015. The Nutrition Security for Inclusive Economic Growth and Sustainable Development is championed by His Majesty King Letsie III of the Kingdom of Lesotho and is codified as a commitment from African leaders to strengthen advocacy efforts in support of improved nutrition.

The African Union Assembly of Heads of State and Government in Addis Ababa in 2018 stepped up its action in the fight against malnutrition by endorsing the African Leaders for Nutrition (ALN) initiative, ALN is an African-led platform of “ALN Champions” comprising of current and former Heads of State, Finance Ministers and eminent leaders with the power to catalyze and sustain high-level political leadership and commitment to end malnutrition in Africa.

Today, African Leaders for Nutrition - which is hosted by the African Development Bank - and the African Union, in close collaboration with partners, launch this initial Continental Nutrition Accountability Scorecard. It is a data-based advocacy tool that gives a snapshot on how African leaders are doing on delivering main nutrition indicators. With time, additional data and inputs, the scorecard will increasingly be seen as the aggregated source for tracking Africa’s effort to stop malnutrition and its effects. This year’s launch scorecard lays a foundation to drive action towards targeted nutrition investments.

The Scorecard’s initial findings show that the rate of childhood stunting remains a cause for concern. Half of African countries have prevalence stunting rates of above 30%, while only seven African countries have prevalence below 19%, which is classified as low by the World Health
Organization. Similarly, just 15 African countries have managed to contain childhood wasting within the acceptable range of less than 5%. A similar picture emerges for other indicators, including anaemia among women of reproductive age. In fact, 38 countries in Africa have anaemia prevalence of more than 30.3%, which is higher than the 2012 global baseline.

The results indicate we have much work to do, but Africa has made commendable strides. For instance, 18 countries have already surpassed the target of at least a 50% rate of exclusive breastfeeding, which is key for the healthy growth and development of infants. Twenty African countries have met the 70% minimum threshold for vitamin A supplementation, a micronutrient that helps reduce childhood morbidity and mortality.

This is the time to translate talk into action to reduce instances of malnutrition. The Continental Nutrition Accountability Scorecard is designed as a comparative resource to inspire African countries to tackle malnutrition in all its forms, to scale up and embrace multisectoral approaches for nutrition, and to catalyze greater accountability for nutrition results. ALN’s membership targets the highest levels of African governments, because these interventions require intergovernmental support from the top.

Four key recommendations to the African Heads of Government include an increase of budgetary allocations towards the implementation of multisectoral nutrition plans, and enforcing compliance with mandatory food fortification legislation to stem out anaemia and other diseases. Further recommendations request that they should step up the empowerment of women and adolescent girls by supporting them particularly at the most critical time of a child’s life, during pregnancy and early childhood. This nutritional window is critical for their development for life. The timely collection of quality data is important, as it will guide appropriate actions.
MALNUTRITION RELATED

7 countries have childhood stunting prevalence rates below 19%

15 countries have childhood wasting prevalence rates below 5%

38 countries have women’s anaemia prevalence rates of more than 30%
PREVALENCE RATES IN AFRICA

18 countries have at least 50% of infants exclusively breast fed.

20 countries have +70% prevalence rates for vitamin A supplementation.
CHILDHOOD STUNTING

150.8 million children under 5 years are stunted worldwide

58.7 million of the world’s stunted children under 5 years are in Africa
INTRODUCTION

The African Union Assembly of Heads of State and Government, during the 23rd Ordinary Session, held in Malabo, Equatorial Guinea from 26 to 27 June 2014, adopted the Declaration on Nutrition Security for Inclusive Economic Growth and Sustainable Development in Africa [Assembly/AU/Decl.4 (XXIII)]. The Heads of State committed “to continue the dialogue and strengthen advocacy efforts in support of improved nutrition, including supporting the AU Champion.”

While African countries are making significant efforts to address malnutrition, with more governance instruments and policies and promotion of nutrition action-plans among others - the burden of malnutrition across the world remains high and effective progress low. According to the Global Nutrition Report 2018, ‘malnutrition is responsible for more ill health than any other cause’. Children under five years of age face multiple burdens; 150.8 million are stunted, of which 58.7 million are in Africa, 13.9 million are wasted and 8% of adults over 20 are obese. Meanwhile, 20 million babies are born of low birth weight each year.

Recognizing that nutrition is not only an outcome but also an investment in economic development, the various targets that have been set to advance nutrition goals in Africa have provided a unique opportunity for African leaders to give enough attention to their respective country status towards achieving nutrition targets and commitments.

Engagement with Africa’s highest political influence for mutual advocacy and accountability on nutrition security at this juncture is vital. Therefore, the involvement of the high-profile personalities such as Heads of State, Ministers of Finance, and eminent personalities to advocate for investment in nutrition will contribute immensely to the achievement of nutrition goals for inclusive economic growth and sustainable development in line with the AU Agenda 2063.

The African Leaders for Nutrition initiative (ALN), set up by the African Union Commission and the African Development Bank is pursuant of the implementation of Africa’s commitments on nutrition security, and will serve as high-level platform for regular political engagement on nutrition in Africa.

The Continental Nutrition Accountability Scorecard is a key advocacy tool to support the African Leaders for Nutrition platform to highlight individual country progress, and provide a high-level snapshot of continental progress towards reaching the global, continental, and other nutrition targets.

In this Inaugural Report to African Heads of State and Government, the current nutrition status is highlighted to serve as a basis of benchmarking progress in subsequent years towards achieving nutrition goals in Africa and transforming the lives of Africans in line with Africa Vision Agenda 2063. It provides the research context, methodology, and key findings and makes recommendations on the way forward.

Twelve indicators clustered in four categories have been used to highlight the status in achieving nutrition goals in Africa. The categories include Nutrition Status; Coverage of nutrition related Services; Provision of nutrition related Governance, Policy and Legal and Socioeconomic Impacts.
REPORT PREPARATION PROCESS

In February 2018, the African Leaders for Nutrition Secretariat reviewed scorecards and reports from other initiatives such as the African Leaders Malaria Alliance, the Comprehensive Africa Agriculture Development Program Biennial Review, the African Agricultural Transformation Scorecard, the Global Nutrition Report and other relevant nutrition reports from the Food and Agriculture Organization of the United Nations, the New Partnership for African Development, Scaling Up Nutrition Movement, the United Nations Children’s Fund, the World Bank and, the World Health Organization. This was to explore how best to develop an effective and successful Continental Nutrition Accountability Scorecard to add value without duplicating effort.


In July 2018, the technical sub-working group and the Africa Leaders for Nutrition Secretariat identified a list of actionable high-level catalytic nutrition-sensitive and nutrition-specific indicators to include in the Continental Nutrition Accountability Scorecard. These indicators are closely aligned with indicators used for the World Health Assembly targets, Sustainable Development Goals, Comprehensive Africa Agriculture Development Program (Malabo Declaration) and the African Regional Nutrition Strategy commitments, as well as priority indicators identified during the Cost of Hunger in Africa country consultations.

In October 2018, the final list of indicators was presented at a consultative meeting to the African Union Member States, the Cost of Hunger in Africa (COHA) countries and the Regional Economic Communities in Africa. All countries were targeted as part of the consultation but due to time constraints, only the COHA countries were selected. Related to this, the decision was taken to use existing secondary data sources for the inaugural Scorecard, and to focus on the current status of nutrition in Africa. Subsequent editions of the Scorecard will highlight progress in achieving nutrition targets within countries and across the continent.

In November 2018, consultations were initiated with partner institutions including the Food and Agriculture Organization, the International Food Policy Research Institute, New Partnership for African Development, Africa Nutrition Society, Scaling Up Nutrition Movement, United Nation Children’s Fund, Forum for Agriculture Research in Africa, United Nations Economic Commission for Africa, World Bank, World Food Program,
and World Health Organization as well as other relevant nutrition reports from the Global Nutrition Report. This goal of this process was to compile existing country data for the Scorecard indicators and design the scorecard.

The Continental Nutrition Accountability Scorecard is guided by selected relevant indicators and performance metrics aligned to global and continental commitments. It seeks to capture the cross-cutting nature of nutrition through inclusion of indicators, showing the clear linkages of nutrition across many sectors, namely agriculture, broader maternal and child health, water and sanitation, and more, providing a clear perspective on where nutrition-sensitive investments and other actions can have the largest impact. At the country level this will provide Heads of State and the eminent personalities with a high-level advocacy tool, and a forward snapshot of where action is required to meet globally agreed nutrition goals to advance the nutrition agenda.

Following the presentation of the Scorecard at the special session within the margins of the 32nd Ordinary Session of the Assembly of the African Union on 11 February 2019, both the African Leaders for Nutrition Secretariat and the African Union Commission will continue the process with Governments and partners to finalize the Scorecard for subsequent endorsement by Heads of State and Government.
KEY FINDINGS

The African continent continues to shoulder the heavy burden of malnutrition. Although tremendous strides have been made to address malnutrition and related challenges, the battle is far from being won. Additional and sustained efforts are needed to tackle and reverse the growing burden of malnutrition, in line with the global and continental commitments made in 2015. Some countries have made notable strides on the pathway to achieving the World Health Assembly (WHA), Malabo Declaration and Sustainable Development Goals (SDG) targets. More effort is required to fast-track the achievement of key nutrition targets. Key nutrition indicators such as childhood stunting, anaemia among children under five years and women of reproductive age (WRA) are not on track.

Nutrition Status in Africa

The report provides a snapshot of the nutrition status on the continent using a selected set of indicators used in the Scorecard. The indicators include: stunting, wasting, overweight, prevalence of anaemia and exclusive breast feeding among infants.

Stunting among children under the age of five remains a key challenge in Africa. Half of African countries have high to very high (> 30%) prevalence of childhood stunting based on World Health Organization’s classification of assessing severity of malnutrition. Only seven countries have a low prevalence (< 19%). To meet the World Health Assembly commitment of reducing stunting by 40%, the stunting rate should be at least 14.7% by 2025. Based on the current status, most African countries are unlikely to reach the target by 2025. Childhood stunting is detrimental to the development of the grey matter among children and undermines economic productivity. Despite this, countries such as Ghana halved stunting rates from 36 to 19, over 11-year period.

The World Health Assembly target for wasting is to reduce and maintain childhood wasting from 7.9% in 2012 to less than 5% by 2025. Only 15 countries have managed to contain the prevalence of wasting within this range. The bulk of the countries have poor to critical prevalence of childhood wasting, ranging from 5% to 23%.

The World Health Assembly target for childhood overweight is to have no increase from the 2012 baseline prevalence, estimated at 6%, that is, maintain the prevalence to less or equal to that level. According to the Nutrition in the World Health Organization African Region Report, the continental median prevalence is 4.1%. Thirty African countries have low prevalence (<5%) of children under five who are overweight. Nevertheless, childhood overweight remains a challenge for the continent. Some countries have very high prevalence ranging from 6% to 22%. It appears that most countries with the highest per capita income are also countries with the highest obesity level, indicating the double burden of malnutrition.

Globally, the 2012 baseline for anaemia among Women of Reproductive Age (WRA) was 30.3%. In 2017, the African continental median prevalence of anaemia among WRA was 47.3 %. Considering that the WHA target is to reduce this prevalence to 15% by 2025, Africa continues to have a very high prevalence of anaemia, ranging from 22% to 59%. Thirty eight African countries have prevalence of anaemia among WRA higher than the global estimates in 2012.

In 2012, the rate of Exclusive Breastfeeding (EBF) among infants aged 0-5 months was 37%, while the WHA target for 2025 is to increase the rate to at least 50%. In Africa, 18
countries have already surpassed this target, while ten have rates ranging from 37% to 48%. The continental median rate currently stands at 41.9%. Despite this, 20 African countries have very low rates of EBF ranging from 36% to 5%. Some of the high impact interventions to promote EBF include the use of health system platforms to support exclusive breastfeeding, institutionalizing the Baby-Friendly Hospital Initiatives, limiting aggressive and inappropriate marketing of breast-milk substitutes and empowering women to exclusively breastfeed, by supporting six months’ mandatory paid maternity leave for women in formal employment, as well as policies that encourage women to breastfeed in the workplace.

A majority of African countries still face the serious problem of micronutrient deficiencies, including iron deficiency among children under five, exposing their early childhood to recurrent nutritional and health problems. High impact interventions on micronutrient deficiencies are being implemented in countries but need to be increased and scaled up to impact children’s nutrition status.
Status on Nutrition Related Service Coverage

Twenty African countries attained the minimum threshold of 70% vitamin A supplementation coverage recommended by UNICEF\(^1\). In 26 countries, the coverage ranges from 65% to 99%. Despite this impressive coverage, 14 countries have a low vitamin A supplementation ranging from 50% to 2%. Vitamin A is an essential life-saving intervention for critical neonatal development milestones. Countries with low coverage will need to invest more in food fortification and improving dietary diversity to address vitamin A deficiency.

Access to safely managed water that is free from contamination, and available on demand is the preferred indicator, in line with the SDGs. Due to lack of data across several countries, a pragmatic decision was made to use an indicator on “Access to clean drinking water”. As data become available, the focus will shift to the use of safely managed water. The current status indicates that the African region has median percentage coverage of 73.9%. The coverage ranges from 19% to 100%. Only eight African countries meet the recommended threshold of above 85% access to clean drinking water.

Similarly, access to safely managed sanitation facilities is a more stringent indicator for sanitation coverage. Owing to the paucity of data in many countries, a decision was made to substitute this with access to improved sanitation. Subsequent versions of the scorecard however, will present data on safely managed sanitation. Reports on the population using improved sanitation facilities show that 29 African countries do not meet the minimum requirement for improved sanitation. Nevertheless, the population of 19 African countries have access to improved sanitation. More effort is required to provide Africans with access to improved sanitation.

The Status of Provision of Nutrition Related Governance, Policy and Legal Instruments

Two indicators were selected to show the current status in relation to governance, policy and legal instruments. The indicators include legislation for mandatory food fortification and legislation on the code of marketing of breast milk substitutes.

There is no evidence of existence of mandatory legislation on food fortification in 15 African countries. However, 39 African countries have at least one legislation on food fortification. Food fortification is a cost-effective intervention to address micronutrient deficiency especially among pregnant and lactating women, and avert several life-threatening diseases and conditions among children under five and pregnant women.

Critical legislation is vital for the attainment of SDG2, on ending hunger and achieving food and nutrition security. The enforcement of international code of marketing of breast-milk substitutes will promote exclusive breastfeeding. Implementation of relevant health assembly resolutions are critical for ensuring an environment that supports proper infant and young child feeding practices. However, only 12 African countries have legislation to protect breastfeeding. Countries have to make significant strides in adopting and implementing legislation to protect and promote breastfeeding. It is also important to target investment in nutrition specific and nutrition sensitive interventions.

NUTRITION-RELATED POLICY IN AFRICA

39 African countries have mandatory legislation on food fortification

Nearly all African countries have some form of a multisectoral nutrition action plan

Improvements on transforming plan into action are needed
NUTRITION INTERVENTIONS IN AFRICA: ANALYSIS OF THE MISSING POINTS

The nutrition and health aspirations of the African continent are well articulated in several continental documents including the Malabo Declaration, the African Regional Nutrition Strategy, and Agenda 2063. Out of the 60 member countries of the global Scaling Up Nutrition (SUN) Movement, 40 are African countries. In addition, African countries are implementing the Comprehensive Africa Agriculture Development Programme (CAADP), which seeks to mainstream nutrition into National Agricultural Investment Plans (NAIPs). The CAADP Results Framework also includes a nutrition focus to foster contribution to nutrition outcomes by the agriculture sector. More African countries within the SUN movement are aligning multisectoral nutrition actions in their national development plans.

Priority interventions in Africa should promote and protect exclusive breastfeeding, and ensure that more people consume healthy and nutritious diets, and have access to basic sanitation services and drinking water. Developments in the agriculture sector should promote sustainable food systems for better nutrition and health outcomes. Strengthening social protection mechanisms will be key, especially to mitigate fragility, while working towards gender equality and the empowerment of women and adolescent girls. While much is known about the most effective nutrition-specific interventions, evidence of the effectiveness of nutrition-sensitive interventions are still being developed. A rich body of recent reports and studies provide useful examples of nutrition sensitive practices. For example, the Synthesis of Evidence of Multi-sectoral Approaches for Improved Nutrition is a product of the Banking on Nutrition Partnership - an initiative of the African Development Bank undertaken with the support of Big Win Philanthropy and Aliko Dangote Foundation - and focuses on different sector interventions that show impact for nutrition. In addition, the 2015 Africa Trends and Outlooks Report of the African Union drew attention to steps needed to promote a nutrition revolution and support better diets.

Fragile governance and effects of conflict and climate-related stressors are major challenges that limit progress. Many countries in Africa experience natural disasters, conflict and humanitarian crises, including the influx of refugees from neighboring countries. Humanitarian crises contribute to the heightened risk of infectious diseases, food insecurity and inadequate access to essential nutrition and health services. Going forward, concerted efforts to fight these underlying drivers of malnutrition and ensuring the sustainability of actions will be essential to ensure good nutrition in Africa. Many fragile countries report that most funding is going to emergency and short-term interventions, while preventive nutrition interventions remain largely under-funded.

Tackling undernutrition needs to happen in tandem with halting the increase in overweight and obesity for children, adolescents and adults. Overweight and obesity are significant risk factors for nutrition-related non-communicable diseases (NCDs) such as diabetes and high blood pressure. A combination of financial resources and creating enabling policy and legislative environment are key to tackling undernutrition.

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4 Scaling Up Nutrition (SUN) 2018 Report

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KEY AREAS FOR IMPROVEMENT

National government should ensure coordination and leveraging of technical and financial resources to implement their plans. Together, the ALN and its partners will catalyze action at the highest levels of executive power to keep nutrition at the top of the political agenda on the continent. The ALN and its partners will continue to support African countries in making informed decisions on nutrition smart lending requests. The African Development Bank seeks to scale up the proportion of investments that are nutrition-smart including health, social protection, agriculture, WASH and education, through collaboration and coordination with governments, and other nutrition stakeholders including civil society, and development partners. This will support the efforts to scale up and diversify financing for nutrition by all relevant stakeholders but mainly those of African governments.

In order to address the challenges mentioned above, there is an increasing need to break down silos. Different communities - the humanitarian, the undernutrition, overweight and obesity, and NCD communities for example - must work together to ensure that different burdens are tackled efficiently and effectively while also focusing on long-term sustainability considerations.
CONCLUSION AND KEY RECOMMENDATIONS

Whereas the African continent is making commendable efforts to improve the nutrition status, the burden of malnutrition is ballooning with increasing rates of childhood stunting, overweight and wasting. This is a direct threat to economic gains being made in the continent and has the potential to compromise the development and productivity of Africa’s future generations.

Efforts to address the challenge of malnutrition need to focus on increasing investments on nutrition specific and sensitive interventions. Interventions to reduce malnutrition can be highly cost-effective by boosting per-capita GDP by up to 11%. It is also important to improve coordination at all levels through multisectoral plans for accountability. Effective action needs other sectors such as agriculture, water, sanitation, hygiene, social protection and education to maximize nutritional impact. Attention must also focus on strong monitoring and evaluation mechanisms and capacity building to deliver higher social and economic returns from nutrition interventions.

There are significant gaps in the availability of timely and good quality nutrition data at the country level, which impedes measurements, learning, and accountability for nutrition on the continent.

Priority interventions to address malnutrition should focus on evidence-based interventions such as increasing access to quality health care services, promoting consumption of healthy and nutritious diets, and ensuring access to basic sanitation services and drinking water. Large-scale food fortification programs can make a major contribution towards improving the quality of diets at the population level.

Recommendations to African Heads of State and Government

1. Increase budgetary allocations towards implementation of multisectoral nutrition plans, to address the conditions that produce malnutrition.

2. Support and enforce compliance with mandatory food fortification legislation especially for processed foods to prevent anaemia, vitamin A and iodine deficiency among others ailments.

3. Enact policies on social protection mechanisms to empower women and adolescent girls to embrace health-reinforcing behaviors during pregnancy and early childhood.

4. Spearhead country efforts to avail timely and quality data on nutrition to support measurements, accountability and learning in addressing malnutrition in Africa.
The Continental Nutrition Accountability Scorecard aims to provide concise and actionable information to the Heads of State and Government on the status of nutrition in Africa.

The Scorecard uses an intuitive traffic-light colour scheme to reflect the status of each indicator, with interpretation as described in the table below. In addition to the three traffic light colours, blank cell is used when data is not available.

<table>
<thead>
<tr>
<th>Color</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Green</td>
<td>Target achieved or performance is on track</td>
</tr>
<tr>
<td>Yellow</td>
<td>Progress made but more effort needed</td>
</tr>
<tr>
<td>Red</td>
<td>Performance not on track</td>
</tr>
<tr>
<td></td>
<td>Data not available</td>
</tr>
</tbody>
</table>

The Scorecard is designed in a manner that is responsive to changes in global and continental nutrition priorities as well as the changing data landscape.

Data for the Scorecard indicators originate from different national surveys in the countries. These data, under various international data arrangements, are sent from countries to a final data holding organization such as the WHO, UNICEF, World Bank, etc., where they are processed and released in different reports and updates.

Data used in compiling the current scorecard is derived from The Global Nutrition Report, World Bank, WHO, UNICEF, FAO, SUN Movement and the Food Fortification Initiative. The status of the selected indicators is based on thresholds set by the data owners in line with globally agreed targets.
<table>
<thead>
<tr>
<th>Name of indicator</th>
<th>Data Source</th>
<th>URL</th>
<th>Colour</th>
<th>Threshold</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of Children under 5 years who are stunted (moderate and severe)</td>
<td>UNICEF/WHO /World bank Joint child Malnutrition Estimates (JME)</td>
<td><a href="https://data.unicef.org/resources/dataset/main/utrition-data/">https://data.unicef.org/resources/dataset/main/utrition-data/</a></td>
<td>Green</td>
<td>≤10%</td>
</tr>
<tr>
<td>% of Children under 5 who are wasted (moderate and severe)</td>
<td>UNICEF/WHO/ World bank Joint Monitoring Programme (JMP)</td>
<td><a href="https://data.unicef.org/resources/dataset/main/utrition-data/">https://data.unicef.org/resources/dataset/main/utrition-data/</a></td>
<td>Yellow</td>
<td>11-29%</td>
</tr>
<tr>
<td>% of Children under 5 who are overweight (moderate and severe)</td>
<td>WHO Global Health Observatory</td>
<td><a href="http://apps.who.int/gho/data/view.main.SDG22REGy?lang=en">http://apps.who.int/gho/data/view.main.SDG22REGy?lang=en</a></td>
<td>Red</td>
<td>&gt;30%</td>
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<tr>
<td>% of women of reproductive age (15-49 years of age) with anaemia'</td>
<td>WHO Global Health Observatory</td>
<td><a href="http://apps.who.int/gho/data/node.main.1?lang=en">http://apps.who.int/gho/data/node.main.1?lang=en</a></td>
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<td>Exclusive breastfeeding (EBF) rate among infants 0-6 months of age</td>
<td>WHO (Nutrition Landscape Information System)</td>
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<td>Green</td>
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<td>% of children under 5 five with anaemia</td>
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<td>Yellow</td>
<td>19.9-39%</td>
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<td>% of children aged 6–59 months who received two age-appropriate doses of vitamin A in the past 12 months</td>
<td>UNICEF</td>
<td><a href="https://data.unicef.org/resources/resourcestype/datasets/">https://data.unicef.org/resources/resourcestype/datasets/</a></td>
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<td>----------------------------------------------------------</td>
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<td>Legislation on mandatory fortification for foods</td>
<td>Food Fortification Initiative (FFI)</td>
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<td>Not available (0)</td>
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<td>Red</td>
<td>Not available (0)</td>
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<td>996-3895</td>
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visit our website
www.afdb.org (ALN)

African Leaders for Nutrition Initiative

The African Leaders for Nutrition (ALN) initiative is a platform for high-level political engagement to advance nutrition in Africa. The initiative is part of eight flagship programs launched under the African Development Bank’s High 5 priorities, particularly “Feed Africa” and “Improve the quality of life for the people of Africa.”

The ALN initiative was endorsed by the Assembly of Heads of State and Governments of the African Union (AU) at the 30th Ordinary AU Summit, held in Addis Ababa, Ethiopia on 31 January 2018.

It is an African-led forum of “ALN Champions” comprising of current and former Heads of State, Finance Ministers and Eminent leaders with the power to catalyze and sustain high-level political leadership and commitment to end malnutrition in Africa.

With special focus on the first 1,000 days of a child’s life, the initiative aims to influence and generate innovative investments towards nutrition and food security that will build a foundation for productive human capital in Africa.

ALN Champions and Eminent Leaders

Dr. Akinwumi A. Adesina,
President, the African Development Bank
Chairperson of ALN

View all ALN Champions and Eminent Leaders

Our vision

“When Africa’s children are well-nourished and can grow, learn and earn their full potential, we will be able to unleash prosperity in the entire continent” - Dr. Akinwumi A. Adesina

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