**ACCELERATING HEALTH, SOCIAL AND ECONOMIC DEVELOPMENT OUTCOMES THROUGH IMPROVED NUTRITION**

The Gambia has demonstrated good political will for nutrition by establishing a high-level National Nutrition Council and recognizing nutrition as a national development priority. Yet stunting rates have remained stagnant and wasting rates are off course to meet the Global Nutrition Targets. To realize the full health, social and economic benefits of improved nutrition, The Gambia should:

- Implement and allocate adequate resources for the National Nutrition Policy (2010-2020)
- Develop a common results framework in line with the revised National Nutrition Policy
- Ensure workplace maternity protections are implemented and in line with global recommendations

**POLITICAL COMMITMENT FOR NUTRITION**

- **Maternity Leave**: 6 months paid
- **International Code of Marketing of Breast-milk Substitutes**: Full provisions in law
- **Multi-Sectoral Nutrition Plan**: Yes
- **Costed Nutrition Plan**: US$2 million (2010-2015)
- **Separate Nutrition Budget**: Yes (2014-2016)
- **SUN Country**: Since 2011

**PROGRESS AGAINST THE WORLD HEALTH ASSEMBLY’S GLOBAL NUTRITION TARGETS 2025**

<table>
<thead>
<tr>
<th>Target</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under-five mortality</td>
<td>Off course</td>
</tr>
<tr>
<td>Under-five wasting</td>
<td>Off course</td>
</tr>
<tr>
<td>Under-five stunting</td>
<td>Off course</td>
</tr>
<tr>
<td>Women of reproductive age anemia</td>
<td>Off course</td>
</tr>
<tr>
<td>Exclusive breastfeeding, 6-23 months</td>
<td>Off course</td>
</tr>
<tr>
<td>Low birthweight</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**IMPROVING NUTRITION STRENGTHENS NATIONS AS A LEADING CONTRIBUTOR TO**

- Reducing mortality rates
- Promoting optimal growth and development
- Decreasing the risk of infectious diseases

**CATEGORIZATION OF CODE LEGISLATION**

Full provisions in law: country has enacted legislation or adopted regulations, decrees or other legally binding measures encompassing all or nearly all provisions of the Code and subsequent WHA resolutions.

**PROGRESS AGAINST STUNTING**

<table>
<thead>
<tr>
<th>Year</th>
<th>2015</th>
<th>2011</th>
<th>2006</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls</td>
<td>36%</td>
<td>40%</td>
<td>43%</td>
<td>46%</td>
</tr>
<tr>
<td>Boys</td>
<td>31%</td>
<td>34%</td>
<td>37%</td>
<td>39%</td>
</tr>
</tbody>
</table>

**CHILD NUTRITION INDICATORS**

- 22% of children under-five are underweight
- 23% of children under-five are stunted
- 10% of children under-five are wasted
- 12% of children are born with low birthweight

**CHILD MORTALITY**

69 deaths per 1,000 live births while the global sustainable development target is to reduce under-five mortality to 25 per 1,000 live births (Sustainable Development Goal 3)

**NUTRITION PROFILE**

The Gambia

**INFANT AND YOUNG CHILD FEEDING PRACTICES**

- Early initiation of breastfeeding within the first hour: 52%
- Exclusive breastfeeding of infants under 6 months: 47%
- Breastfeeding at a year: 98%
- Minimum acceptable diet (6-23 months): 8%
- Minimum dietary diversity (6-23 months): 13%

**MATERNAL NUTRITION AND HEALTH**

- Women of reproductive age with anaemia: 48% (2013)
- Women of reproductive age, thinness: N/A
- Women of reproductive age, short stature: N/A

**NUTRITION PROFILE**

The Gambia