
Cambodia: Nutrition Profile

Malnutrition in childhood and pregnancy has many adverse consequences for child survival and long-term well-being. It also has far-reaching consequences for human capital, economic productivity, and national development overall. These consequences of malnutrition should be a significant concern for policy makers in Cambodia, where 10 percent of children under 5 suffer from acute malnutrition (wasting or low weight-for-height) and about 560,000 children under 5 (32 percent) suffer from chronic malnutrition (stunting or low height-for-age), according to the 2014 Cambodia Demographic and Health Survey (DHS) (NIS, DGH, and ICF 2015).

Background

After decades of civil conflict, Cambodia has experienced peace and increasing prosperity for over 20 years. Driven by growth in the garment and tourism industries, Cambodia achieved an average economic growth rate of 7.6 percent, from 1994–2015, the sixth highest in the world. The proportion of people living in poverty improved dramatically from 2007 to 2014, falling from 48 percent to 14 percent. Among the formerly poor, 4.5 million people still live on the margins, at risk of falling into poverty in the event of shock or crisis (World Bank 2017). Cambodia is a predominantly rural country with over 80 percent of the population living in the countryside. Although employment in agriculture has been decreasing steadily since 2009, agriculture remains the predominant economic activity, with 42 percent of working men and women engaged in the sector (NIS and MOP 2016). The agriculture sector faces challenges of inefficient systems, undiversified production, as well as flooding, drought, and poor natural resource management, which threaten the productivity and livelihoods of farmers (USAID Cambodia n.d.; NIS, MOP, NAFF 2015).

Cambodia's population of approximately 15.8 million people is relatively young, with 43 percent under 20 years and 35 percent younger than 15 (UNICEF 2017; NIS 2015). This younger generation is more likely to attend school than previous generations, with 89 percent of primary school-age children attending school. However, rates of primary school completion and secondary school enrollment remain low, with children expected to attend just 4.7 years of school. This low education rate risks the country's future economic development (NIS, DGH, ICF 2015; Sachs et al. 2017). Over 76 percent of women and 84 percent of men are literate, with higher literacy in urban areas (NIS, DGH, ICF 2015).

Currently, Cambodia ranks 114th out of 157 countries in terms of progress toward meeting the Sustainable Development Goals (Sachs et al. 2017) and ranks 143rd out of 188 on the 2016 Human Development Index (UNDP 2016). Amid the improved prosperity, however, are challenges of corruption (Cambodia ranked 156 out of 176 countries on Transparency International's 2016 Corruption Perception Index), human trafficking, and human rights (USAID Cambodia n.d.; Transparency International 2016).

As of the most recent census (2008), the population is growing at an annual rate of 1.54 percent (UNICEF 2017; NIS 2008). However, Cambodia has experienced decreasing fertility in recent years and the 2014 total fertility rate was 2.7 children per woman

, with higher fertility among women in rural areas, women with no education, and the poorest (NIS, DGH, and ICF 2015). According to the most recent DHS (2014), 9 percent of deaths among females 15–49 are related to pregnancy or childbearing. The maternal mortality ratio has decreased from 472 per 100,000 live births in 2005 to 170 in 2014. However, most of that improvement took place between 2005 and 2010, with no significant improvement since 2010. Although infant and under-5 mortality have improved steadily since 2000, one in 29 children dies before reaching 5 years of age (NIS, DGH, and ICF 2015).

Nutrition and Food Security Situation

Cambodia's economic gains were accompanied by a substantial decline in the food deficit and in the proportion of the population classified as undernourished by FAO, which fell from 29 percent in 1999–2001 to 15.3 percent in 2014–2016. Despite these improvements, an estimated 2.3 million Cambodians (14.6 percent) face severe food insecurity, households spend over 70 percent of their income on food, and dietary quality is poor (FAOSTAT; FAO 2014; FAO 2017).

In 2014, almost one-third (32 percent) of Cambodian children under 5 were stunted. Although this represents a significant improvement since 2010, when over 40 percent were stunted, it is still considered very high based on WHO/UNICEF prevalence thresholds (NIS 2015; WHO/UNICEF 2017). Stunting begins early (16 percent of children under 6 months are stunted) and increases with age, peaking at 40 percent among children 36–47 months. Children in rural areas are more likely to be stunted than children in urban areas. Stunting levels vary widely among provinces, ranging from 18 percent in Phnom Penh to 44 percent in Preah Vihear/Stung Treng. Of the 19 provinces, 11 have stunting levels over 30 percent, which is considered very high by WHO/UNICEF. Differences in stunting levels can also be seen according to maternal education and wealth levels—27 percent of children whose mothers have secondary education are stunted, while the prevalence rises to 39 percent of children whose mothers had no formal education. Similarly, 19 percent of children in the highest wealth quintile are stunted, while 42 percent of children in the lowest wealth quintile are stunted (NIS, DGH, ICF 2015).

With 10 percent of children suffering from wasting, acute malnutrition is also a concern, especially in the eight provinces where prevalence exceeds 10 percent, and in Otdar Meanchay, where over 15 percent of children under 5 are wasted (NIS, DGH, ICF 2015; WHO/UNICEF 2017). Wasting is more common in rural areas, among children whose mothers are thin (BMI < 18.5 kg/m²), and among children whose mothers have no education (NIS 2017).

Potentially contributing to elevated levels of stunting and wasting are inadequate infant and young child feeding practices. Although breastfeeding is nearly universal, only 65 percent of children 0–6 months are exclusively breastfed, only 51 percent of children are still exclusively breastfed at 4–5 months, and just 32 percent of children 6–23 months receive a minimum acceptable diet (NIS 2015). Several additional factors contribute to poor nutrition outcomes in Cambodia. Maternal undernutrition (14 percent), overweight (18 percent), and anemia (45 percent) contribute to an intergenerational cycle of malnutrition and poverty. In addition, childbearing begins early in Cambodia. By 19 years, 31 percent of adolescent girls had begun childbearing in 2014, which is an increase from 26 percent in 2010 (NIS and ICF 2015). The high prevalence of adolescent underweight (28 percent) combined with the persistently high adolescent pregnancy rate is a disturbing trend. This has serious consequences because adolescent girls are more likely to be malnourished than older mothers, and have a low birth weight baby who is more likely to become malnourished, and be at increased risk of illness and death, than those born to older mothers. The risk of stunting is 23 percent higher among first-born children of mothers under 18 years in East Asia, and as such, early motherhood is a key driver of malnutrition (Fink et al. 2014).

Cambodia Nutrition Data (DHS 2010 and 2014)		
Population 2016 (UNICEF 2017)	15.8 million	
Population under 5 years of age (0–59 months) 2016 (UNICEF 2017)	1.76 million	
	DHS 2010	DHS 2014
Prevalence of stunting among children under 5 years (0–59 months)	40%	32%
Prevalence of underweight among children under 5 years (0–59 months)	28%	24%
Prevalence of wasting among children under 5 years (0–59 months)	11%	10%
Prevalence of low birth weight (less than 2.5 kg) (of children whose birth weights are known)	8%	8%
Prevalence of anemia among children 6–59 months	55%	56%
Prevalence of anemia among women of reproductive age (15–49 years)	44%	45%

Prevalence of thinness among women of reproductive age (15–49 years)	19%	14%
Prevalence of thinness among adolescent girls (15–19 years)	28%	28%
Prevalence of children 0–5 months exclusively breastfed	74%	65%
Prevalence of children 4–5 months exclusively breastfed	60%	51%
Prevalence of early initiation of breastfeeding (i.e., put to the breast within one hour of birth)	66%	63%
Prevalence of children who receive a pre-lacteal feed	19%	28%
Prevalence of breastfed children 6–23 months receiving minimum acceptable diet	28%	32%
Prevalence of overweight/obesity among children under 5 years (0–59 months)	2%	2%
Prevalence of overweight/obesity among women of reproductive age (15–49 years)	11%	18%
Coverage of iron for pregnant women (for at least 90 days)	57%	76%
Coverage of vitamin A supplements for children (6–59 months in the last 6 months)	71%	70%
Percentage of children 6–59 months living in households with iodized salt	84%	69%

Global and Regional Commitment to Nutrition and Agriculture

Cambodia has made the following global and regional commitments to nutrition and agriculture:

Year of Commitment	Name	Description
2014	Scaling Up Nutrition (SUN) Movement	In 2014, Cambodia joined Scaling Up Nutrition (SUN), a global movement that unites national leaders, civil society, bilateral and multilateral organizations, donors, businesses, and researchers in a collective effort to improve nutrition. Cambodia’s 2017–2018 SUN priorities include engaging the private sector to start a SUN Business Network; increasing nutrition financing commitments from the government; ensuring longer-term programming from development partners; and enforcing regulations for food fortification (SUN 2017).

National Nutrition Policies/Legislation, Strategies, and Initiatives

Cambodia’s commitment to improving nutrition is outlined in the following documents, which are aligned with the government’s National Strategic Development Plan and Rectangular Strategy for Growth, Employment, Equity and Efficiency III:

- National Strategy for Food Security and Nutrition (2014–2018)
- National Fast Track Road Map for Improving Nutrition (2014–2020)
- National Social Protection Strategy for the Poor and Vulnerable (2011)
- National Social Protection Policy Framework (2016–2025)
- Policy and Strategic Framework on Childhood Development and Protection in the Agriculture Sector (2016–2020)

- National Policy and Guidelines for Micronutrient Supplementation to Prevent and Control Deficiencies in Cambodia (2012)
- National Policy on Infant and Young Child Feeding (2008)
- School Health Policy (2006)
- Clinical Practice Guideline: Inpatient Management of Severe Acute Malnutrition (2012)
- Development of Recommended Dietary Allowance and Food-Based Dietary Guidelines for School-Age Children in Cambodia (2017)
- National Interim Guidelines for the Management of Acute Malnutrition (2011)
- Sub-decree on Marketing of Products for Infant and Young Child Feeding (2005)

The National Strategy for Food Security and Nutrition 2014–2018 (NSFSN) is a multisectoral strategy that serves as a platform linking agriculture, forestry and fisheries, water resources management, health, water and sanitation, education, and social protection to improve food security and nutrition. It was developed by the Council for Agriculture and Rural Development (CARD) and line ministries. The strategy seeks to substantially improve Cambodians’ access to safe and nutritious foods and ability to utilize those foods optimally as a part of achieving healthy, productive lives. Its three objectives focus on increasing availability and access to food through both agricultural production and non-farm income generation; improving food utilization through scaled-up nutrition education and services, improved WASH, expanded food fortification, increased availability of nutritious food, and linking with social protection; and increased stability of the food supply through scaled-up social protection and improved resilience (CARD n.d.). In 2017, CARD began a mid-term and strategic review of the NSFSN to review progress and develop plans to complete the current NSFSN, design a new NSFSN 2019–2023, and develop a road map to achieve Sustainable Development Goal 2, which focuses on food security and nutrition (FAO 2017).

USAID Programs: Accelerating Progress in Nutrition

As of January 2018, the following USAID programs with a focus on nutrition were active in Cambodia.

Selected Projects and Programs Incorporating Nutrition in Cambodia		
Name	Dates	Description
NOURISH	2014–2019	NOURISH is an integrated health/nutrition, water, sanitation and hygiene (WASH), and agriculture project that aims to improve the nutritional status and well-being of women and children in Battambang, Pursat, and Siem Riep provinces. To accelerate reductions in stunting, the project addresses Cambodia-specific causes of chronic undernutrition: poverty, insufficient access to quality food and nutrition services, unsanitary environments, and growth-inhibiting social norms and practices. NOURISH’s four over-arching strategies include: <ul style="list-style-type: none"> • Improving community delivery platforms to support improved nutrition • Creating demand for health, WASH, and agriculture practices, services, and products • Using the private sector to expand supply of agriculture and WASH products • Building capacity of government and civil society (Save the Children n.d.)
Quality Health Services Project	2014–2019	Quality Health Services uses a sustainable health-systems strengthening approach to improve the reproductive, maternal, newborn, and child health and nutrition services in Banteay Meanchey, Battambang, Kampong Cham, Tbong Khmum, Kampong Speu, Pailin, Prey Vent, Pursat, and Siem Reap provinces.

Rice Field Fisheries II Project	2016–2021	Rice field fisheries are a vital source of income and nutrition for Cambodia’s poor farmers. The Rice Field Fisheries II Project works to improve management of community fish refuges to increase productivity and maintain biodiversity of the wild fish in the fisheries. The project is replicating and scaling up best practices, including efficient water use and integration with food crops, and promoting the nutritional benefits of consuming fish (World Fish n.d.).
Feed the Future Cambodia Harvest II	2017–2022	Harvest II aims to accelerate the growth of Cambodia’s commercial horticulture in the provinces of Pursat, Battambang, Siem Reap, and Kampong Thom. It seeks to improve the connection between horticulture product buyers and suppliers in Cambodia by: helping horticulture farmers improve how they grow and market their produce, connecting farmers and suppliers with buyers and the markets to which they sell their products, and improving market governance and helping to create an environment that will enable the horticulture market to thrive. These activities will help buyers and sellers compete more effectively in domestic and international markets, expand sales, create employment, and stimulate investment (USAID 2017).
Feed the Future Asia Innovative Farmers	2015–2020	The Feed the Future Asia Innovative Farmers project introduces new agricultural technologies from the Asia region to smallholder farmers in focus countries, including Cambodia.
Feed the Future Innovation Labs	2009–2020	Feed the Future Innovation Labs (ILs) is a network of US colleges and universities partnered with developing-country research and educational institutions that conduct research on agriculture and food security challenges. The 24 ILs help train the next generation of scientists. Six ILs are currently engaged in Cambodia, including: Sustainable Intensification, Horticulture, Integrated Pest Management, AquaFish, Nutrition, and Livestock Systems (KSU n.d.; FTF n.d.a).
Center of Excellence on Sustainable Agricultural Intensification and Nutrition (CE SAIN)	2016–2021	CE SAIN, a partnership between USAID and the Royal University of Agriculture, supports agricultural research and education, fosters private sector innovation, and builds the capacity of the public sector. CE SAIN has established five technology parks in Cambodia to demonstrate promising practices for smallholder farmers, test innovations, and organize knowledge-sharing events. CE SAIN also coordinates Feed the Future Innovation Lab work in Cambodia (US Embassy Cambodia 2016; KSU n.d.).
Borlaug Higher Education for Agricultural Research and Development (BHEARD)	2012–2018	BHEARD supports training of masters- and doctoral-level agricultural researchers in developing countries and links scientific communities from Feed the Future countries with the United States. Through these efforts, BHEARD seeks to increase the number of agricultural scientists and strengthen scientific institutions in developing countries (MSU/BHEARD n.d.).

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