Improving Maternal, Newborn and Child Nutrition in Northern Nigeria - Management of severe acute malnutrition - Preschool-age children (Pre-SAC)|SAM child|Stunted child
Programme: Improving Maternal, Newborn and Child Nutrition in Northern Nigeria

Programme Data

Programme Description
One million children under five die every year in Nigeria, 35% of them due to causes attributed to malnutrition. This makes Nigeria one of the six countries that accounts for half of all child deaths from malnutrition worldwide. In the north, half of all children under five are stunted, and one in five suffers from acute malnutrition. This has profound implications for health and for human development, and presents a major obstacle to attainment of Millennium Development Goals in the country and globally. To date, the Nigerian government has not provided the necessary leadership or response to the crisis. Coupled with this, is a weak and fragmented health system which is unable to provide the most basic, cost-effective services for the prevention and management of common health problems. Primary health care level remains the weakest link in effective health delivery.

The programme will deliver a number of evidence-based, highly cost-effective direct interventions for the prevention and treatment of malnutrition, including community-based management of acute malnutrition (CMAM), vitamin A supplementation and deworming, and promotion of improved infant and young child feeding (IYCF) practices. The scaled up delivery will be used to raise the political profile of undernutrition in Nigeria and leverage government to coordinate and fund nutrition programmes. Independent operational research will examine the wider determinants and structural barriers of undernutrition. Impact evaluation will measure progress, quality and advise on critical elements required for a sustainable strategy.

A UNICEF and an INGO consortium of Save the Children (SC UK) and Action Against Hunger / Action Against Hunger (AAH/ACF) will deliver the interventions. Operational research and impact evaluation will be conducted by independent nutrition researchers and evaluation experts.

Results: This programme will reduce the incidence and prevalence of undernutrition in children under five across selected Northern States with high rates of undernutrition: Kebbi, Katsina, Jigawa, Zamfara, and Yobe. By 2017, DFID will improve the nutritional status of 6.2 million children under five in northern Nigeria. At least 140,000 children with severe acute malnutrition will receive treatment. The programme will contribute to National targets of reducing underweight and stunting by 20% (absolute reduction) and exclusive breast feeding rates will increase by 15% in the selected five northern states.

It is anticipated that the programme advocacy component will have some impact on improved government commitment and health system strengthening. Delivering services through government facilities, primary health care workers and community-led interventions will embed a culture of government ownership. Additionally, the design places high importance on support for government policies and strategic planning.

Irrespective of long term, systemic changes there is a strong economic and efficacy argument for DFID investment in nutrition. The direct nutrition interventions delivered through the health sector are evidence-based, cost effective and present a key opportunity for achievement of MDGs (1,4,5).

Program type
Community/sub-national

Cost
Project budget: £50 million
Budget spent to Date: £11,090,293

References
http://projects.dfid.gov.uk/project.aspx?Project=201874

Implementing organisations
- UN agencies
Operational research and impact evaluation will be conducted by independent nutrition researchers and evaluation experts.

**Funding sources**

- Bilateral and donor agencies and lenders
  - Department of International Development (DFID)

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### Action data

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<tr>
<th>Start date</th>
<th>January 2011</th>
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<tr>
<td>End date</td>
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<tr>
<td>Country(ies)</td>
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<tr>
<td>Status</td>
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<td>Rural, Peri-urban</td>
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<td>Place</td>
<td>Selected Northern States with high rates of undernutrition: Kebbi, Katsina, Jigawa, Zamfara, and Yobe.</td>
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<td>Topic</td>
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<td>Target group</td>
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<td>Age group</td>
<td>Children under 5 years</td>
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<tr>
<td>Delivery</td>
<td>Primary health care center</td>
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</table>

**Implementation details:**

- Delivery of effective treatment for severe acute malnutrition through local health facilities
- Advocacy, capacity building and programme delivery will be used to gain financial and political commitment from government to lead the response to undernutrition. This programme will create linkages across sector programmes in health, social development, income generation and growth. These incentives and linkages will provide the platform for state governments to devote more resources to nutrition programmes in the future.

**Outcome indicator(s):**

- Child death
- Educational attainment
- Underweight
- Stunting
- Wasting

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**Typical problems**

**Solutions**

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**Other actions from same programme**

- Improving Maternal, Newborn and Child Nutrition in Northern Nigeria - Breastfeeding promotion and/or counselling - Infants and young children|Lactating women (LW)
- Improving Maternal, Newborn and Child Nutrition in Northern Nigeria - Deworming - Preschool-age children (Pre-SAC)

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**Links to policies in GINA**

- National Policy on Food and Nutrition in Nigeria
- National Plan of Action on Food and Nutrition in Nigeria
Supplementary feeding in community settings for promoting child growth
Food supplementation in children with moderate acute malnutrition