



# SCALING UP NUTRITION INTERVENTIONS FOR CHILDREN LEFT BEHIND IN NIGERIA



Save the Children

POLICY BRIEF

# Scaling up nutrition interventions for children left behind in Nigeria

Nutritional status is a major determinant of health and well-being of children. When children have a healthy, adequate diet, and are well cared for, they not only have a higher likelihood of survival but also greater chances to reach their full growth potential and future prospects. Poor nutritional habits are amongst the key determinants of chronic illnesses (Popkin et al, 2012).

Children's nutritional outcomes are affected by a range of factors, at household, community and country levels. Where they live, their family's income, and their gender play a role. Their mother's level of education and the availability of information and access to locally-produced food also influence how food is allocated within a family.

The Government of Nigeria has put a number of programmes and policies in place to address the issue of child malnutrition. These include: the National Policy on Food and Nutrition (2016), the Food Security Bill (2015), the National Plan of

Action on Food and Nutrition in Nigeria (2004), the National Strategic Plan of Action (the health sector response), the Micronutrient Control Programme, the Baby-friendly Hospital Initiative, and the school feeding programme. The government has also enacted laws requiring the fortification of mass consumed foods with vitamin A, iron and salt iodization.

However, the implementation of these policies and programmes and the enforcement of the legislation remain a challenge. There is a persistently high level of child malnutrition in the country and stark disparities in nutritional status among children in different socio-economic groups and states. In this policy brief, we summarise the nature and extent of key inequalities in nutritional status of children in Nigeria and suggest a number of concrete policy recommendations to scale up interventions which can help children who are not being fully reached by current efforts.



PHOTO: SUSSAN AKILA/SAVE THE CHILDREN

A mother with her baby waiting to transport herself home after receiving a food basket from Save the Children.

## THE BURDEN OF MALNUTRITION IN NIGERIA REMAINS WORRYINGLY HIGH

Underweight (low weight for age), stunting (low height for age) and wasting (low weight for height) are all manifestations of undernutrition. All expose the child to health risks; in their severe forms, they constitute a threat to the child's survival.

In Nigeria, prevalence of stunting changed marginally between 1990 and 2013 from 43% to 37%. During the same period, the burden of acute malnutrition increased – it was estimated at 9% in 1990 and is currently estimated at 18%. In the North West region, the prevalence of acute malnutrition remains as high as 27%. Finally, the level of severe acute malnutrition grew from 2% in 1990 to 9% in 2013 (NPC and ICF International, 2014). Severe acute malnutrition is a critical public health problem and a continuing challenge to clinicians (Rytter et al, 2015). In Nigeria, there are approximately 1.7 million children suffering from severe acute malnutrition. This number constitutes one tenth of all severely

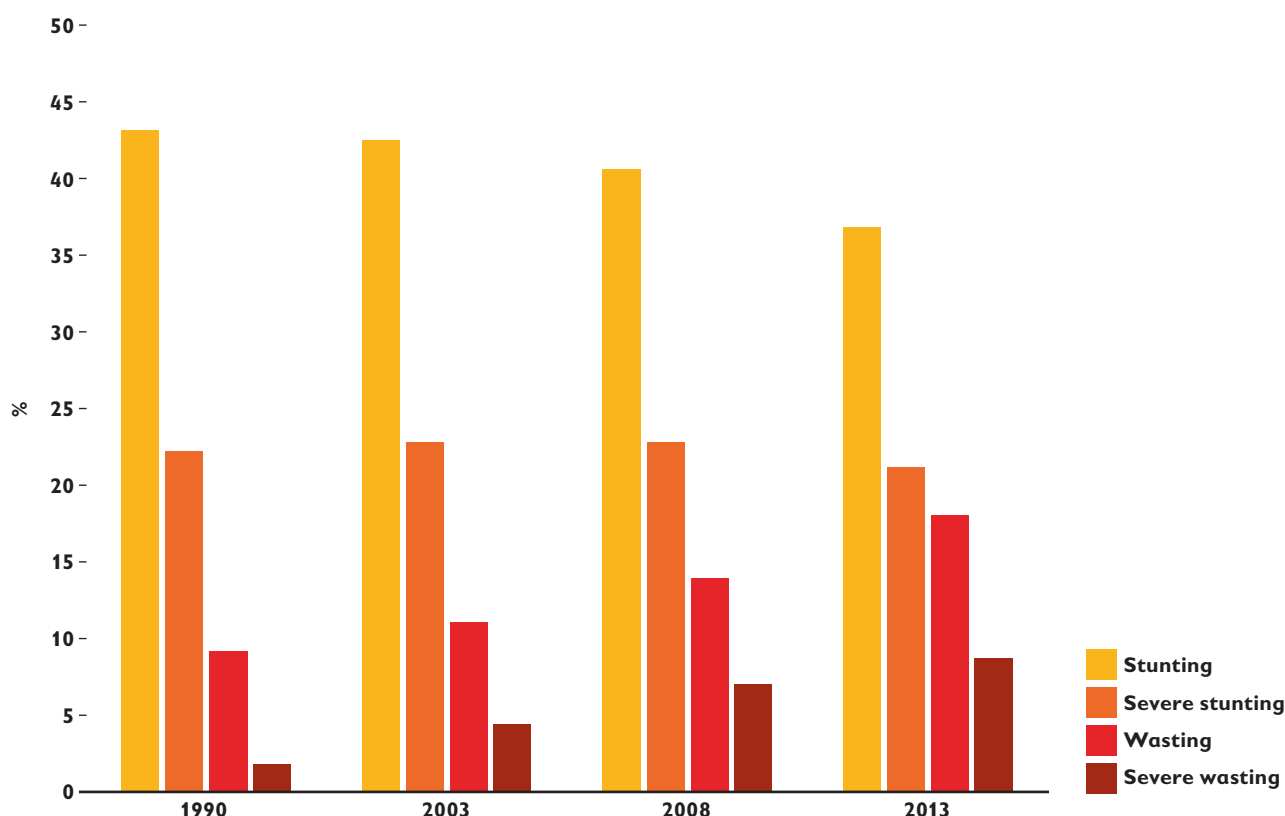
acutely malnourished children in the world (UNICEF, 2015). Figure 1 illustrates the trends in child malnutrition in the country between 1990 and 2013.

According to the UN Office for the Coordination of Humanitarian Affairs (2014), Nigeria has the second highest acute malnutrition burden in the world, with an estimated 3.78 million children suffering from wasting.

## CHILDREN FROM THE POOREST HOUSEHOLDS ARE MOST LIKELY TO SUFFER FROM MALNUTRITION

Evidence suggests that poverty is a key determinant of child undernutrition (Ubesie & Ibeziakor, 2012; Van de Poel et al, 2007). The findings of a study of factors affecting Nigerian children's nutritional status suggest that households' economic status is significantly associated with their nutritional status. The very poor and the poor constitute 74% of the population and cannot afford a nutritious diet (NPC and ICF International, 2014). They often survive on

FIGURE 1: TRENDS IN CHILD MALNUTRITION IN NIGERIA BETWEEN 1990 AND 2013



Data source: NPC and ICF International, 2014



PHOTO: DAN STEWART/SAVE THE CHILDREN

Children learn basic literacy, numeracy and geography at a centre supported by Save the Children and Unicef, in a camp for displaced people in Maiduguri.

a minimum calorie threshold and chronic and acute malnutrition are therefore common among children.

In Nigeria, children from the poorest households are almost 3 times more likely to be stunted and almost 4.3 times more likely to be severely stunted compared to children from the wealthiest households. Analysing trends for the prevalence of malnutrition amongst the poorest groups reveals that the prevalence of stunting for the poorest children increased from 48.8% in 2003 to 53.8% in 2013. The poorest children are also 3.7 times more likely to be wasted and 3.2 times more likely to be severely wasted compared to children living in richest households (NPC and ICF International, 2014).

The prevalence of overweight, albeit relatively low in Nigeria, is a growing public health problem. In Nigeria the prevalence of overweight among children from the poorest households is approximately 4.9% compared to 3.2% for children from the richest households (NPC and ICF International, 2014).

Research shows that households' economic status also has a statistically significant effect on children's nutritional status in different agro-ecological zones, in particular in the humid forest zone and the Sudano-Sahelian savannah. Because the notion of socio-economic status cannot be limited to household income, it is also important to consider other factors, including those related to women's empowerment, such as mothers' working status,

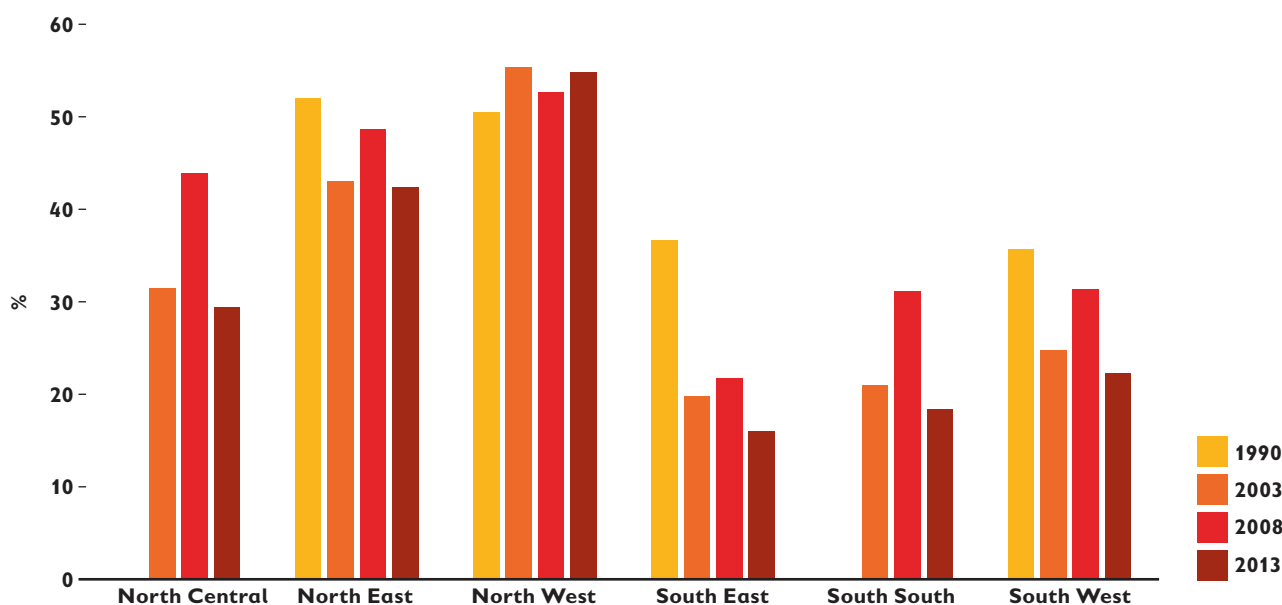
control over resources and educational attainment. In rural areas, children of working women are significantly less likely to be undernourished than children living in households where mothers do not work (Ajieroh, 2009).

## MALNOURISHED CHILDREN ARE FOUND MAINLY IN THE NORTH WEST AND NORTH EAST

Analysing the regional disparities in child malnutrition reveals important spatial inequalities. The prevalence of underweight, stunting and wasting is generally higher in the northern than the southern states. The highest proportions of malnourished children were found mainly in Bauchi, Jigawa, Kaduna, Katsina, Kebbi, Sokoto and Zamfara states. In all these states the prevalence of stunting exceeds 50%. In other states, such as Gombe, Taraba, Yobe and Kano, the prevalence of stunting exceeds 40%.

The prevalence of moderate wasting among children under five exhibits similar patterns. All states in the North West (except Jigawa and Zamfara) show higher than national average prevalence of acute malnutrition (wasting). In addition, the North-Eastern states of Bauchi, Borno and Yobe have a disproportionately high burden of wasting, with Kano state showing more than twice the national average (39.7%). Severe acute malnutrition

FIGURE 2: REGIONAL DISPARITIES IN CHILD STUNTING IN NIGERIA



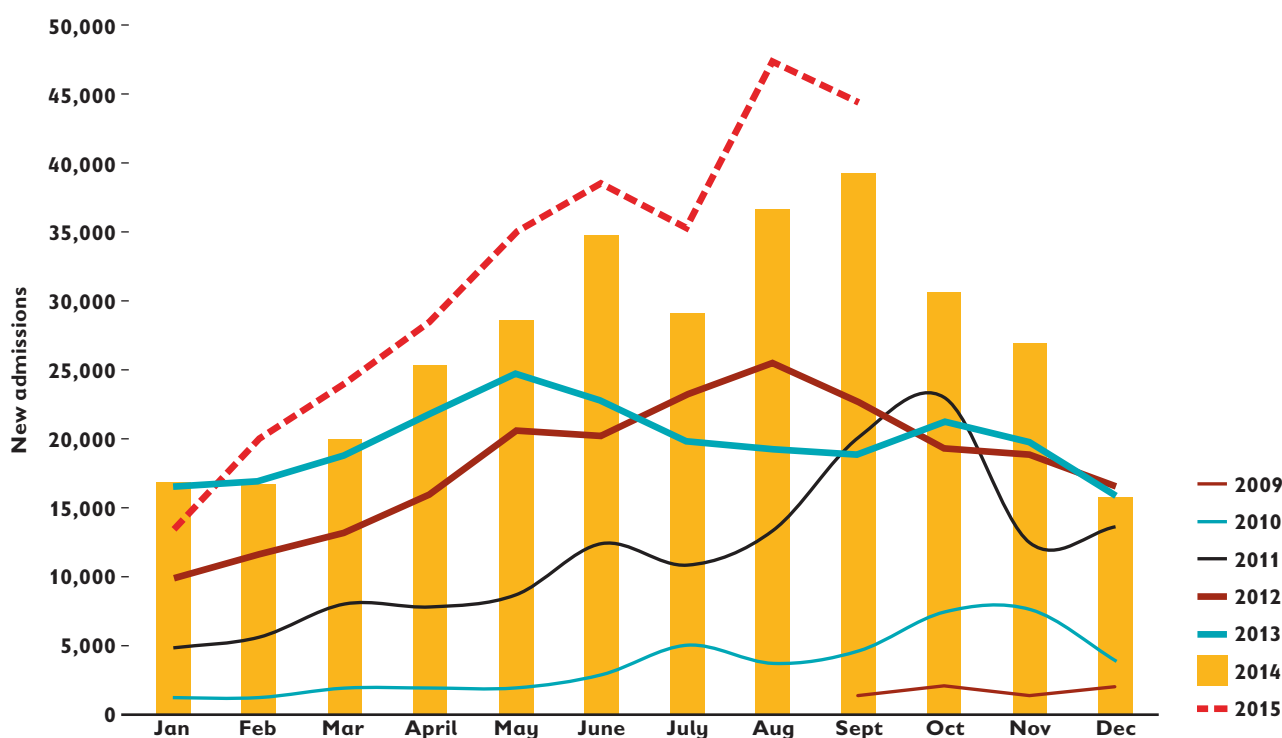
Data source: NPC and ICF International, 2014

is highest in Kaduna (27.6) and Kano (25.1%) and lowest in Bayelsa (1.3%). Recent trends in levels of child malnutrition also show uneven progress among the regions (Figure 2).

Analysis of seasonal effects in the Northern states (Figure 3) reveals that June, August and September

are the months where most children are admitted into community-based management of acute malnutrition (CMAM) programmes, and that the numbers of admitted children have been consistently on the rise since 2009.

FIGURE 3: TRENDS IN NEW ADMISSIONS TO THE CMAM PROGRAMME, NORTHERN STATES



Data source: National Health and Nutrition Survey (2015), courtesy of UNICEF

## CHILDREN IN RURAL HOUSEHOLDS ARE MORE LIKELY TO BE STUNTED THAN CHILDREN IN URBAN HOUSEHOLDS

In addition to socio-economic inequalities and regional inequalities, there exist also important rural–urban differences. Children from rural households are more likely to be disadvantaged because of factors including poor infrastructure in rural areas and lack of access to healthcare facilities. In addition, rural households often lack awareness of how to use locally available nutritious foods. In Nigeria, the prevalence of malnutrition among rural children is considerably higher than among urban children. For example, the rate of child stunting in rural households was estimated at 43.2%, compared to 26% for children living in urban areas.

It should also be highlighted that while there are considerable differences between rural and urban areas, there exist important intra-urban inequalities. As a consequence of the rapid pace of urbanisation in Nigeria, the proportion of the population which lives in urban areas in the country increased from 29.7% in 1990 to 47.8% in 2015 and is projected to reach 67.1% in 2050 (United Nations, 2014). The increase in slum areas and slum populations is a result of this rapid and often poorly managed urbanisation. In Nigeria, the urban poor are the

fastest growing segment of the urban population, resulting in growing number of households being unable to access increasingly more expensive food (Ndukwu et al, 2013).

## GENDER-RELATED INEQUALITIES AND GENDER IMPACTS ARE COMPLEX AND REQUIRE SPECIAL ATTENTION

Gender-related inequalities are multidimensional and require special attention. While overall more boys than girls are stunted (38.6% vs. 35.0%) and wasted (18.9% vs. 17.2%), more girls are overweight. These gender differentials in child undernutrition have previously been explained by the epidemiological studies which suggest that morbidity and mortality tend to be consistently higher amongst male infants and young children (Wamani et al, 2007). The gender dynamics and gender-related associations are however complex and often context specific.

While Nigeria has a legal policy framework to prevent discrimination, the implementation of specific laws and regulations remains a challenge. In general, women tend to be less educated than men and have less power over resources and in terms of decision making. Female-headed households have been repeatedly found to be less food secure compared to male-headed households (Lawson, 2014).



PHOTO: OWOJA ODIHI/SAVE THE CHILDREN

**Jamila, three, was severely malnourished but made a dramatic recovery when she was treated at a government hospital which Save the Children supports.**

Women who suffer from stunting are more likely to give birth to premature or low birthweight infants, conditions which are associated with higher risk of death, poor nutritional status and unfulfilled potential in later life (ORIE, 2014). The median age of first birth varies by socio-economic status in all regions in the country. In the Northern regions, the first birth often occurs during adolescence, whereas in the South the first birth is usually in the early twenties. One in six teenagers in Nigeria is already a mother, and 34% of adolescents from the poorest households are mothers. There has been a slight improvement; however teenage pregnancy is a common feature in the North. The proportion of women aged 15–19 who have had a live birth is highest in Jigawa state (43.5%), followed by Katsina (41.2%), Bauchi (37.8%), Zamfara (31.4%) and Gombe (28.7%) (NPC and ICF International, 2014). Areas that have a high rate of teenage pregnancy also have a high rate of maternal morbidity and mortality, worsened by underlying nutritional deficiencies.

## RECOMMENDATIONS FOR ACTION

Sustainable approaches to addressing both acute and chronic malnutrition encompass strengthening livelihood systems for poor people and supporting policies that improve childcare practices and increase access to nutritious food. More specifically:

- ✓ The Ministry of Budget and National Planning should lead on the development of a multisectoral results framework, setting out defined performance indicators, baseline data and targets for various ministries, departments and agencies. This will serve as a platform for tracking achievements and results.
- ✓ The Ministry of Budget and National Planning and the state-level Ministries of Economic Planning should ensure that states adopt tailored food and nutrition policy. These policies and related strategies would clearly define the approach and propose interventions and activities that would contribute to scaling up nutrition which will have an impact on the lives of children left behind.
- ✓ The State Ministry of Economic Planning should ensure that local government committees on food and nutrition are established and meeting regularly.
- ✓ The Office of the Vice President should ensure that the National Nutrition Council meets regularly, in line with the approved national food and nutrition policy. Annually, it should develop a national nutrition report showing progress and challenges at different levels, which would inform programming by development partners and government ministries, departments and agencies in the following year.
- ✓ The Government should increase funding for nutrition services, including the establishment of nutrition corners in the primary healthcare centres.
- ✓ A multi-pronged approach is required in dealing with the persistent challenge of malnutrition. Efforts to increase food production, availability and accessibility, as well as investments in nutrition education, should be intensified.
- ✓ Civil society organizations should regularly conduct budget advocacy for increased accountability.
- ✓ Civil society and media should work jointly to ensure public accountability on funds disbursement for nutrition interventions as well as increased sensitization of healthy eating habits.
- ✓ Government budgets should prioritise agricultural and rural development in order to enhance food production and distribution.
- ✓ Civil society should advocate for development and implementation of policies that increase access to food and income for the most vulnerable households. This involves passing and signing into law the Food Security Bill which is currently at the National Assembly.
- ✓ To improve nutritional status of the most vulnerable children, government should prioritize investments in girls' education, social protection and women's empowerment. Nutrition and food security plans and programmes should be based on gender-sensitive approaches.
- ✓ The leadership of the National Assembly should establish a standing committee that would focus on issues relating to children. This committee should oversee activities of different ministries, departments and agencies, as it relates to children especially the under fives.

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Cover photo: Children learn basic literacy, numeracy and geography at a centre supported by Save the Children and Unicef, in a camp for displaced people in Maiduguri. (Photo: Dan Stewart/Save the Children)

**Every child has the right to a future. Save the Children works around the world to give children a healthy start in life, and the chance to learn and be safe. We do whatever it takes to get children the things they need – every day and in times of crisis.**

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