

MOBILISING RESOURCES AND PARTNERSHIPS FOR SUSTAINABLE NUTRITION INTERVENTIONS

Keynote Address

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OUTLINE

Nutritional And Nutrition-related Issues or Challenges in Nigeria

Nutrition-specific (Nspf) and Nutrition-sensitive (Nsnt) Interventions

Possible stakeholders/ actors/agents of change

Resources Needed

Roles of Partnerships

Management and Monitoring

Mechanisms for sustainability and Resource leakages/wastages

Nutritional Challenges/Issues

Malnutrition

- Undernutrition
- Micronutrient Deficiency
- Overnutrition

Spread/Prevalence

Undernutrition

- Stunting in children (37%) NDHS 2018
- Underweight (23%) NDHS 2018

Micronutrient Deficiency

- Vitamin A Deficiency
- Iron Deficiency
- Folate Deficiency etc.

Overnutrition: Obesity

Severity

SEVERE!

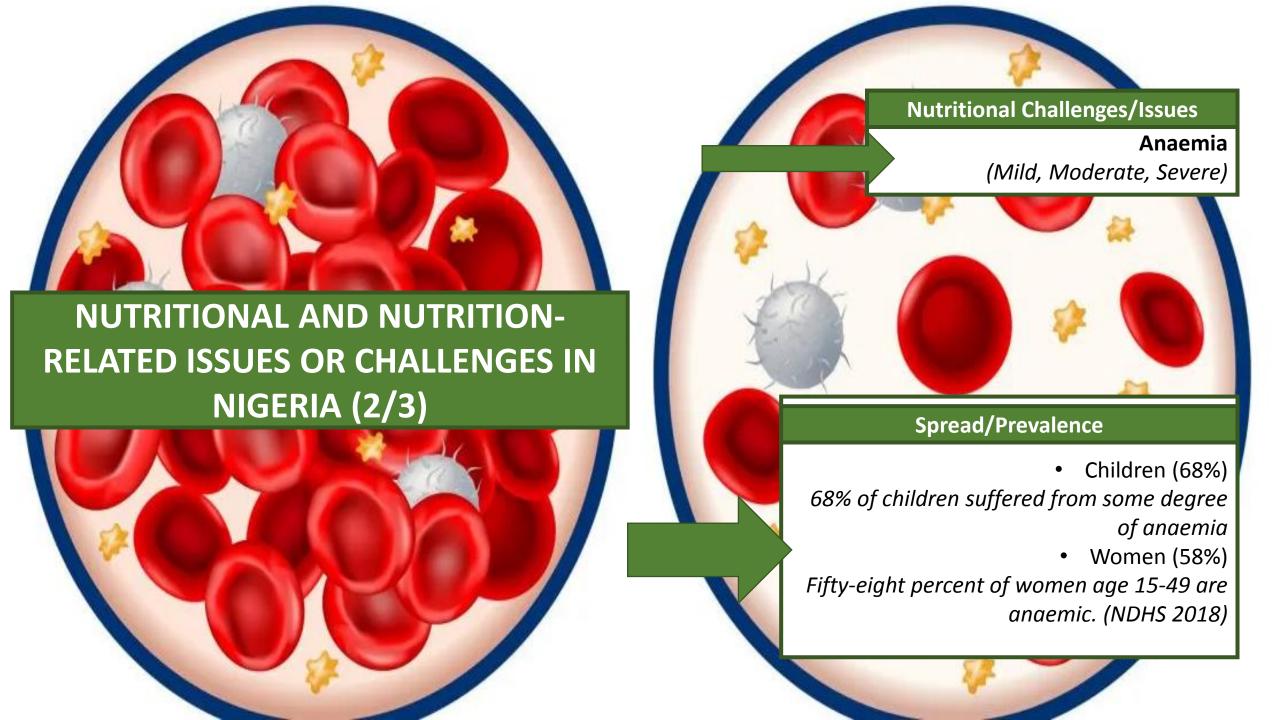
Nigeria has a stunting rate of 37%, the second highest in the world.

NUTRITIONAL AND NUTRITION-RELATED ISSUES OR CHALLENGES IN NIGERIA (1/3)

More challenges

Only 29% of children are exclusively breastfed; Non-exclusive breastfeeding (71%?); Minimum Acceptable Diet (MAD) - <15% are fed in accordance with the criteria for a minimum acceptable diet (NDHS 2018).

About 40 percent of the Nigerian population is identified as food insecure (2018/2019 HFCES)



Nutritional Challenges/Issues Diet-related Non communicable Diseases (NCDs) TO STATE OF THE PARTY OF THE PA Spread/Prevalence Diabetes Hypertension & Heart disease Cancer - According to Global Cancer Observatory 2018 (Globocan), Nigeria recorded 115 950 cases of cancer **NUTRITIONAL AND NUTRITION-**Severity **RELATED ISSUES OR CHALLENGES IN Diabetes in Nigeria (2021)** NIGERIA (3/3) *3.7% prevalence of diabetes in adults; *3,623,500 total cases of diabetes in adults **Hypertension** *31.2% prevalence of hypertension in Nigeria (men 29.5%, women 31.1%). (results from a 2018 systematic

review & meta-analysis of NCDs and its risk factors)

*29% of all deaths in Nigeria were due to NCDs and

(2018 WHO NCD profile)

cardiovascular diseases accounted for 11% of the deaths.

Nutrition-specific (Nspf) Interventions

Nutrition-specific interventions- Programmes that address the direct or immediate determinants/causes of malnutrition such as adequate food and nutrient intake, feeding (IYCF), caregiving and parenting practices and low burden of infectious diseases.

Examples include:

- Adolescent health and preconception nutrition
- Maternal dietary supplementation
- Micronutrient supplementation or fortification
- (Vitamin A supplementation, zinc supplementation,
- Iron-folate supplementation, salt iodization etc.)
- Optimum breastfeeding and complementary feeding
- Dietary supplementation for children
- Deworming Feeding Behaviours (Responsive Feeding) and stimulation
- Treatment of severe acute malnutrition
- Dietary Diversification
- Disease Prevention and Management.
- Nutrition interventions in emergencies. Etc.





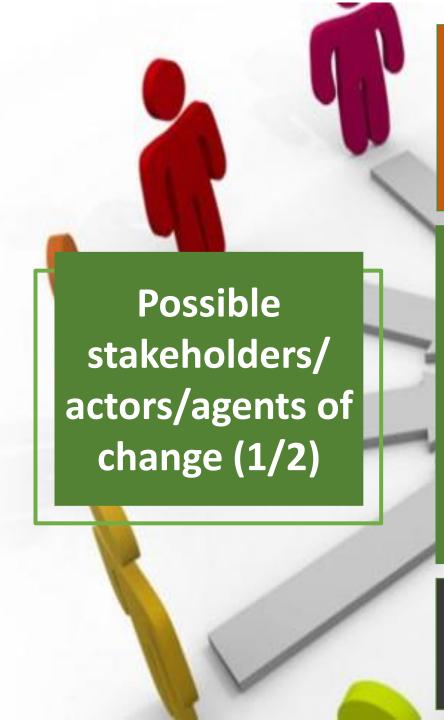
Nutrition-sensitive (Nsnt) Interventions

Nutrition-sensitive interventions- Programmes that address the underlying determinants/causes of malnutrition and fix long-term problems such as adequate food and nutrient intake, feeding, (IYCF), caregiving and parenting practices and

Nsnt programmes can serve as delivery platforms for nutrition-specific interventions, potentially increasing their scale, coverage and effectiveness

Examples include:

- Agriculture and Food Security
- Early Child Development
- Social Safety Nets/Social Protection programme
- Maternal Mental Health
- Women Empowerment
- Child Protection
- Classroom Education
- School Feeding Programme
- Water, Sanitation and Hygiene
- Health and Family Planning Services



Stakeholders/Actors/
Agents of change
Governments
(Local and National)

- Provide the population with access to healthy foods;
- Ensure food security;
- Deliver high-quality healthcare.
- Be fully committed to the SDGs, implement actions, programmes and policies addressing both the underlying and immediate causes of malnutrition.

Civil Society Organizations (NGOs/CBOs)

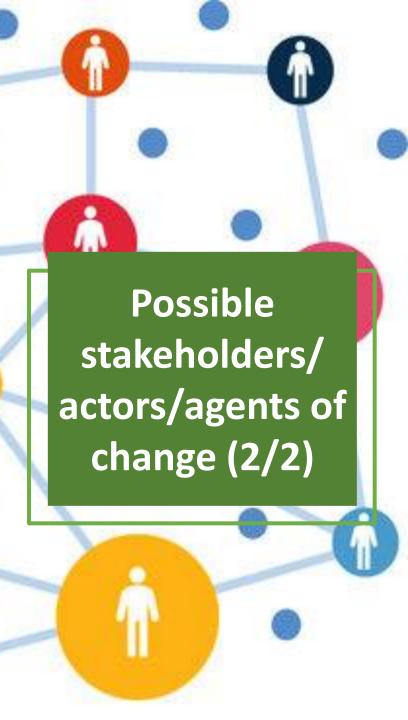
- Advocating for and supporting better nutrition actions/implementation of interventions ("speaking up" for nutrition).
- Help ensure nutrition programs and policies represent and reach all community members to achieve impact.
- Create demand and build consciousness towards the importance of nutrition at all levels and among all key stakeholders in nutrition development.

Private Sector

- Nutrition Education programmes
- Transforming the food system
- Enabling access to healthy, affordable and sustainably produced food

Policy advice Program Development **UN Agencies/ Capacity Building** International Surveillance **Organizations** Coordination Applied research Funding – Securing financial investments for nutrition Support for collecting better nutrition data **Donors** Conducting regional training and providing technical assistance to design and implement nutrition interventions. Conducting evidence-based research; Strengthen and increase research spending to address Academic and major nutrition questions, Identify cost-effective **Training Institutions** solutions and stimulate solutions. Capacity building Making nutritious food choices for the family; Modeling dietary choices and patterns; Parents/Caregivers Using feeding practices to reinforce the development of

eating patterns and behaviours.



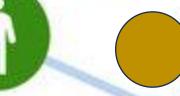


Resources Needed





- Funding from donors, international organizations and other philanthropists.
- Provision of Research grants
- IEC Materials for Behavioural Change Communication (BCC) and a Successful Teaching-Learning Process
 - Newspapers, Flyers, Banners, Leaflets, Brochures, Flipcharts etc.
 - Public Awareness/Sensitization through the Media (Electronic and Print) e.g. Radio Jingles, PPAs, PSAs, Expert Talks etc.



- **Human Resources**
 - Qualified and Committed human resources across various levels and disciplines.

Materials

- Assessment tools e.g. Anthropometric assessment tools, dietary assessment tools etc.
- Survey Materials/Tools
- **Incentives**



Methodological resources





- Partnerships play a central role in enabling community coalitions and community-based health programs achieve systems change and address health disparities;
- Collaboration among government agencies, nutrition authorities (recognized and credible sources of nutrition information), and representatives of the food industry provides a platform for achieving the nation's health and nutrition objectives;
- Intersector partnerships for nutrition intervention is a major public health strategy; It offers opportunities to change the food system — the way food is produced, processed, marketed, and consumed — through public education, professional education, applied research, reformulation of foods, development of more healthful food products, and public policy initiatives.
- Partnership with the private sector is instrumental in improving the nutritional status of poor and food-insecure people and promoting healthy lifestyles.

Roles of Partnerships



Management and Monitoring





- Monitoring and evaluation (M&E) systems are key aspects of successful program implementation;
- In other words, implementing nutrition intervention programs require monitoring to assess the accomplishments of targets, and eventually the program's goals. Thus, adequate measures must be put in place to monitor the progress of both nutrition specific and nutrition sensitive intervention programs.
- M&E criteria that may be considered include:
 - Relevance/Appropriateness
 - Effectiveness
 - Efficiency
 - Coverage
 - Quality of services
 - Impact

Mechanisms for sustainability and resource leakages/wastages



- Well designed/Appropriately targeted public programs
- Good coordination
- Stable Funding & Multi-year resource commitment
- Strong Government Leadership and Championship
- Clear public policy

- Strong technical capacity
- Effective advocacy and communications
- Strong monitoring and feedback system
- Partnerships



