

## INFORMATION SHEET

### Nutrition

UNICEF Nigeria, June 2006

#### Background

In Nigeria, decades of protracted military rule deepened poverty and created a situation in which many children are undernourished. According to the last National Demographic and Health Survey (NDHS, 2003), 29% of Nigerian children under five years are considered underweight. Today Nigeria is among the ten countries in the world with the largest number of underweight children with an estimated 6 million children under five who are underweight.

Children who are undernourished have lower resistance to infection and are more likely to die from common childhood ailments such as diarrhoeal diseases or respiratory infections. In Nigeria, it is estimated that malnutrition contributes to over 50% to mortality among children aged under-five years.

Apart from poor feeding practices and shortfalls in food intake, micronutrient deficiency is a direct factor of child morbidity and mortality. Micronutrients such as iron, iodine, vitamin A, are necessary for the healthy development of children. Their absence in the diet cause serious disorders. For example, a lack of sufficient iodine can lead to goiter, hypothyroidism, mental and physical impairment. Damages due to iodine deficiency can be avoided by ensuring that the salt used in households is iodized.

In Nigeria, important progress has been made in Micronutrient deficiency control over the last years. Today Nigeria is justifiably considered Africa's success story on iodization of edible salt. It is the only sub-Saharan country to attain universal Salt iodization with about 97% of the households using iodized salt. This was confirmed by an external review carried out by the Global Network for Sustainable Elimination of Iodine Deficiency in 2005.

Vitamin A is a crucial micronutrient for the development of children's immune and visual systems. According to the *Vitamin and Mineral damage assessment Report (2004)*, 25% of the Nigerian children are growing up with lower immunity, leading to frequent ill health and poor growth because of Vitamin A deficiency. Only 27% of Nigerian children under five years receive Vitamin A supplements.

Another important aspect of nutrition is breastfeeding. WHO and UNICEF recommend that babies will be exclusively breastfed during the first six months of life. According to the NDHS, only 17,2 % of Nigerian children under six months are exclusively breastfed.

Mothers' nutritional status during pregnancy is also important to ensure safe motherhood. A lack of iron causing anemia increases the risk of infants' death while the lack of folic acid can also cause severe birth defects. Yet, according to the NDHS, 40 % of Nigerian pregnant mothers did not take any iron tablets, a recommended supplementation during pregnancy.

#### National Response to Malnutrition

Nigeria launched its National Policy on Food and Nutrition in 2002, with the overall goal of improving the nutritional status of all Nigerians. This policy sets specific targets, which include reduction of severe and moderate malnutrition among children under five by 30% by 2010, and reduction of micronutrient deficiencies (principally of vitamin A, iodine and iron) by 50% by 2010.

To tackle malnutrition, Nigeria has identified the following strategies:

- Improving Food Security through programmes and projects in the agricultural and non-agricultural sectors to increase household income especially in the poorer segment of the population.
- Enhancing care-givers' capacity by promoting optimal infant feeding practices and reducing the workload of women to create more time for childcare, through the development of labour saving technologies
- Improving Health services to provide essential maternal and child health care
- Controlling micronutrient deficiency and anaemia through a strategy comprising vitamin and minerals supplementation, food fortification and dietary diversification.
- Eliminating Iodine Deficiency Disorder through salt iodization programme
- Institutionalizing general consumer protection measures to safeguard food quality and consumer health.

The National Planning Commission through the National Committee on Food and Nutrition (NCFN) serves as the focal point for the co-ordination and

harmonization of all food and nutrition related policies and programmes in the country. The Federal Ministry of Health, the Federal Ministry of Industry, the National Agency for Food and Drugs Administration and Control (NAFDAC), the Standards Organization of Nigeria (SON), the National Primary Health Care Development Agency are also involved in the Government nutrition programmes.

The initiative to control and reduce micronutrient deficiency disorders in Nigeria goes back to 1990. In 2002, the Government adopted a new strategy: the fortification of staple food with Vitamin A, so that children will naturally consume Vitamin A in their food. The Ministry of Industry (Standards Organization of Nigeria) published mandatory standards for vitamin A fortification in flour, sugar, and vegetable oil in 2002. By 2004, 70% of the sugar, 100% of wheat flour and 55% of vegetable oil sold in the market, were fortified with Vitamin A. Nigeria is also fortifying wheat flour with iron, thereby helping to protect children and mother's physical and mental health.

Supported by UNICEF and the Micronutrient Initiative of the Canadian Government, this programme works through the establishment of an effective partnership with the private sector food industries, media houses, the consumer association and development partners. A combination of social marketing techniques and enforcement of quality standards by NAFDAC and SON ensure both the demand for fortified food and the compliance of producers and importers.

An important step taken by the Government to improve the nutritional status of school children is the Home-Grown School Feeding and Health programme (Federal Ministry of Education) launched in September 2005. The thrust of the programme is to provide a balanced and adequate meal during the school day. The pilot phase (Sept 2005-July 2006) has involved 12 States and F.C.T. in the six geopolitical zones.

## **UNICEF's support to the national response**

Currently, the country programme for UNICEF Nigeria supports Nutrition projects in two major areas:

- sustainable elimination of vitamin A deficiency and iodine deficiency disorders (IDD), as well as reduction of iron deficiency anaemia and zinc deficiency
- improvement of early child care practices at the household level and in early child care centres

UNICEF through its focus on eliminating iodine deficiency disorders contributed to the success of the salt iodization programme in Nigeria and its achievement of universal salt iodization.

UNICEF also supported the formulation of Nigeria's current strategy for micronutrient deficiency control. Since 1993, it has championed the food fortification effort, promoting a combination of demand creation through social marketing and advocacy to manufacturers / importers.

Dietary diversification, including the promotion of community gardens and preparation of nutritionally-adequate complementary foods from locally available products is also being encouraged through UNICEF assisted projects.

UNICEF is also promoting an integrated approach to early childhood development, involving the interplay between health, nutrition, sanitation, and education. This has entailed focusing on improvement of early childhood care in households and supporting Early Child Care activities at community level.

UNICEF aims to improve nutritional practices and household health care capacity through the promotion of key households' practices for children under five. Community sensitization is carried out by community resource persons and ward working groups, using counseling guides, flip charts, and posters in local dialects in over 100 communities in UNICEF focus LGAs. In about 90 select communities, household nutritional status and income was improved through training in livestock production and distribution of seedlings as well as food processing equipment, in partnership with government agencies.

In partnership with WHO and the UN Foundation, under the Community Development Project, UNICEF is also contributing to promote early childcare practices beyond its focus LGAs.

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