

Alive & Thrive Nigeria

January 2022

Accelerating the scale of Maternal, Infant, and Young Child Nutrition (MIYCN) in Nigeria

Alive & Thrive (A&T) saves lives, prevents illness, and improves the health and wellbeing of mothers, children, and adolescents by using evidence-based approaches in collaboration with governments and other partners at the global, regional, national, and community levels. The initiative is managed by FHI Solutions and funded by the Bill & Melinda Gates Foundation and other donors.

Building on a proof-of-concept phase (2009-2014), A&T demonstrated that rapid improvements in infant and young child feeding are possible in diverse settings through strategically planned high-impact interventions. A&T has since expanded its geographic and technical scope, strengthening the integration of MIYCN interventions into health, food, and social protection systems in over 19 countries. In Nigeria from 2016 to 2021, A&T strengthened the policy environment for infant and young child feeding (IYCF) at the national and state levels, built the capacity of frontline workers to support IYCF throughout the first 1,000 days period, and sensitized and engaged communities on IYCF practices. By working with national, state, and community actors, interventions helped reach more than 2,809,686 mothers with nutrition counseling by trained frontline workers.

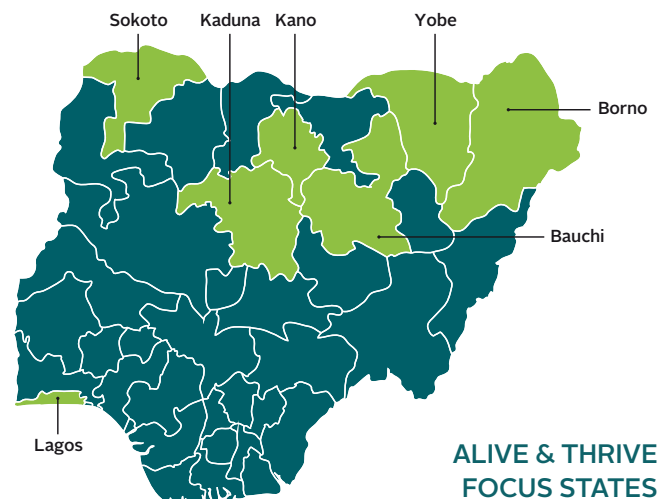
In 2021, the second phase of activities began in Nigeria, which built on the successes and learning realized during the initiative's first five years. From 2021-2026, A&T is scaling up MIYCN coverage in seven focus states – Kaduna, Kano, Sokoto, Borno, Bauchi, Yobe and Lagos – by working with governments and strengthening local capacities. Recognizing the importance of maternal nutrition for better health and wellbeing outcomes for both women and their children, A&T aims to improve the delivery of maternal nutrition

interventions and MIYCN outcomes in the focus states. Further, the initiative strives to improve data management and quality and also increase use of data for decision-making and performance management..

This brief describes A&T's new and ongoing efforts to scale up MIYCN interventions in Nigeria.

Context for Action

Progress towards global nutrition targets in Nigeria has been slow, with no progress made towards reducing anemia among women of reproductive age over the past decade (Global Nutrition Report, 2021). **Prevalence of thinness (BMI<18.5) of women in Nigeria** exceeds the global and regional average. While some improvements have been made in early initiation of breastfeeding and exclusive breastfeeding of infants, overall rates remain low. The country's **child mortality rates** are among the world's highest, while **rates of recommended IYCF practices** are among the world's lowest. Of children aged 6-23 months, only **10% received a minimum acceptable diet** and **23% achieved minimum dietary diversity** (NDHS 2019).



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Scaling Up MIYCN Interventions

During the first phase, A&T tested and demonstrated the effectiveness of innovative intervention packages for improved IYCF practices. Applying this experience, the initiative is expanding MIYCN coverage in primary health care facilities in Lagos and Kaduna states and strategically scaling to an additional five focus states. A&T is undertaking the following approaches to scale up MIYCN interventions:

- Design a comprehensive package of MIYCN interventions to reduce anemia, prevent low birth weight, promote early and exclusive breastfeeding, and reduce wasting and stunting.
- Support state government and local organizations to lead and sustain the delivery of MIYCN interventions.
- Work with community-based organizations to engage mothers, husbands/partners, influential family members, and religious and traditional leaders to increase demand for MIYCN services.

The initiative is also adapting and scaling mass media campaigns to new states, which now include messages on maternal nutrition. Mass media helps to create broad awareness of optimal nutrition practices for mothers and their children and complements other A&T interventions. The mass communication campaigns – “Start Strong” and “Zero Water” – reached more than 10 million families in 11 focus states, aiming to improve IYCF practices.

Systems Strengthening

Enabling Environment. A&T is working with its public and private sector advocacy partners and networks to strengthen the policy and regulatory environment for MIYCN in Nigeria. A&T aims to create a supportive environment for MIYCN through strong national and state-level policies and protocols, dedicated financing and budget lines for nutrition, and improved implementation of MIYCN policies and regulations. Examples of priorities to strengthen the enabling environment for nutrition include:

- Work with focus states to align their nutrition plans and budgets with national guidelines and the National Multi-Sectoral Plan of Action for Food and Nutrition.
- Engage political leaders and champions to advocate for dedicated nutrition financing and greater resource mobilization for MIYCN at the national and state levels.
- Strengthen states' capacity to monitor and enforce the International Code of Marketing of Breastmilk Substitutes.

Capacity Building. A&T designs its activities with the goal of fully transitioning approaches to the government and other stakeholders. By working within existing platforms and embedding staff within state government offices, A&T can monitor institutional capacity and address gaps through side-by-side implementation. Capacity building activities include:

- Provide training, mentoring, and coaching to health providers in support of effective interpersonal communication (IPC) on maternal nutrition and IYCF practices.
- Strengthen community-based organizations' capacity and technical skills so they can lead implementation of IPC and community engagement initiatives.
- Work with partners such as the Federal and State Ministries of Health and the Monitoring and Evaluation Technical Working Group to improve skills around the quality and use of routine nutrition data at the national and state levels.

POLICIES AND GUIDELINES SUPPORTED

During its first phase, A&T built partnerships and actively contributed to the development and revision of IYCF policy and strategy documents in Nigeria:

- Revised national regulations on the marketing of breastmilk substitutes (BMS)
- Costed five-year plan of action (2021-2025) for the implementation and monitoring of the BMS Code in Nigeria
- National assessment on maternity leave and policies (2020) with the Federal Ministry of Health and UNICEF, providing an evidence base and supporting improved family friendly policies on IYCF at national and state levels
- Nigeria Governors' Forum Nutrition Scorecard, driving improvements at state level
- Six-month maternity leave policy in Kaduna State
- National Baby Friendly Initiative Guidelines (2021)
- National IYCF Social and Behavior Change Communication Strategy (2016-2020)



Research and Learning

While existing evidence and lessons learned from prior successful activities drive the scaling up of MIYCN interventions in Nigeria, the initiative continues to generate new knowledge to inform policies, programs, and implementation strategies through implementation research. A&T's learning agenda includes topics such as:

- Introduction of innovative maternal nutrition products (e.g., multiple micronutrient supplementation and balanced energy-protein supplements)
- Best practices in capacity strengthening for sustainable MIYCN programming
- Feasibility and effectiveness of different service delivery models

To measure the impact of its efforts on MIYCN practices, A&T conducts baseline and endline surveys. Across all research and learning activities, local research organizations are engaged as key partners to collaboratively design and conduct research, which supports our goal to build local stakeholders' capacity in research and evaluation.

Success/Achievements

IMPROVEMENTS IN IYCF PRACTICES

From 2017 to 2020, the following changes were realized from baseline to endline in intervention and control areas combined:

- Early initiation of breastfeeding in Kaduna state increased from 40% to 46%*
- Exclusive breastfeeding in Kaduna state increased from 25% to 43% **
- Exclusive breastfeeding in Lagos state increased from 59% to 64%
- Minimum dietary diversity in Kaduna state increased from 21% to 41% and in Lagos from 37% to 58%**

*p<.05, **p<.001