

SOKOTO STATENUTRITION PROFILE

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

Improving maternal, infant, and young child nutrition (MIYCN) requires concerted efforts by multiple partners seeking to realize a common vision – a world where all women and children benefit from good nutrition. Working towards this goal, Alive & Thrive is supporting the Government of Nigeria at the national and state levels to advance progress towards the 2O25 World Health Assembly nutrition targets.

From 2021-2026, Alive & Thrive, in collaboration with the State Ministry of Health, Sokoto State Primary Health Care Development Agency, and the Sokoto State Ministry of Budget & Economic Planning (SMoBEP), is supporting the scale up of MIYCN services, the adoption and implementation of national policies and guidelines, and increased investment in the state nutrition plan.

The purpose of this document is to provide stakeholders a snapshot of the situation in Sokoto State in 2022. The indicators show that much work needs to be done to achieve the 2025 World Health Assembly nutrition targets (see page 2).



The Alive & Thrive initiative, managed by FHI Solutions, is funded by the Bill & Melinda Gates Foundation, Irish Aid, UNICEF, the World Bank, and other donors. www.aliveandthrive.org

INFANT AND YOUNG CHILD FEEDING PRACTICES, SOKOTO STATE

within the first hour

under 6 months



5.2% Early initiation of **breastfeeding**



45%Exclusive breastfeeding of infants



22.8%Minimum dietary diversity (6-23 months)



9.7%Minimum acceptable diet (6-23 months)

Source: SMART Survey 2018; NNHS 2018.

CHILD NUTRITION INDICATORS, SOKOTO STATE 1



30.3%Of children under-five are **underweight**



31.9% Of children under-five are **stunted**



8.4%Of children under-five are **wasted**



15.8%Of children are born with low birthweight

Source: SMART Survey 2018; NNHS 2018.
¹Global Nutrition Report, 2021.

Strategic program intervention towards ending malnutrition in Sokoto state

Sokoto State plays a critical role in helping Nigeria achieve progress toward global nutrition targets through successful adoption and implementation of MIYCN policies and programs. From 2021-2026, A&T is supporting the scaling up of MIYCN coverage in Sokoto State by working with the State Ministry of Health, Sokoto State Primary Health Care Development Agency, and the Sokoto State Ministry of Budget & Economic Planning to specifically strengthen local capacities, recognizing the importance of maternal nutrition for better health and wellbeing outcomes for both women and their children. This commitment will be achieved through the following:

SCALING UP MIYON INTERVENTIONS

- ► Implement a comprehensive package of MIYCN interventions to reduce anaemia, prevent low birth weight, promote, early and exclusive breastfeeding, and reduce wasting, and stunting
- ► Engage mass media to improve awareness of MYCN practices among mothers and their family members
- Work with community-based organizations (CBOs) to engage mothers, influential family members, and religious and traditional leaders for increased demand for MIYCN services
- Support government and CBOs to lead and sustain the delivery of MIYCN interventions

SYSTEMS STRENGTHENING

- Support the state government to align nutrition plans and budgets with national guidelines and the National Multi Sectoral Plan of Action for Food and Nutrition
- ► Strengthen states' capacity for monitoring and enforcement of the International Code of Marketing of Breastmilk Substitutes
- ▶ Engage political leaders and champions to advocate for dedicated nutrition financing for MIYCN at the national and state levels

CAPACITY BUILDING

- ▶ 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 relevant MDAs and Technical Working Groups to enhance technical skills, guidance, and monitoring of MIYCN outcomes at the national and state levels.

HEALTH FACILITIES BY OWNERSHIP AND LEVEL OF CARE



871Public Primary



Public Secondary
Health Facilities



Public Tertiary
Health Facilities



93
Private Primary
Health Facilities

https://www.hfr.health.gov.ng/statistics/tables

MATERNAL NUTRITION INDICATORS, SOKOTO STATE



73.7%Of Women of reproductive age (15-49 years) are **anaemic**



21.1%Of Women of reproductive age are **thin (BMI<18.5)**



2.0%

Of Women of reproductive age are of **short stature**



9.1%

Of Women of reproductive age are **acutely malnourished**



177,551# of Women who accessed IFA
June 2020 - Feb 2021
(NHIMS Routine Data)

Source: SMART Survey 2018; NNHS 2018.

WORLD HEALTH ASSEMBLY GLOBAL NUTRITION TARGETS 2025



40%

Reduction in the number of children under-five who are **stunted**



0.5%

Reduced and maintained Childhood **wasting**



50%

Reduction of **anaemia** in women of reproductive age



50%

Increased rate of **exclusive breastfeeding** in the first 6 months



30%

Reduction in low birth weight

https://www.who.int/publications/i/item/WHO-NMH-NHD-14.2