

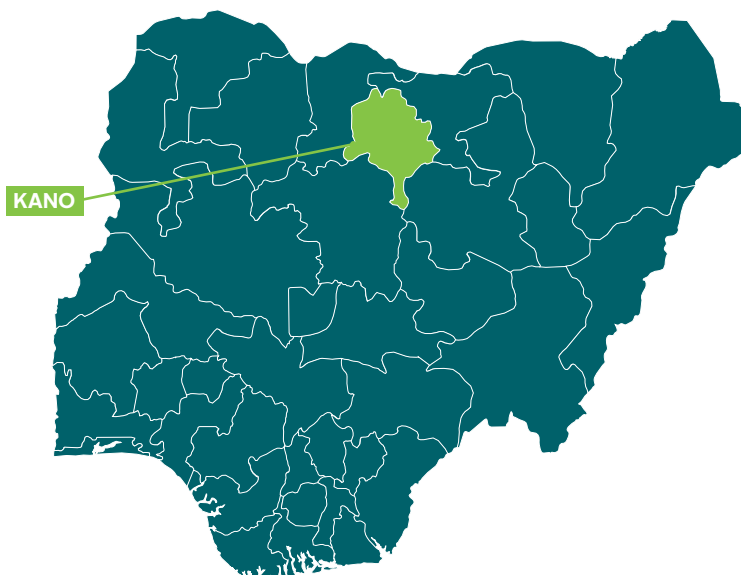
KANO STATE NUTRITION PROFILE

Accelerating the scale of Maternal, Infant, and Young Child Nutrition (MIYCN) in Kano 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 2025 World Health Assembly nutrition targets.

From 2021-2026, Alive & Thrive, in collaboration with the State Ministry of Health, State Primary Healthcare Management Board, and Kano State Ministry Budget & Planning (KMoBP), 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 Kano 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).



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INFANT AND YOUNG CHILD FEEDING PRACTICES, KANO STATE



30.3%

Early initiation of **breastfeeding** within the first hour



19.0%

Exclusive breastfeeding of infants under 6 months



31.3%

Minimum dietary diversity (6-23 months)



14.4%

Minimum acceptable diet (6-23 months)

Source: SMART Survey 2018; NNHS 2018.

CHILD NUTRITION INDICATORS, KANO STATE ¹



35%

Of children under-five are **underweight**



61%

Of children under-five are **stunted**



7.1%

Of children under-five are **wasted**



15.4%

Of children are born with **low birthweight**

Source: SMART Survey 2018; NNHS 2018.

¹ Global Nutrition Report, 2021.

Strategic program intervention towards ending malnutrition in Kano state

Kano 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 Kano State by working with the State Ministry of Health, State Primary Healthcare Management Board, and Kano State Ministry Budget & Planning (KMoBP) 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 MIYCN 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 MIYCN 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



1235
Public Primary Health Facilities



39
Public Secondary Health Facilities



03
Public Tertiary Health Facilities



187
Private Primary Health Facilities

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

MATERNAL NUTRITION INDICATORS, KANO STATE



60.2%
Of Women of reproductive age (15-49 years) are **anaemic**



18.7%
Of Women of reproductive age are **thin (BMI < 18.5)**



7.4%
Of Women of reproductive age are of **short stature**



11.2%
Of Women of reproductive age are **acutely malnourished**



1,287,810
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>