



MASSIVE REDUCTION IN MALNUTRITION IN NIGERIA: We Must Get It Right This Time.

Recently, the Economic Growth and Environment Office of the United States Aids for International Development (USAID) held a stakeholders' forum preceding the development of a multi-year food security Strategy for Nigeria, covering the 5-year period, 2012-2018. The strategy which is being prepared in the context of the US government's global hunger and food security initiatives, "**Feed the future**", and aimed at tackling the root causes of global hunger by sustainably increasing agricultural productivity to meet the demand for food, supporting and facilitating access to markets, increasing incomes so the poor can meet their food and other needs, as well as reducing under-nutrition. Observing that USAID/NIGERIA's development program aims to assist the government of Nigeria to accelerate inclusive agricultural growth and improve nutritional status, the forum which intended to develop high-impact strategies to direct investment to areas most likely to yield substantial, measurable and sustainable improvement in food security aimed to align with the **Agricultural Transformation Agenda** of the federal government of Nigeria **which supports a private sector led agribusiness environment with special focus on women and youth**. This move in line with international cooperation and solidarity as well as the necessity to refrain from unilateral measures will ensure both countries do not work at cross purposes or efforts become counter-productive.

However, by all means and without prejudice, of all the key issues of this laudable program dealing with policy, community driven approach for effective smallholder empowerment, environmental management and coping with effects of climate change, **tackling under nutrition is the most vital** for Nigeria. This is because Africa and indeed Nigeria is in **critical situation**, and in spite of being at the centre of wellbeing of the people and central to all facets of national development, lending credence to all development efforts, nutrition has suffered neglect over a long period. I am glad this is the assignment I was given to tackle in the forum.

Recent studies show five children die every minute worldwide because of chronic malnutrition, and that also almost half a billion children are at risk of permanent damage over the next 15 years. A report from Save the Children said the deaths of 2 million children each year could be prevented if malnutrition were better addressed. It called chronic malnutrition a largely hidden crisis that affects one in four children globally. Besides global hunger having fallen markedly over the last two decades, the 2011 Global Hunger Index found that six countries have higher rates of hunger today than two decades ago. Five of those countries are in Africa.

This report still agrees with the old findings made public by International Food Policy Research Institute (IFPRI) in 1999 that: "Child malnutrition is expected to reduce in all major developing regions of the world except Africa where the number of malnourished children is forecast to increase by about 30% by 2020" (Pinstrup Anderson, et al). It quoted H. E. Yoweri Museveni President of the Republic of Uganda as saying "Africa leads in hunger, malnutrition and under-nourishment. Experts assure us that unless an extraordinary effort is made by all of us, 40 Million children on this continent will be malnourished by 2020. That is why a new vision is so urgent", and Todd Benson, as saying "any effort to reduce the level of malnutrition in Africa must target Ethiopia, Nigeria, and the democratic republic of Congo, home to 40 % of all the stunted the well being of the people pre-schoolers on the continent".

Over 12 years after this prediction issues have not changed. All the changes we see are reversal. Malnutrition is taking its toll on the world. Africa remains a major victim. Situations seem to encroach more rapidly than predicted. Nigeria regrettably is counted as one.

Presently, we are faced with high infant mortality and under-5 deaths, and maternal mortality rate remains frightening. **Nutrition problems in Nigeria is widespread and at a critical stage. UNICEF report on "Mother, New Born and Child Health and Mortality in Nigeria revealed a despicable fact. That:**

- Every 10 minutes, one woman dies on account of pregnancy or childbirth in Nigeria, giving a total of 53,000 per year. This means about 800 women die in every 100,000 live birth.
- Nigeria's newborn death rate (neo-natal mortality) – 528 per day – is one of the highest in the world. More than a quarter of the estimated 1 million children who die the age of 5 annually in Nigeria die during the first 28 days of life (neonatal period).
- About 5.3 million children are born yearly in Nigeria that is about 11,000 every day. 1 million of these children die before the age of 5 years.

The report went on to say the Northern part of the country has the highest maternal mortality rate, highest death rate of infants at neonatal age (within 28 days of birth) and the highest death rate of under five children. It further **said Nigeria has a record high number of African pre-school children with stunted growth; stunted rate in the eight states investigated was higher the entire stunted number in a nearby Niger republic**. The report did not end without telling us a shocking truth; **that about 9 out of 10 of newborn deaths are preventable**.

Also, a new global report said Nigeria accounts for 11 million of the 60 million children with stunted growth globally due to malnutrition. The report- "A life free from hunger: Tackling child malnutrition", issued by Save the Children in Abuja, predicted further that if adequate measures are not taken, there would be additional 2.4 million stunted Nigerian children by 2020.

The consequences of malnutrition for human well being and for socio-economic development are far reaching. In infants and young children, under-nutrition and growth retardation are associated with reduced physical activity, impaired resistance to infection,

impairment of mental development and reduced educational capacity, and increased morbidity and mortality. In adults, undernourishment can lead to poor health and diminished productivity through reduced physical performance and can hinder community and national development.

WHO says malnutrition increases risk of infection and infectious diseases? They say moderate malnutrition weakens every part of the immune system. It affects HIV transmission and is an added risk in sanitation issues. It jeopardizes normal brain function also represents the downward spiral as victims are less able to perform the tasks they need. Iodine deficiency the first two years acutely impair brain function and moderate or lack of iodine results in lower IQ by 10 to 15 IQ points and protein calorie deficiency furthers cognitive impairment.

Agricultural out-put is yet to pick up. Some development policies, such as the recent petroleum subsidy, which promises positive impact in the long run, are hurting the masses particularly in the rural areas in the immediate. Prices have not just gone up, they have remained so. There is furthering poverty, devastating hunger, acute malnutrition and reversal is not foreseeable. And all these challenges are putting pressure on household income, particularly the food budget.

Right to food, which is a fundamental human right, has come under attack and is fast eclipsing. All the 4 pillars that constitute food security, -Availability, Accessibility, Utilization and Stability, are being greatly challenged. The population at risk, the vulnerable widens as more people join the vulnerable group. We are also left with more extreme and severe vulnerability.

USAID projected population of 300 million people by 2035 with over 62 % living in poverty with a promised increase to 2/3 of the population.

Nigeria is in a critical point now. Malnutrition is affecting health disposition- forming the basis of further devastation. **Issues are certainly in a deplorable state.**

Yet the World Food Summit still demands assurance:

"That individual has access to adequate nutritious and safe food".

*"It also calls for human welfare including nutritious wellbeing which it says **must** be at the centre of all social and economic development".*

The challenge is how to show in the short run characterized by non expansion of food budget or worse case a contracting budget, that family members, particularly the vulnerable ones, are adequately fed? Worse still, how could we ensure the poorer they get the better they still feed?



A daunting challenge? But it is feasible.

Interaction between malnutrition and infection is now recognized as a major global issue. According to WHO, malnutrition is the greatest single threat to the worlds public health. **Malnutrition seats diseases and intensify same when they are present**. Improving nutrition is widely regarded as the most effective form of aid, says WHO. FAO/WHO corroborate " good nutrition is an investment which can help raise the productivity of both present and future generations".

Unfortunately, while malnutrition is at the base of most health problems the nation seems to be approaching health issues from an **intervention point (curative), not preventive**. **Most, if not all the arsenal for intervention has been via the health sector, which has proved incapable of handling the matter. Health is a secondary sector, it is an intervention sector. It has no primary responsibility, it is only mostly curative. It only comes alive when the primary sectors fail, to try to rectify / cure. It is the final recipient of the failings of the primary sectors, not only agriculture. Agriculture (through nutrition and food safety) is primary, both preventive and curative, and we know that prevention is better than cure**. In the beginning, when the creator put man in the garden, He knew the herbs will suffice. **We have gravitated to an area of much difficulty. Agriculture is the primary custodian of Health. Health cannot solve the problem. That is why it has not. It is a well known adage that you are what you eat, not the drugs you take.**

Food is natural, generally available, and relatively cheaper, goes round, does not need follow-ups and cannot be over-dosed. Consider the rural dwellers, where obviously greater percentages of the problem domicile. They are generally characterized by poverty, are faced with dearth of medical personnel and drugs. For some, there are cultural, religious and traditional impediments to embracing medication. **I strongly believe the missing point / link in all these is nutrition empowerment, which usually drags along safety.**

If experts say 55% of diseases are food borne, does it not mean the burden of health can actually be significantly reduced via agriculture? Also, scientific evidence shows that 50 percent of under -5 deaths are as a result of diarrhea and this has implication to food (and water) safety and hygiene.