



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

THE WAY FORWARD

THE NATION NEEDS A BROAD BASED NUTRITION BLUE PRINT FOR ITS HEALTH REFORM PROGRAM.

GOAL:

INITIATE, PROMOTE, FACILITATE, SUPPORT & MONITOR SUSTAINABLE HEALTH REFORM PROGRAM FROM AGRICULTURAL (NUTRITION AND FOOD SAFETY) PERSPECTIVE FOR NIGERIA.

THROUGH:

Exploring the bio-directional relationship between agriculture and health and anchoring mainly on nutrition for preventive and curative purposes.

The objectives of the Program are:

- Restoring the health of the already malnourished;
- Assuring sustained normalcy in growth and development;
- Buffering the health of the people thereby assuring better insulation and resistance to diseases so the poor are better able to withstand crises with the overall number and severity of cases being significantly reduced; and most importantly:
- **Drastically reducing the burden on the Health sector.**

This is an extensive phenomenon that will be all round, particularly **buttressing support in the area of Safe Motherhood and Infant and Child Survival policy in Nigeria.** It will be a comprehensive programme that must gear at a wide ranging approach to reducing mothers' and child's high risk as a result of diverse factors and save the vulnerable in emergency from advanced vulnerability. In **the state of affair that is becoming compelling for allotting a high priority to women's health, much would be accomplished by adopting nutrition as a base.**

Policy: Every change of a crisis dimension needs critical policy



reform. We must change policy and must have the political and favourable policy environment through strong government commitment for change. **Adequate resources must be made available, even if it means readdressing budget from secondary care to high cost valuable preventive intervention packages and strategies of which nutrition is foremost.**

Action must be formulated in the SHORT, MEDIUM and LONG TERMS. Innovative ideas must be sought to broaden the nutritional programme.

All contributions must be **permissively implementable**, not obtrusively theoretical **with a measurable time bound.** Although where lean resources meet ignorance, the result is furthering malnutrition and possible health crises. Yet, it must be stressed that in the short run characterized by inexpansable budget, poverty is no excuse for malnutrition.

CONCLUSION

The nation seems to be experiencing challenges in areas where we ought to be celebrating major breakthroughs and success. When I presented a paper at the 2009 World Food Day on Saving the Vulnerable in Crisis, I limited the situation to the then issues of world food crisis and financial meltdown. Today, I realize that the crisis has assumed a permanent position, begging for solution. **Nutritional empowerment is it. It is cheaper, achieve much more widespread with sure result. Agreed nutrition education, management and intervention might be expensive in the short run, but in the long run it will absorb the cost of curative care. My assurance is that we must have positive feedback in this area and other related Millennium Development Goals, in record time too.** Faithful nutrition empowerment policy is good and is achievable.

A nutritional empowerment program holds the key to malnutrition eradication and better health. It will be a tool to cushion the effect of harsh policies (such as the petroleum subsidy removal project) which although will impact positively in the long run, leaves a trail of negative impacts on the masses particularly in the rural areas in the immediate and medium runs. Stability of well being would only be assured, in the face of harsh development policies if policy change for nutrition empowerment is installed. It will accelerate the attainment of the MDGs. In fact, malnutrition is implicated in poor academic performance, in the fight against fake and adulterated drugs by NAFDAC, etc. When people are malnourished, instead of going back to right feeding, they opt for drugs. The many malnourished people translate into increased demand for drugs and put pressure on suppliers whose supplies are complemented chiefly from adulterated sources.

The Agricultural Transformation Agenda offers a platform for this change. The partnership with the Economic Growth and Environment Office of the USAID and other agencies is a wonderful opportunity. A transformation in the thinking and working of health

programs in Nigeria with agricultural sector realigning its position as the foundation of health will greatly release the burden of the health sector and free a lot of resources otherwise locked up. An encompassing program must be fashioned. We must call for and adopt other innovative ideas, support policies and strategies to stem this tide. Information must be utilized lavishly. A business as usual attitude

will only mortgage our future. Institution must be set that is accountable for the survival of the vulnerable through reversal of this threatening nutrition problem and strong visionary leaders must be identified at national and zonal levels to carry on the advocacy and management of this group. High maternal and child mortality must be stemmed through reduced mother and child malnutrition. The highly at risk individuals must be saved by us all. This is the time to act not speak. In the time we are now, there is need for both action and urgency. We must act now.

Without immediate intervention, the nation will record yet increased morbidity and mortality, especially among these vulnerable group-mother child. Above all, according to Ann-Lynn foster of the World Bank, the best minds must be put to work, the best policies and practices must be sought and a new sense of urgency must drive efforts on every level to accomplish the task.

NNENNA NWOKE KALU
EXECUTIVE DIRECTOR
VULNERABLE EMPOWERMENT INITIATIVE NETWORK