



# Building a strong foundation for nutrition programming

## Introduction to IYCN in Nigeria

Since 2009, the Infant & Young Child Nutrition (IYCN) Project has supported the Government of Nigeria's efforts to reduce maternal and child undernutrition and improve the HIV-free survival of infants and young children. IYCN has provided technical assistance to the Federal Ministry of Health (FMOH), the Federal Ministry of Women's Affairs and Social Development, and other partners to review, update, and disseminate nutrition policies and guidelines, train health care workers in the Federal Capital Territory (FCT) and its surrounding area councils, and enhance behavior change programs targeting HIV-positive mothers and HIV-exposed children. The project also supported a quality improvement approach to strengthen nutrition assessment, counseling, and support (NACS) services in prevention of mother-to-child transmission (PMTCT) of HIV and orphans and vulnerable children (OVC) sites in FCT. As a result of IYCN's role in Nigeria, the country adopted the World Health Organization's (WHO) most recent recommendations on infant feeding in the context of HIV, and updated national guidelines have been distributed to nutrition stakeholders across the country.

## Context for nutrition programming

An estimated 270,000 babies are born each year to HIV-infected women in Nigeria. About one-quarter of these babies become infected themselves because of their mothers' poor feeding practices during the first two

years of life. According to the 2008 Demographic and Health Survey of Nigeria, malnutrition is pervasive, making children born to HIV-positive mothers especially vulnerable to contracting the virus. Only 21 percent of Nigerian children 6 to 23 months of age eat what is deemed an acceptable minimum diet by international standards, and 12 percent of women aged 15 to 49 years suffer from chronic energy malnutrition. The survey shows that 41 percent of children younger than five are stunted, 23 percent are underweight, and 14 percent are wasted. OVC, some of whom are HIV-positive, are particularly susceptible to malnutrition and childhood diseases.

Formative research conducted by IYCN in the FCT found some positive practices and attitudes on which maternal and child health programs can build. Mothers and influencing groups (such as fathers, grandmothers, and community leaders) believe strongly in the benefits of breastfeeding. Caregivers have internalized and acted on messages about hygiene and active feeding of children, especially during and after illness. And families value and trust the advice that health care providers give them. Yet, a lack of collaboration between Nigeria's infant and young child nutrition programs and the absence of integration of nutrition into related programs, particularly those focusing on PMTCT, hinders progress. Out-of-date policies and guidelines hinder the effectiveness of nutrition programming, creating a system where nutritional counseling and the provision of support services is not consistent across health facilities.

Counseling regimens often neglect maternal nutrition and under-emphasize complementary feeding practices. Health care providers yearn for additional support for nutrition activities.

## Project activities and accomplishments

IYCN worked with the FMOH, other relevant government ministries, UNICEF, WHO, and the many partners implementing OVC and HIV/AIDS programs in Nigeria with funding from the President's Emergency Plan for AIDS Relief (PEPFAR) to improve the nutritional status of children less than two years of age and their mothers. We placed special emphasis on increasing the chance that children born to HIV-positive mothers live healthy lives free from HIV. Our efforts focused on improving the enabling environment for nutrition programs by reviewing and updating policy guidelines and training manuals and building the capacity of health workers.

### *Enhanced national policies and guidelines for improved nutrition*

By participating in high-level national meetings early on, IYCN was able to create awareness of the project and identify new partners for future collaboration. As a result, IYCN has collaborated closely with the FMOH Nutrition Division and has bridged the work of that division with other relevant partners, including the National HIV/AIDS and Sexually Transmitted Disease Control Programme, the Federal Ministry of Women's Affairs and Social Development, the FCT's Health and

#### **Communicating national recommendations on infant feeding and HIV**

IYCN supported the FMOH and collaborated with WHO and UNICEF to create a user-friendly brochure to help health workers, donors, United Nations agencies, academics, and other stakeholders understand Nigeria's *Consensus Statement on Infant Feeding in the Context of HIV*, which responds to the 2010 WHO guidelines on HIV and infant feeding. The brochure made it possible to rapidly disseminate the new recommendation to all levels of the health system. IYCN produced 50,000 copies, and the ministry launched the resource during a gathering of health officials from all 36 Nigerian states and the Federal Capital Territory.



Human Services Department, US Government-funded OVC and HIV/AIDS programs, and the Primary Health Care Development Board.

Through these meetings and other national workshops, IYCN helped to review and update more than five key documents including *Nutritional Care and Support for Orphans and Vulnerable Children: A Resource Manual and the National Guidelines for Nutritional Care and Support for People Living with HIV and AIDS*—guidelines that will serve as part of a training package for facility-level health care workers, community health workers, and volunteers.

“IYCN is the organization we recognize for nutrition in this country. Anything concerning nutrition we assign it to IYCN and listen to what they tell us and bring it back to stakeholders, review it and adopt it. Most of the time it involves a lot of technical discussion [with IYCN].”

—Oby Okwuonu, Assistant Director, Orphans and Vulnerable Children Unit, Federal Ministry of Women's Affairs and Social Development

IYCN also engaged with the FMOH, WHO, UNICEF, and other partners to develop and disseminate the national *Consensus Statement on Infant Feeding in the Context of HIV* and a complementary brochure, which reflects WHO's 2010 guidelines on HIV and infant feeding. Our contributions helped achieve a paradigm shift among national stakeholders that now places new emphasis on HIV-free survival of HIV-exposed infants rather than focusing only on prevention of HIV transmission.

## Increased understanding of gaps in nutritional assessment, counseling, and support

Published in January 2011, results from three IYCN assessments—a landscape analysis, a qualitative assessment of infant and young child feeding practices and beliefs, and an assessment of nutrition services provided through PMTCT sites and OVC partners—have informed national understanding of the gaps in NACS within PMTCT and OVC services. Methods included focus group discussions, observations, and in-depth interviews with mothers, caregivers, and key influencers to discover barriers to optimal nutrition, attitudes toward recommended practices, and trusted communications channels. Researchers also interviewed other key contacts, such as service providers, lay counselors, and home-based care providers, who regularly visit with mothers and children.

A presentation of these assessments led to the formation of a subcommittee on quality improvement, which has selected facilities and community sites in the FCT for strengthening nutrition interventions. Findings from these assessments provided evidence for developing locally-adapted training packages and behavior change communication activities.

“This program is different because the focus is on the community. Health workers are trained to involve community counselors. This allows them to be closer to the community.”

—Aishatu Amiwe Zango, *State Nutrition Officer and Trainer, Jigawa*

## Built the capacity of health workers and community workers

IYCN played a key role in building the capacity of facility- and community-based workers and volunteers to support caregivers around the country on improved feeding practices. Using a cascade training approach, the project assisted the FMOH to train 77 national- and state-level master trainers, who will conduct six-day training workshops for health workers and community workers using new training tools. IYCN collaborated with a wide range of stakeholders to develop, harmonize, and adapt new materials including the *National Infant and Young Child Feeding Training Curriculum* for health workers and the *Community Infant and Young Child Feeding* training package, which consists of a curriculum in addition to three take-home brochures and counseling cards. Each



Behavior change communication tools developed by IYCN, including counseling cards and take-home brochures, provide simple messages and illustrations that community workers and volunteers can use to explain optimal feeding practices to caregivers with low literacy levels.

tool includes consistent messages for caregivers, reflects the national consensus statement on infant feeding and HIV, and encourages a shared referral system between facility- and community-based workers.

## Improved the quality of nutrition assessment, counseling, and support

IYCN’s service provision assessment found that a lack of nutrition leadership and structures were contributing to poor NACS services. To improve the quality of nutrition services provided through PMTCT sites and OVC partners, IYCN initiated a quality improvement approach, emphasizing local leadership and ownership, in the Abuja Municipal Area Council of the FCT. With IYCN’s support, the district formed a quality improvement team—chaired by the Federal Capital Territory Administration (FCTA) and including local government officials, health providers, and other district stakeholders. The team identified key factors hindering the quality of NACS services, made recommendations for solutions, planned system-wide interventions to improve the quality of NACS across FCTA, and developed measurement indicators. Key problems identified were weak governance, lack of proper structure, and a lack of health care workers’ skills to provide quality NACS. The Primary Health Care Development Board of the FCTA plans to continue the quality improvement process even after the project completes activities.



## Introducing innovative tools for integrating agriculture and nutrition programming

In September 2011, IYCN launched new tools to help agriculture projects maximize nutritional benefits of interventions during a session with more than 300 people at the *Federation of African Nutrition Societies Congress* in Abuja, Nigeria. The project's Washington, DC, office will continue to provide technical support through the end of 2011 to the National Food Security Programme (NFSP) to adapt the tools for mid-term and annual review of NFSP projects.



PAT/ASHLEY AARSSON

“Despite having a limited budget, IYCN has been able to reach a broad audience by integrating important infant feeding messages into government-owned documents that will reach many levels through cascade training.”

—Dr. Bamidele Omotola, UNICEF

## Lessons learned

*Working closely with the government is necessary to achieve sustainability beyond the life of the project.* We have involved stakeholders from the government at all stages of planning and implementation of project activities. This has enabled government ownership of our activities, materials, and products, thereby ensuring their continued implementation after project closeout.

*Effective collaboration with key stakeholders is integral to success.* We involved nutrition, PMTCT, and OVC partners from the beginning, ensuring they were included in all stakeholder meetings and collaborating with them on program implementation.

*Integrating materials for health facilities and communities ensures consistent messages for caregivers.* We found that developing the facility and community-based materials concurrently resulted in consistency of key messages for caregivers and helped establish a two-way referral system between facility-based health workers and community workers and volunteers.

*A cascade training approach can help programs with limited resources reach more health providers.* We found that training master trainers at the national and state levels and engaging with a wide variety of partners

to leverage resources helps to reach a wider group of health providers.

## Looking ahead

In August 2011, the Minister of Health signed an updated national Infant and Young Child Feeding Policy, which now reflects the 2010 WHO guidelines on HIV and infant feeding. The FMOH will print the policy and disseminate it to stakeholders across the country in late 2011. To make sure that the new training tools continue to reach providers, IYCN worked with FMOH, UNICEF, and other partners to develop a plan for rolling out training of trainers at the local government authority level and to health workers and community workers in eight states. Based on this anticipated rollout, the FMOH has trained all program officers in the Family Health Department, who will conduct the trainings.

### Available resources

- Brochure on Infant Feeding in the Context of HIV (2011)
- Service Provision Assessment of Nutrition Services and Support: Federal Capital Territory, Nigeria (2011)
- Formative Assessment of Infant and Young Child Feeding Practices, Federal Capital Territory, Nigeria (2010)
- Integrated Curriculum on Infant and Young Child Feeding (2011)
- Community Counseling Package on Infant and Young Child Feeding (2011)
- Nutrition Care and Support for Orphans and Vulnerable Children: A Resource Manual (2011)
- A National Behavioral Change Communication Strategy for Infant and Young Child Feeding Practices in Nigeria (2011)

## ABOUT THE INFANT & YOUNG CHILD NUTRITION PROJECT

The Infant & Young Child Nutrition Project is funded by the United States Agency for International Development. The project is led by PATH and includes three partners: CARE, The Manoff Group, and University Research Co., LLC. For more information, please contact [info@iycn.org](mailto:info@iycn.org) or visit [www.iycn.org](http://www.iycn.org).