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 **BASICS**

IMPROVING CHILD HEALTH IN NIGERIA

BASICS III

INTRODUCTION

Beginning in 2006, USAID/BASICS participated in USAID's Gender Informed Nutrition and Agriculture (GINA) project in Nigeria. USAID/BASICS provided technical assistance and oversight for nutrition activities in villages of Nassarawa and Akwa-Ibom states.

During the project period, USAID/BASICS implemented interventions to reduce infant and child malnutrition through improved:

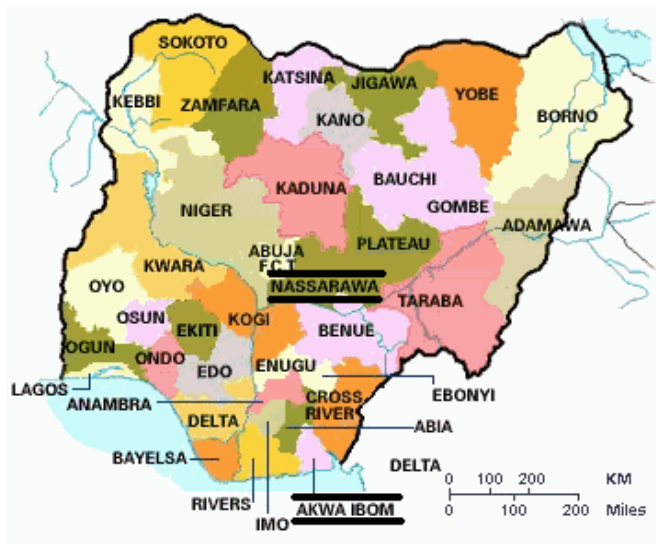
1. infant and young child feeding practices,
2. better use of household food resources to maximize nutritional benefit, and
3. linkages with health services.

The core nutritional activities were:

1. growth monitoring and promotion (GMP) as a preventive initiative to promote optimal growth, and
2. PD/Hearth (Positive Deviance/Hearth) as a rehabilitative initiative to restore malnourished infants and children to proper nutrition status and to introduce better feeding practices and food choices for the community.

These activities aimed to contribute to GINA's overall project objective of achieving a 10 percent reduction in malnutrition among under-5 children.

The activities were accomplished through technical support from USAID/BASICS and through the direct activities of "Nutrition Promoters" posted in Nassarawa and Akwa-Ibom states. In partnership with Food Basket Foundation International, which managed field activities, and in collaboration with the USAID-supported COMPASS project, USAID/BASICS integrated GINA activities with other development, agriculture, nutrition, and health activities in the intervention area.



Contributing to USAID's Gender Informed Nutrition and Agriculture project, USAID/BASICS collaborated with Food Basket Foundation International to provide technical assistance and oversight for nutrition activities in selected villages of Nassarawa and Akwa-Ibom states

In addition to its nutrition work, USAID/BASICS was also a member of the World Bank-led design team for the Nigeria Malaria Boost Program, providing expertise for the design of components to improve patent medicine vendor practices for treatment of malaria in children. BASICS' expertise was used to develop and standardize approaches, materials, and follow-up supervision for the malaria program.

ACTIVITIES AND RESULTS

Nutrition

Baseline survey

Working in six communities within the two intervention states, USAID/BASICS and Food Basket Foundation International conducted a baseline survey to assess nutritional status and factors related to it—(1) infant and young child feeding practices and (2) food choice.

The survey revealed that the prevalence of underweight children was 16% across communities. In Nassarawa state, feeding practices during illness and recovery were suboptimal, with most mothers reducing the amount of fluid and food offered during illness. Morbidity was also high, with the majority of children in the sample experiencing three or more symptoms of illness in the 14 days previous to the survey. Though sanitary conditions of the household and toilet facilities were better in Akwa-Ibom than those reported in Nassarawa, many households received at least some of their

water from unprotected water sources. Treatment of water by boiling was more common in Akwa-Ibom than Nassarawa.

Breastfeeding was universal but exclusive breastfeeding early in infancy was rare. Plain water was given to most infants within three days of birth as well as most children in the 24 hours preceding the survey. Complimentary feeding with fruits and vegetables high in vitamins occurred in less than 30% of cases. A greater proportion of children over six months old received food high in protein compared to Nassarawa.

Click [here](#) to download the baseline survey (unpublished).

Click [here](#) to download the data collection tool used for the baseline survey.

Growth monitoring and promotion

USAID/BASICS assisted in training 44 community volunteers in basic nutrition and other patient interaction skills, such as weighing babies and counseling mothers. It then developed and printed recordkeeping, reporting and communications materials.

Click [here](#) to download the USAID GINA-Nigeria Growth Monitoring and Promotion Training Curriculum

Click [here](#) to download the Growth Monitoring and Promotion Center Register Book

See the chart at the close of this chapter for a list of (and links to) 6 communications tools.

The impact of the growth monitoring and promotion interventions was significant, as noted in detail in Table 1. This conclusion is based on data collected from May to July 2007 to gauge the impact of activities.

Table 1: Impact of Growth Monitoring and Promotion in Two States

	Nassarawa State	Akwa-Ibom State
<i>Nutritional Surveillance</i>	In June, 11.1% of children were moderately/severely underweight, an increase of 2 percentage points over May. Severe underweight prevalence increased from none in May to 1.7% in June. In July, overall underweight prevalence fell to 7.4%, reflecting a nearly 4 percentage point drop in moderate underweight with essentially no change in the prevalence of severe underweight. In August, only 2.4% of the children weighed were underweight.	In June, 19% of children weighed were moderately/severely underweight, roughly a 4% increase over the previous month, with nearly all the increase seen in the percentage of moderately malnourished children. In July moderate/severe underweight increased 10% over the June figures. Due to implementation difficulties, GMP was conducted in only one of the 3 communities during August.
<i>Growth Promotion</i>	Of those children for whom a growth trend could be measured in June (<i>i.e.</i> , children with 2 consecutive weighings), only 7.0% had a positive slope in their growth curve. The percentage with a positive slope increased to 13.5% in July, and to 30% in August. Most of the increase in percentage with a positive growth trend was seen from a decrease in children with “flat” growth curves, with the percentage losing weight (negative slope growth curve) remaining essentially constant except for a small reduction in August.	In June, 11.4% of children for whom a growth trend was available showed a positive growth curve, and 25% showed negative growth. While the percentage of children with positive growth was roughly the same in July, the percentage with negative growth fell by 11%.

A key objective in USAID/BASICS’ nutrition intervention in Nigeria was developing an action plan for integrating and linking GINA components into preexisting local health centers, local government agriculture departments, agri-business institutions, USAID projects, and the projects and activities of other donors. The integration with agriculture was straightforward since GINA also had a food production component, including new crop introduction and provision of irrigation. But integration with health was not as effective because the project created a parallel system rather than integrating with the existing systems and interacting with the formal health system. An indication of this issue was that in Nassarawa state an average of five children were referred to health service facilities from GMP each month due to identified illness. In Akwa-Ibom state, 28 children were referred to health services in June 2007, but this figure decreased to 12 referrals by July.

PD/Hearth

To support PD/Hearth¹, USAID/BASICS trained volunteers to conduct Positive Deviance Inquiries, did the inquiries in three communities, and developed Hearth curricula and menus. Food Basket Foundation International was a partner in this activity.

The results of the Positive Deviance Inquiries produced various positive deviant menus that can be used in the Hearth sessions, and were accompanied by a market survey to identify available and affordable ingredients to be used in the Hearth meals. The results were also useful for identifying key behaviors that appear to lead to better health and nutrition among children, including: practicing early and exclusive breastfeeding; give children a variety of available and affordable nutritious foods, and supervising feeding; initiating gradually increasing complementary feeding at six months; actively caring for children, including important roles for fathers and grandmothers; and ensuring good preventive and care-seeking practices in the home.

The data from the follow-up survey showed that 133 caregiver-child pairs participated in PD/Hearth sessions in Nassarawa state in June 2007, and the enrolled children showed an average weight gain of 416g over the course of the Hearth sessions. In July, 143 caregiver-child pairs participated and average weight gain was 387g for these sessions. In Akwa-Ibom state, USAID/BASICS' implementation partner experienced difficulties in conducting PD/Hearth because caregivers were reluctant to contribute the essential "positive deviance foods." A lack of initial advocacy was the apparent reason for this difficulty.

Transition

The GINA program continues its nutrition work in several countries of West Africa and, PD/Hearth training continues to expand to other communities. The Food Basket Foundation and the COMPASS project are the partners in these activities.

¹ A PD/Hearth intervention begins by identifying well-nourished children and seeking to identify what are the good the feeding practices of mothers and families who have well-nourished children factors. These are identified through discussions, or a positive deviance inquiry, with community members. A hearth is subsequently established as a venue where trained volunteers assist parents in preparing meals and snacks for their malnourished children, using the beneficial, locally-available foods that were identified through the positive deviance inquiry. Two-week participation in a hearth is common, and often contributes to rapid improvement in nutritional status for children, as well as resulting in better long-term feeding practices by parents at home.

Malaria

USAID/BASICS participated in the World Bank-led design team for the Nigeria Malaria Boost Program, providing expertise for the design of components to improve medicine vendor practices for treatment of malaria in children. USAID/BASICS helped in developing the standardized approaches, necessary training materials, and follow-up monitoring through supervision.

Click on the titles below to access reports and other materials developed during USAID/BASICS' Nigeria country program.

Title	Type	Description	Technical Focus Area(s)	Key items of importance in this document include...
Baseline survey of nutritional status in six communities in Nasarawa and Akwa-Ibom states	Baseline survey	Baseline survey of nutritional status in six communities in Nasarawa and Akwa-Ibom states	<ul style="list-style-type: none"> ▪ Nutrition 	
Survey tool for the baseline survey of nutritional status in six communities in Nasarawa and Akwa-Ibom states	Survey tool	Survey tool for the baseline survey of nutritional status in six communities in Nasarawa and Akwa-Ibom states	<ul style="list-style-type: none"> ▪ Nutrition 	
Positioning and attachment for successful breast feeding.	Communication tool	Tool showing correct positioning of a child for breastfeeding, as well as proper attachment to the nipple.	<ul style="list-style-type: none"> ▪ Nutrition 	
Breastfeeding example	Communication tool	Image of a woman breastfeeding to stress breast feeding over bottle feeding.	<ul style="list-style-type: none"> ▪ Nutrition 	
Breastfeeding problems	Communication tool	Tool summarizing common problems and remedies related to breastfeeding, including sore nipples, engorgement, and feeding twins.	<ul style="list-style-type: none"> ▪ Nutrition 	
Child Feeding Amounts by Age Hausa-language version Ibibio-language version	Communication tool	Tool showing appropriate meal amounts and frequency for complementary feeding of children based on age, including: 6-8 months, 9-11 months, and 12-24 months.	<ul style="list-style-type: none"> ▪ Nutrition 	
Exclusive breastfeeding	Communication tool	Promotional message on the benefits of breastfeeding.	<ul style="list-style-type: none"> ▪ Nutrition 	
Feeding plan	Communication tool	Detailed instructions for feeding infants and children under 2 years of age at different stages.	<ul style="list-style-type: none"> ▪ Nutrition 	

Title	Type	Description	Technical Focus Area(s)	Key items of importance in this document include...
Nigeria Technical Assistance on the Positive Deviance Approach/Hearth Model in Nigeria	Trip report	Trip report summarizing the results of training provided to volunteers to conduct Positive Deviance Inquiries, supervision of three Positive Deviance Inquiries, and training of community resource persons to conduct Hearth sessions.	<ul style="list-style-type: none"> ▪ Nutrition 	<ul style="list-style-type: none"> ▪ Semi-structured interview of caregivers during home visits for Positive Deviance Inquiries. (pg. 14) ▪ Observation checklist for Positive Deviance Inquiries. (pg. 16)
USAID GINA-Nigeria Growth Monitoring and Promotion Training Curriculum	Training curriculum	Outline for session content and timing for training in growth monitoring and promotion.	<ul style="list-style-type: none"> ▪ Nutrition 	
Growth Monitoring and Promotion Center Register Book	Management tool	Recording keeping tool for children enrolled in growth monitoring and promotion programs.	<ul style="list-style-type: none"> ▪ Nutrition 	