



DELTA STATE

STRATEGIC PLAN OF ACTION

ON NUTRITION

(SSPAN)



STATE COMMITTEE ON FOOD AND NUTRITION (SCFN)
MINISTRY OF ECONOMIC PLANNING
ASABA, DELTA STATE

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FORWARD

The Delta State Strategic Plan of Action on Nutrition (SSPAN) was developed at the instance of the Federal Government as a tool for the effective implementation of the State Policy on Food and Nutrition to achieve its stated goals and objectives.

The Delta State Policy on Food and Nutrition has been developed and approved. The SSPAN, a 4-Year Strategic document with selected activities was developed to accelerate nutrition intervention in the State. The strategy for implementation of the SSPAN is a multisectoral approach which involved relevant nutrition stakeholders like Health, Agriculture, Women Affairs and Education.

The importance of Advocacy and Coordination cannot be overemphasized; hence the Ministry of Economic Planning the Coordinating Ministry and the Ministry of Information are the key Stakeholders of the Plan.

Nutrition is principally regarded as the process by which living things eat food necessary for growth and healthiness. Lack of or non-availability or access to nutritious food is therefore the cause of malnutrition - a negative condition with its resultant effect of infant mortality, lack of productivity and economic underdevelopment on the long run.

It is hoped that the full implementation of the activities in the Plan over the 4 years would in no small measure reduce food insecurity and improve the nutritional status of the populace.

The efforts of our partners (particularly UNICEF) in the development of this document is highly appreciated.



Kingsley Emu

Honourable Commissioner

Ministry of Economic Planning

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Our sincere thanks also go to Dr. Owolabi (UNICEF Specialist, Abuja) and Dr. Chris Isukpunwan, Head, Nutrition, FMOH Abuja, the resource persons that facilitated the development of the Plan.

Our heartfelt thanks also go to the Wife of the Governor and Nutrition Champion of Delta State, Dame Edith Okowa for her efforts towards fighting malnutrition in the State - an overall goal which the SSPAN seeks to achieve.

Lady Patience Ogbewe

Director Overseas Development Assistance

Ministry of Economic Planning

Asaba

Delta State

2018

ACRONYMS

ACF	Appropriate Complementary Food
AIDS	Acquired Immune Deficiency Syndrome
AR+V	Anti-Retroviral
ATA	Agricultural Transformation Agenda
BCC	Behavioural Change Communication
BMS	Breast Milk Substitutes
BMS	Breast Milk Substitute
CAADP	Comprehensive African Agriculture Development Programme
CBNRMP	Community Based Natural Resources Management Programme
CBOs	Community Based Organizations
CMAM	Community Management of Acute Malnutrition
CMAM	Community Management of Acute Malnutrition
COLNISA	Community Level Nutrition Information System for Action
CSOs	Civil Society Organizations
DD	Dietary Diversification
DFID	Department for International Development
DHS	Demographic and Health survey
DMCP	Delta State Micro Credit Programme
DPRS	Department Planning Research and Statistics
EBF	Exclusive Breastfeeding
ENA	Essential Nutrition Actions
FAO	Food and Agriculture Organization
FBOs	Faith Based Organization
FMOH	Federal Ministry of Health
FSP	Farmers Support Programme
GDP	Gross Domestic Product
GES	Growth Enhancement Scheme
HIV	Human Immunodeficiency Virus
IDA	Iron Deficiency Anaemia
IDD	Iodine Deficiency Disorders
IFNIS	Integrated Food and Nutrition Information System
IFPRI	International Food Policy Research Institute
IMAM	Integrated Management of Acute Malnutrition
IMNCH	Integrated Maternal, Newborn and Child Health
ITP	In-Patient Therapeutic Program
IYCF	Infant and Young Child Feeding
LBNS	Liquid Based Nutrient Supplements
LBNS	Liquid Based Nutrient supplement
LGA	Local Government Area
LGC	Local Government Council
LGCFN	Local Government Committee on Food and Nutrition
LOAF	Live and Own a Farm
LO-ORS	Low Osmolarity Oral Rehydration Solution

M&E	Monitoring and Evaluation
MANR	Ministry of Agriculture and Natural Resources
MDAs	Ministries, Departments and Agencies
MEP	Ministry of Economic Planning
MICS	Multi Indicator Cluster Survey
MNCH	Maternal, Newborn and Child Health
MNDC	Micro Nutrient Deficiency Control
MNDDs	Micro Nutrient Deficiency Disorders
NFCNS	Nigeria Food Consumption and Nutrition Survey
NFP	Nutrition Focal Person
NFSP	National Food Security Programme
NGOs	Non- Governmental Organizations
NNC	National Nutrition Council
NNN	Nigeria Nutrition Networking
NPC	National Planning Commission
NPFS	National Programme on Food Security
NSHDP	National Strategic Health Development Plan
ODA	Overseas Development Assistance
OTP	Out-Patient Therapeutic Program
OVC	Orphan and Vulnerable Children
PATH	Programme for Appropriate Technology in Health
PLWHA	People Living with HIV/AIDS
PPP	Public Private Partnership
RRA	Rapid Rural Appraisal
RTEP	Root and Tuber Expansion Programme
RUTF	Ready to Use Therapeutic Food
RUWATSA	Rural Urban Water Sanitation Agency
SAM	Severe Acute Malnutrition
SBCC	Social and Behavioural Change Communication
SBMC	School Base Management Committee
SC	Save the Children
SCFN	State Committee on Food and Nutrition
SDG	Sustainable Development Goals
SFP	School Feeding Programme
SMART	Standardized Monitoring Assessment of Relief and Transition
SMEs	Small and Medium Enterprises
SNO	State Nutrition Officer
SUN	Scaling Up Nutrition
SSPAN	Delta State Specific Plan of Action on Nutrition
UN	United Nations
UNICEF	United Nations Children's Fund
USI	Universal Salt Iodization
VAD	Vitamin A Deficiency
WHO	World Health Organization
YETA	Youth Empowerment Through Agriculture
YFC	Young Farmers Club

CHAPTER 1

INTRODUCTION/BACKGROUND

Malnutrition and nutrition related non-communicable diseases have continued to be of public health concern in Nigeria. Malnutrition usually manifests as a result of under nutrition, over nutrition, and Micro-Nutrient Deficiency Disorders (MNDDs). It also manifests in children as stunting, wasting and underweight which may be due to inadequate intake of macro and micro nutrients such as Vitamin A, iodine, zinc, and folic acid. Under nutrition among under-five children in Delta state has shown a significant improvement based on surveys data (MICS 2011 and SMART 2014), stunting rate reduced from 21.9% to 12.2%, wasting from 10.3% to 9% and underweight from 15.7% to 4.6% respectively.

Agriculture is the major factor in achieving food security and improved nutrition; Prior to the 70s, Agriculture occupied a prime position in the economy of the then Bendel State. However, with the advent of the oil boom, the focus of the State shifted from Agriculture to oil exploration. Consequent upon this, the contribution of Agriculture to the Gross Domestic Product (GDP) drastically declined. Despite the numerous resources available for agricultural development in the State however, its practice is limited by low level of Agricultural technology. Over 90% of the farming population is small scale farmers due to high cost of opening the thick rainforest and mangrove swamp ecology.

The current policy direction of Delta beyond oil and the present decline in crude oil revenue has increased the focus on agricultural development within the state with the view to returning it as the main stay of her economy thereby contributing to efforts towards improved food security. The youth are being encouraged into agriculture through programmes such as Delta State Micro Credit Programme (DMCP), YETA, and various Agricultural loan packages to enable them venture into commercial farming. The government has embarked on the campaign for Public-Private Partnership (PPP) and is also involved in some notable agricultural programmes in collaboration with development partners.

Realizing the importance of developing a State Policy on Food and Nutrition to provide a framework for effective implementation and domestication of food and nutrition issues within the State, an eight member sub-committee for policy formulation from the State SCFN was constituted and inaugurated in February, 2015 who came up with the current Policy.

The Delta State Policy on Food and Nutrition aims to provide an operational framework to guide decisions in addressing the problems of food and nutrition insecurity amongst all Deltans for healthy growth and development. The Policy reflects the general policy direction of the Federal Government but focuses on context-specific productive potentials and comparative advantages crucial to develop the State Food and Nutrition status. It defines strategies for programmes and projects in relation with the peculiarity and nature of Food and Nutrition within

the State jurisdiction. It also recognizes the fact that Food and Nutrition issues are multi-sectoral and adopts an integrated approach of all relevant sectors and disciplines in the identification, planning and implementation of all activities. The sectors cut across Health, Agriculture, Education, Commerce and Industry, Science and Technology, Information, Finance, Economic Planning, Water Resources etc.

The State Committee on Food and Nutrition (SCFN) with the secretariat in ODA department, Ministry of Economic Planning is responsible for the Policy implementation and has so far initiated and implemented many projects across the various sectors in the State while also reactivating existing moribund projects.

The primary objective of the Delta State Specific Plan of Action on Nutrition (SSPAN), 2018 - 2021 is to translate the goals, objectives, and strategies articulated in the Delta State Policy on Food and Nutrition into implementable, time bound activities and projects. This will be achieved in the context of implementing projects and activities that will improve the nutritional status of all Deltans with particular emphasis on the most vulnerable groups (children, women, and the elderly) which are the focus of the SCFN's programmes. The Plan was developed and harmonised in close collaboration with all sectoral implementing partners bearing in mind the specific areas requiring urgent attention across sectors. It has undergone vigorous scrutiny and will be adopted to guide implementation of the SCFN's activities from 2018 – 2021.

The Plan identifies Interventions, Strategy of Interventions, Activities, Objectives, Target Population, Delivery Platform, Current Coverage/Baseline, Expected Outcome, indicators, Timelines, Budget, Responsible MDAS and Collaborators.

CHAPTER 2

GOALS, OBJECTIVES, TARGETS AND STRATEGIES OF THE POLICY AND THE DELTA STATE STRATEGIC PLAN OF ACTION ON NUTRITION

2.1 GOAL OF THE POLICY

To attain optimal nutritional status for all Deltans, with particular emphasis on the most vulnerable groups such as children, adolescence, women, elderly and groups with special nutritional needs.

2.2 BROAD OBJECTIVES

To achieve the goal of attaining an optimal nutritional status by the year 2023.

2.3 SPECIFIC OBJECTIVES

- i. Ensuring Food and Nutrition Security at the State, Local Government, Community, and Household levels.
- ii. Reduce under-nutrition among infants and children, adolescent and women of reproductive age.
- iii. Effectively reduce MNDDs especially among the vulnerable groups.
- iv. Improving capacity to address food and nutrition security problems.
- v. To promote optimal nutrition for people in especially difficult circumstances.
- vi. To prevent and control chronic nutrition related non-communicable diseases.
- vii. To encourage the State and Local Government to incorporate food and nutrition issues into their sectional development plans and annual budgets.
- viii. To improve on the systems for providing early warning information on food and nutrition situation.
- ix. To ensure universal access to nutrition-sensitive social protection.
- x. To provide an integrated food and nutrition information system that will also strengthen M & E.
- xi. To ensure adequate funding for food and nutrition projects/programme in the State and LGA.
- xii. To ensure effective M&E of food and nutrition programmes and projects.

2.4 TARGETS

- i. Reduce the proportion of people who suffer hunger and malnutrition by 50% by 2023.
- ii. Increase exclusive breastfeeding rate from 25.2% to 58% by 2023.
- iii. Increase the percentage of children aged six months and above who receive

- Appropriate Complementary Feeding (ACF) by 50% by 2023.
- iv. Reduce stunting rate among under-five children from 16.3 to 12% by 2023.
 - v. Achieve universal household access to iodized salt by 2023.
 - vi. Increase coverage of Vitamin A Supplementation (VAS) to 90% from 63.5% by 2023.
 - vii. Implement Zinc supplementation programme in diarrhea management in all health facilities in the state by 2023.
 - viii. Increase iron-folate supplementation coverage of pregnant women by 50% of the current levels by the year 2023 and Reduction in anaemia among pregnant women from 67% in 2003 to 23% in 2023.
 - ix. Increase access to potable water from 49% to 80% by 2023.
 - x. To establish 200 (Eight per LGA) OTP sites by 2023.
 - xi. Increase the proportion of children who receive de-worming tablets from 36.3% to 55% by 2023.
 - xii. Reduce prevalence of diet-related non-communicable diseases by 20% by 2023.
 - xiii. Increase the number of relevant MDAs with functional nutrition unit by 75% by 2023.
 - xiv. Reduce the incidence of malnutrition among victims of emergencies to less than 5% by 2023.
 - xv. Reduce child wasting by 50% before 2023.
 - xvi. Increase by 50% household with relevant nutritional knowledge that improves their nutritional status by 2023.
 - xvii. Mainstream nutrition objectives into social protection and safely net programmes of all MDAs linked to nutrition by 2020.
 - xviii. Achieve universal access of all school children in the pre-and basic school classes to school-based feeding programmes by 2023.

2.5 STRATEGIES

The strategies are aimed at achieving the Policy objective. These strategies will employ interventions and approaches that are nutrition-specific, nutrition-sensitive and nutrition-enhancing agriculture and food systems that are geared towards sustaining this Policy.

2.6 GOALS OF THE DELTA STATE STRATEGIC PLAN OF ACTION ON NUTRITION

The goals of the Delta State Strategic Plan of Action on Nutrition is to initiate new programme focus, integrate and coordinate effectively all food and nutrition programmes of all sectors in the State. It is also geared towards promoting a State nutrition agenda that will recognise and respond effectively to the identified specific needs in accordance with the State Policy on Food and Nutrition in Delta

State and the National Food and Nutrition Policy. Furthermore, it is targeted at increasing the entrepreneurial skills of women to increase their income base livelihoods of their families.

2.7 GENERAL AND SPECIFIC OBJECTIVES OF THE DELTA STATE SPECIFIC PLAN OF ACTION ON NUTRITION

These are laid out in the detailed workplan. They include:

- I. To improve capacity to address food and nutrition security and problems.
- ii. To facilitate management to buying the idea of incorporating F&N issues in Ministry's Budget.
- iii. Increase awareness on adequate diet and improve understanding of the importance of micro-nutrients.
- iv. To promote healthy eating habits amongst rural household families.
- v. To improve dietary diversification and nutrients fortification through consumption of fresh vegetables and fruits
- vi. To enable farmers put the knowledge acquired on the use of Pro Vitamin A/Beta Carotene variety of cassava to use.
- vii. To increase awareness on the availability of the cassava variety in the State and improve harvesting, processing and package/techniques.
- viii. To ensure that essential micronutrients are preserved during processing in value chain.
- ix. To ensure healthy food intake for the elderly
- x. To ensure that all trained food handlers maintain high level of hygiene.
- xi. To enhance health status of pupils in schools and equip caregivers with firsthand knowledge on how to prepare infant food
- xii. To strengthen and coordinate food and nutrition issues in the various communities
- xiii. To showcase the achievement of SCFN programme and leverage more opportunities and better partnership
- xiv. To create awareness on adequate nutrition and educate a sizeable population on the need for adequate nutrition in the State.
- xv. To promote eating habits to reduce the incidence of non-communicable disease such as diabetes, tension
- xvi. To promote Social and Behavioural Change Community (SBCC) to encourage appropriate community based nutrition programmes
- xvii. To improve personal hygiene and safe water management in school & communities
- xviii. To encourage Communities to stop Open Defecation and educate Community members on the need for safe excreta disposal
- xix. To promote provision of safe potable water in rural communities and provide water source for sanitation facilities

- xx. To reduce malnutrition in Delta State by developing the brain of children in Delta State with enriched food and ensuring that milk substitute is made available for children at an affordable rate
- xxi. To train at least 500 women in 9 LGAs from 3 Senatorial District in the State to become self-reliant
- xxii. To sensitize and ensure that adequate budgetary provision is proposed for nutrition activities and sensitize on the need for adequate appropriation for nutrition
- xxiii. To appraise and review nutrition activities and programmes in the State, appraise nutrition gaps and devise ways of closing the gaps
- xxiv. To map out strategy/review existing policies on nutrition in the State with a view to harnessing high impact
- xxv. To equip teachers and care givers with skills and knowledge needed for better service delivery.
- xxvi. To promote exclusive breastfeeding for working nursing mothers
- xxvii. To conduct a baseline assessment and regular monitoring of child nutrition status using standard OVC tools and data analysis for case management, program, planning and evaluation
- xxviii. To build and sustain the capacity of agric teachers, and students in maintaining a healthy farms and improved Nutrition and Food Programs in schools
- xxix. To promote and strengthen nutrition education for pupils and students through peer and multi-media communication approach
- xxx. To train, enhance and sustain the service delivery of Care Givers in all ECCD Centres in the State
- xxxi. To ensure that all cases of severe acute malnutrition are properly managed and reduce infant mortality
- xxxii. To ensure that all PHCs are in compliance with implementation of the Global Policy on IYCF and thus reduce infant mortality
- xxxiii. To improve the current low breastfeeding rate in the State
- xxxiv. To reduce micronutrient deficiency among U5 children as well as anaemia among pregnant women.

2.8 STRATEGIES OF INTERVENTION OF THE SSPAN

The strategies to be used in achieving the above objectives are multipronged and cut across the following

- i. Improved Coordination
- ii. Capacity building
- iii. Establishment of Homestead Gardens
- iv. Input Mobilisation and Extension Service Delivery
- v. Improved monitoring and evaluation

- vi. Demonstration and practicals
- vii. Study Tour
- viii. Advocacy
- ix. Resource Mobilization
- x. Sensitization
- xi. Behaviour Change Communication (BCC)
- xii. Awareness and publicity/Public enlightenment
- xiii. Feedback Mechanisms
- xiv. Procurement of hand washing facilities
- xv. Training and facilitation
- xvi. Register Cooperative Societies
- xvii. Establishment of a cottage industries
- xviii. Research
- xix. Quiz and Debate Competitions in schools
- xx. Training and inter-personal counselling for change agents.

DELTA STATE STRATEGIC PLAN OF ACTION ON NUTRITION (SSPAN) 2018 - 2021

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/ BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS
										2018	2019	2020	2021			
1	Sensitization of 20 Agricultural Officers on the need to mainstream Food and Nutrition activities into their Budget Plan	Capacity building	Conduct a 2-day Training & Sensitization Workshop for 20 Desk officers/ Assistants on the need to include F&N issues in Budgeting for Fisheries, livestock, crops, extension and veterinary services, FADAMA III & IFAD projects.	(i) To improve capacity to address F&N security and problems. (ii) To facilitate management to buying the idea of incorporating F&N issues in Ministry's Budget.	20 Agricultural/ Desk Officers on budget issues	Community Training Hall Residential	Low	(i) Inclusion of F&N activities into MANR budget. (ii) Capacity on F&N issues built.	Successful inclusion of F&N related issues into budget	2m	2m	2m	2m	8m	MANR	ODA/ SCFN
2	Sensitization of 250 Women Farmer Multipurpose Cooperative Societies (10 each i.e 2500 Female Farmers) on Dietary Diversification	Capacity Building Gender Specific	Conduct a 3-day workshop for each of the 3 Senatorial District. Delta North - 900 Delta Central - 800 Delta South - 800 Provision of improved vegetable seeds and fruit seedling. Provision of farming tools	Increase awareness on adequate diet. Good understanding of the importance of micro-nutrients. Promote healthy eating habits amongst rural household families.	2,500 women farmers in Cooperative Societies	Community halls at Senatorial District levels	Low	Improved eating habits. Introduction of new recipes with quality and sufficient micro nutrients. Training of 2,500 women per year for 3 years that is 7,500 household family.	Mothers are well informed on adequate diet	9m	9m	9m	9m	36m	MANR	MOH, PHC, LGA, Commerce

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS
										2018	2019	2020	2021			
3	Establishment of vegetable gardens for 2,500 trained women cooperatives beneficiaries	Establishment of Homestead Garden Planting of fruit trees in and around compounds including the introduction of vegetables that are gradually going into extinct. Gender specific. M&E	Provision of improved vegetable seeds and tree fruit seedlings from certified distributor. Introduction and Provision of some extinct vegetable seeds. Establishment of vegetable gardens and planting of fruits such as pawpaw, orange, cherry, guava, coconut etc in compounds.	Dietary diversification and nutrition fortification through consumption of fresh vegetables and fruits.	The trained 2,500 women farmers in cooperatives.	Community based homestead.	Low	Cheap and quick access to vegetables and fruits. Access to cheap and delicious diet. Food complement with fruits and vegetables for essentials and vitamins.	Healthy mothers and children.	3m	3m	3m	3m	12m	MANR	ODA
4	Provision of 480 Bundles of Pro Vitamin A/Beta Carotene Cassava and other inputs to the remaining 16 farmers out of the 25 trained cassava farmers in March 2015.	Input Mobilisation Extension Service Delivery. M&E	Tractorization of beneficiaries' land. Purchase and distribution of cassava cutting and other inputs to trained farmers. Supervision of farm sites.	To enable farmers put the knowledge acquired on the use of Pro Vitamin A/Beta Carotene variety of cassava to use. To increase awareness on the availability of the cassava variety in the State.	Remaining 16 out of 25 trained cassava farmers	Local Govt. Areas	Medium	Increase awareness on the Pro Vitamin A cassava. Reduction in the effect of Vitamin deficiency.	Increased availability of improved Pro Vitamin A/Beta Carotene cassava in the State.	6m				6m	MANR	ODA

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/ BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS
										2018	2019	2020	2021			
5	Inclusive Value Chain Addition on cassava, oil palm and plantain processing techniques for 60 female farmers in 6 women farmers multipurpose cooperative societies.	Capacity Building Demonstration Practicals Study Tour	A 3-Day Residential Training workshop. Practical demonstration of processing Visitation to small food processing industries in the State. Study Tour on day 3.	To improve crops harvesting, processing and package/ techniques To ensure that essential micronutrients are preserved during processing in value chain.	60 female farmers	Community Town Hall Residential	Low	Women empowerment on value chain addition (processing, packaging and storage). Increase income and livelihood of women and families	Percentage increase in income and improved lifestyle	3m	3m	3m	3m	12m	MANR	ODA
6	Health and nutritional needs for the elderly	Capacity building Advocacy Resource Mobilization	Sensitization seminar on health and nutritional needs for the elderly	To ensure healthy food intake for the elderly	Elderly (60 years and above)	Health facilities Communities and town halls	Nil	Improved health and nutritional status for the elderly	A proportion of 5,000 elderly participants were trained	1m	1m	1m	2m	MOH	PHC, MBSE, MOI, LGA	
7	PPE materials for all trained food handlers	Advocacy Resource Mobilisation	Designing and provision of PPE materials to all trained food handlers	To ensure that all trained food handlers maintain high level of hygiene.	Food handlers in schools	Schools	Nil	Hygienically kitted food handlers during food preparations	1,800 complete set of PPE materials were distributed to all trained food handlers	1m	1m	1m	2m	MOH	PHC, MBSE, MOI, LGA	
8	School Health Programme	Sensitization and Coordination	Strengthening the existing School Health Programme	Enhancement of health status of pupils in schools	School Children	Public Schools and Communities Town halls	Nil	Improved health status of our children	40 schools visited	1.2m	1.2m	1.2m	2.4m	MOH	PHC, MBSE, MOI, LGA	

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/ BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS
										2018	2019	2020	2021			
9	Nutritional guidelines for Infant and Young Children	Sensitization Advocacy and Coordination	Production of evidence based nutritional guidelines for infant and young children	To equip caregivers with first hand knowledge on how to prepare infant food	School children	Health centre and Communities Town halls	Nil	Availability of the guideline booklet in all health centres (445) in the State	445 nutritional guidelines produced and distributed to all the health centres	1m		1m		2m	MOH	PHC, MBSE, MOI, LGA
10	Coordination of nutritional issues in 80 communities in 6 LGAs	Behaviour Change Communication (BCC)	Community dialogue sessions with women, nursing mothers and the elderly in 80 communities in the focused LGAs	To strengthen and coordinate food and nutrition issues in the various communities	Women of child bearing age, pregnant women, nursing mothers and the elderly	A-day interactive session with women of child bearing age, pregnant women, nursing mothers and the elderly.		Increased knowledge on IYCF practices among women. Women and the elderly are properly informed on food and nutrition issues. Women and the elderly are armed with appropriate information to educate others.	Women, youth and children oriented groups participating in community platforms. (dialogues, community volunteers, local food and nutrition and nutrition committees, community information boards management	7m	7m	7m	7m	28m	MOI	NOA, PHC, ADP, ODA

DELTA STATE STRATEGIC PLAN OF ACTION ON NUTRITION (SSPAN)

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/ BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS
										2018	2019	2020	2021			
11	Production of SCFN journal and news letter.	Awareness and publicity	1) Producing journal on the whole SCFN activities. 2) Producing newsletter on the whole SCFN activities	1) To showcase the achievement of SCFN programme 2) To leverage more opportunities and better partnership	Deltans and Nigerians	Annual production of SCFN journal and quarterly production of newsletter.		1) UNICEF and other development partners are adequately informed about the SCFN activities in Delta State. 2) Deltans and the nation at large are adequately informed about SCFN activities in the State	1) MDAs/ CSO's using C4D platforms 2) Community information boards	5m	5m	5m	5m	20m	MOI	NOA, SMOH, ODA
12	Nutrition information system	(i) Public enlightenment	Talk shows, production and airing of jingles on adequate nutrition.	To create awareness on adequate nutrition	Community/ religious leaders and the general public in the long run	Weekly airing of talks and jingles on TV and radio (DBS, DRTV, NTA and two independent stations)		To keep Deltans informed on the need for adequate nutrition	1) Information and Orientation officers in LGAs. 2) Ward/ community Mobilizers. 3. Functional Community radios	6m	6m	6m	6m	24m	MOI	NOA, SUPEB

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/ BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS
										2018	2019	2020	2021			
		(ii) Capacity building	Production of bill boards to be sited at strategic location around the State, IEC, (handbills, nutrition fact sheets	1) To educate a sizeable population on the need for adequate nutrition in the State. 2) Increase percentage of households with relevant nutrition knowledge & practices. 3) Promote eating habits to reduce the incidence of non-communicable disease such as diabetes, tension	Local Government Education Authorities Community Based Organisations and women societies	Presentation by multi-media group focused discussions, Theatre for Development (PTA) forum		To sensitize the relevant authorities on the need to mind the diet for each developmental stage	a) Schools head in focus communities b) 20 women societies	1.5m	1.5m	1.5m	1.5m	6m	MOI	NOA, SUPEB
13a	Need Assessment Communication	(i) Advocacy Resource Mobilization	Community dialogue on participatory approach for communities to access, analyse and take appropriate actions to address food and nutrition problems	Promote Social and Behavioural Change Community (SBCC) to encourage appropriate community based nutrition programmes	Traditional rulers, Community Spokes men	Presentation and discussion to authenticate past reports answers sessions Communicative development		Promotion and strengthen nutrition decisions as it concerns all age groups	CBO's and children oriented groups participating in communities	4m	4m	4m	4m	16m	NOA	MOI, ODA
13b	Need Assessment Communication	(ii) Feed back Mechanism	Strengthen tools for feedback mechanism			Quarterly coordination meetings to ensure compliance with tools developed		Improved styles especially on evaluation through monitoring	Behaviour addressed by communication plans	2m	2m	2m	2m	8m	NOA	MOI, ODA

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/ BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS
										2018	2019	2020	2021			
14	Personal Hygiene promotion in schools & communities	Advocacy/sensitization visits, Procurement of hand Washing facilities	Sensitization of 20 communities/schools in communal conflict on the practice of personal hygiene distribution of handwash facilities	To improve personal hygiene and safe water management in school & communities	Women and children	Community/school	2 LGAs (Ndokwa West/Isoko South)	20 school/communities sensitized. Schools equipped with facilities for improving personal hygiene.	More women & children to practice personal hygiene	567,500	567,500	567,500	567,500	2,270,000	RUWASA	SUBEB, MBSE, PHCDA
15	Community Led Total Sanitation (CLTS)	Training of facilitation (LGA) Triggering of communities	CLTS Training & facilitation & Triggering of communities	Communities to stop Open Defecation Community members to realize the need for safe excreta disposal	2 additional LGAs	Community/schools	2 LGAs (Ndokwa West/Isoko South)	8 LGA staff trained on CLTS & 2 LGAs Triggered on Open Defecation	Increase in number of CLTS facilitation & more HH construct & use Latrine	5m	5m	5m	20m	20m	RUWASA	LGA, MoI, MBSE
16	CLTS Monitoring	Follow up visits Hygiene talk & Messages	Monitoring CLTS in 2 LGAs	Stop OD, Sustain ODF status	2 additional LGAs	Community/schools	2 LGAs (Ndokwa West/Isoko South)	ODF status sustained in 8 LGAs	More HH climbing the sanitation ladder	1.5m	1.5m	1.5m	6m	6m	RUWASA	LGA,
17	Hand washing Campaigns	Global Hand washing Day (GHD) MNCHW	Hygiene Promotion talk Jingle, on TV, Posters, Handbills etc.	To promote personal hygiene	Women and school children	State Capital, LGA HQs communities/schools	2 LGAs (Ndokwa West/Isoko South)	Increased awareness on Hand washing	Increased number of persons washing hands at critical times	5m	5m	5m	20m	20m	RUWASA	MoWA, PHCDA, SUBEB, MoI
18	Provision of Sanitation facilities	3-Compartment pour flush latrines Handwashing facilities	Construction of 30 3-compartment pour flush latrine	Provide safe means of excreta disposal	2 LGAs	Community/school	2 LGAs (Ndokwa West/Isoko South)	30 3-compartment pour flush latrine constructed in 15 schools	Increase in number of school with access to good sanitation facilities	20m	20m	20m	80m	80m	RUWASA	LGA, MoI, MoH, MBSE

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/ BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS
										2018	2019	2020	2021			
19	Provision of Portable water	Borehole construction in school/ communities	HPBH construction	Provision of safe potable water in rural communities	100 Communities	Community/ school	2 LGAs (Ndokwa West/Isoko South)	100 communities provided with safe water source	At least 25,000 persons have access to safe water source	24m	24m	24m	24m	96m	RUWASA	LGA, MBSE, MoH
20	Provision of water source for sanitation facilities	Force lift Handpumps Borehole	Construction of 30 force lift HPBH in public places	To provide water source for sanitation facilities	2 LGAs	Community/s school	2 LGAs (Ndokwa West/Isoko South)	30 public places provided with water source	At least 7,500 persons have access to improved sanitation facilities	10m	10m	10m	10m	40m	RUWASA	MBSE, PHCDA, MWA, SUBEB
21	Strengthening the already established three cottage processing units for the production of enriched food for children between ages 6-59 months at Asaba, Ozoro and Sapele.	1) To increase production 2) To stabilize the processing centres 3) To make clean water available in the cottage unit.	A) To procure more machines. B) To employ more workers for the centres. C) To sink borehole in each of the processing centres. (D) To purchase a vehicle for the distribution of the product.	1) To reduce malnutrition in Delta State. 2) To develop the brain of children In Delta State with enriched food. 3) To ensure that milk substitute is made available for children at an affordable rate	1) Children from 6- 59 months 2) Pregnant women	All Primary Health Care Centres In All LGAs In the State	Low	1) Increase knowledge of dire need for nutrition 2) Increase and improve production		12m	7m			19m	MTI	MBSE, PHCDA, MWA, SUBEB

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS
										2018	2019	2020	2021			
22	Establishment of Women Cooperative Societies in 9 LGAs (3 LGAs per Senatorial District)	1) Capacity Building 2) Group women into different skills 3) Build the capacity of the women in their different skills of interest 4) Register the Cooperative Societies	1) Training of 180 women on income generating activities 2) Giving of grants to trained women for a take off	To train 180 women in 9 LGAs from 3 Senatorial District to become self reliant	1) Rural women 2) Unemployed women	Community based platforms	Low	1) The women will become productive, self reliant and be able to feed their wards and pay their school fees 2) The burden on aid agencies and other international aid donors will reduce		50m	50m			100m	MTI	MWA, ODA
23	Establishment of Enriched Food Cottage Processing Units for the production of enriched food for children between ages 6-59 months at Warri, Isiokolo and Agbor.	Establishment of a cottage industry in Warri, Isiokolo and Agbor.	Establishment of a cottage industry in Warri, Isiokolo and Agbor	1) To reduce malnutrition in Delta State 2) To ensure that enriched food products are made available for children at an affordable rate	1) Children from 6- 59 months 2) Pregnant women	All Primary Health Care Centres in All LGAs in the State	Very Low	More children have access to enriched food	% Decrease in malnutrition	30m	30m			60m	MTI	PHCDA, ODA

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/ BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS
										2018	2019	2020	2021			
24	Establishment of Women Cooperative Societies in the remaining 16 LGAs (3 LGAs per senatorial district)	1) To increase entrepreneurial skills of women 2) To increase their income base and help to improve their lives	1) Capacity building women into different skills, 2) Group women into different skills, 3) build the capacity of the women in their different skills of interest, 4) register the cooperative societies 5) Provision of grants	To train 360 women in 16 LGAs from 3 senatorial district	1) Rural women 2) Uneducated women	Community based platforms	Low	1) The women will become productive, self reliant and be able to their feed wards and pay their school fees, 2) The burden on aid agencies and other international aid donors will reduce	Less burden on aid agencies and other international donors	100m	100m			200m	MTI	MWA, ODA
25	Investing in Nutrition	Advocacy and Resource Mobilisation	i) Advocacy meeting with relevant MDAs to include Nutrition activities in their budget. ii) Advocacy Visit to State Budget Committee/ Accountant General	To sensitize and ensure that adequate budgetary provision is proposed for nutrition activities To sensitize and ensure adequate budgetary provision and release of funds for nutrition activities	10 relevant MDAs 25 members of Interministerial Budget Committee	Meetings with Heads of relevant MDAs Meetings at State Level	Low Low	Nutrition activities budgeted for in MDAs budget Adequate budgetary provision made for nutrition activities and release of funds secured	No. of MDAs that include Nutrition activities in their budget Amount budgeted for and amount released	2m	2m		4m	ODA	SCFN	
													2m	2m	ODA	SCFN

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS
										2018	2019	2020	2021			
			(iii) Advocacy visit to Chairman House Committee on Finance and Appropriation	To sensitize on the need for adequate appropriation for nutrition	10 members	Meetings at state level	Low	Nutrition activities appropriated for by the State House of Assembly	Amount appropriated for nutrition activities	0.5m				0.5m	ODA	SCFN
			(iv) Make requisition for Counterpart fund and ensure release	GCCCs are paid to attract more funds from donors		Memo to His Excellency	Low	GCCCs paid and more funds attracted for nutrition activities	Amount of GCCC paid and amount received from donors						ODA	SCFN
26	Nutrition Implementation Tracking	Research Monitoring and Evaluation	i) Conduct Nutrition and Health Status Survey in the State ii) Undertake capacity gap/skill analysis of those involved in food and nutrition programme and activities	To determine the nutrition and health baseline information in the State To determine the quantity and quality of Staff for nutrition activities in the State	Relevant MDAs Food and Nutrition Officers in MDAs	Field Work Observation	Low	Health and nutrition baseline data gathered and publicized for policy formulation No. and quality of Staff working on nutrition activities in the State established gap identified for manpower training	Published data on State nutritional Status Capacity Gap report	4m	4m	4m	4m	16m	ODA	SCFN
										3.5m	3.5m	3.5m	3.5m	14m	ODA	SCFN

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										2018	2019	2020	2021			
			iii) Quarterly tracking the release and proper utilization of funds by respective MDAs	To monitor the release and utilization of funds for nutrition activities	Food and Nutrition implementing MDAs	Quarterly Progress Reporting	Low	Fund utilization monitored	Prepared progress report on funds released and actual activities used for	2m	2m	2m	2m	8m	ODA	SCFN
27	Strengthening Coordination Mechanisms	Coordination	I) Hold quarterly Coordination meetings of SCFN	To appraise and review nutrition activities and programmes in the State	25 SCFN member	Meetings	Medium	Reviewed nutritional activities produced for implementation	Report of meetings	1.5m	1.5m	1.5m	1.5m	6m	ODA	ODA
			ii) Hosting of State Nutrition Stakeholders/ Partners' meetings	To appraise nutrition gaps and devise ways of closing the gaps	40 members made up NGOs, FBOs, CSOs, Devt. Partners, Private Sector, Govt. Personnel, SCFN member	Stakeholders' Nutrition forum	Low	Stakeholders' participation and sponsoring of nutrition activities		3m	3m	3m	3m	12m	ODA	UNICEF
			(iii) Hold thrice a year Strategy briefing sessions with the State Nutrition Champion and Nutrition icons	To map out strategy/review existing policies on nutrition in the State with a view to harnessing high impact	State Nutrition Champion on SCFN and development partners.	Nutrition strategy briefing sessions	Low	Adequate plan for implementation of Nutrition activities		1m	1m	1m	1m	4m	ODA	UNICEF

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										2018	2019	2020	2021			
28	Inter-School Competition	Quiz and Debate	iv) Strengthening coordination mechanism through the provision of relevant equipment (cameras, life jackets, safety boots, desktops, printers, internet renewal) especially for monitoring tools	To test pupils knowledge on food and nutrition issues	Public primary school pupils		Low			0.5m	0.5m	0.5m	0.5m	2m	SUBEB	MBSE, PHCDA, MWA, SUBEB
29	Capacity Building	Training	Training of Health Education Teachers on nutrition related topics to be mainstreamed in the curriculum	To build the capacities of Health Education teachers for effective delivery of nutrition related topics in health education	Health education teachers in primary schools		Low	Capacities of health education teachers built on effective delivery of nutrition related topics		4m	4m	4m	4m	16m	SUBEB	MBSE, MOH

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										2018	2019	2020	2021			
30	Monitoring and Evaluation	Monitoring and Evaluation	Monitoring and Evaluation	To ascertain the level of impact of the Federal government school feeding programme in the State.	Schools		Low	Level of project impact assessed.		2m	2m	2m	2m	8m	SUBEB, MBSE, LGA, ODA	
31	Capacity Building	4-day capacity building on promoting counselling support for organic farm practise among schools in Delta State	To build and sustain the capacity of agric teachers, Home Economics and students in maintaining a healthy farms and improved Nutrition on Food Program in School	60 Teachers and 360 students at different stages for selective schools yearly	Zero Based Support Activities in Schools	Establishment of School base Organic Farms in 15 (Fifteen selected School for sustainable Food & nutrition Programme in schools				9m	9m	9m	9m	36m	SUBEB, MANR	
32	Infant Feeding	Capacity building	Capacity Building of caregivers of child care institutions e.g. Govt. approved homes, children's homes on proper care and feeding of children	To equip caregivers with skills and knowledge needed for better service delivery.	Caregivers of the 27 Govt. approved orphanages and Crèches across the State	Across the State	Not available	54 caregivers trained	No. of caregivers whose capacity has been built in proper care and feeding of children. Improved nutritional status of the children	3m	3m	3m	3m	12m	MWACSD, ODA	

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										2018	2019	2020	2021			
33	Infant Feeding	Service delivery	Building and equipping of 3 Crèches in 3 local Govt. Secretariat	To promote exclusive breastfeeding for working nursing mother during	Nursing working mothers around the local Govt council Area.	1 crèche per Senatorial district	Not available	3 crèches are built and equip to provide for exclusive breastfeeding of child by working nursing mothers.	No. of crèches built and equipped	15m	15m	15m	15m	60m	MWACSD	ODA
34	Food security	Capacity Building	Empowerment of selected rural women/widows from the 25 LGAs	1) To strengthen and coordinate food and nutrition issues in the various communities. 2) Their economic base to be able to provide nourishing food for their wards	250 women including widows are empowered	Grant Aid of N10,000 each will be provided to start income generating activities in their area of interest	10 women per L.G.A, making 250 women	250 women across the 25 LGAs of the State are able to provide balanced diet to their children/wards	No. of women empowered	2.5m	2.5m	2.5m	2.5m	10m	MWACSD	ODA
35	Sensitization	Capacity Building	Sensitization seminars on health and nutritional needs of the elderly persons	To educate the elderly persons on eating healthy	1,250 elderly persons are educated on healthy eating pattern	Seminars/ sensitization the right type of food that is healthy for the elderly persons.	50 elderly persons per LGA making 1,250 persons.	1,250 elderly persons across the 25 LGAs of the State		3m	3m	3m	12m	MWACSD		

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										2018	2019	2020	2021			
36	Baseline/ Monitoring and evaluation	Research Monitoring and Evaluation	Conducting a baseline assessment and regular monitoring of child nutrition status using standard OVC tools and data analysis for case management, program, planning and evaluation	Monitor and evaluate food and Nutrition security	Children and vulnerable households	1) Engagement of consultant to carry out the baseline assessment. 2) Regular monitoring of child nutrition status and data analysis.		Children and household members have sufficient food on a regular and sustainable basis to meet their nutritional need for growth and development	1) No. of children and household assessed. 2) No. of children under nourished children. 3) No. of children and households that have sufficient food on a regular and sustainable basis.	5m	5m	5m	5m	20m	MWACSD	MoI
37	Education	Capacity Building	Development and establishment of school farms and gardens in Secondary Schools in Delta State	To build and sustain the capacity of agric teachers, and students in maintaining a healthy farms and improved Nutrition on Food Program in School	60 Teachers and 360 students at different stages for selective schools yearly	Selected schools within the three senatorial district in the State	Zero Based Support Activities in Schools	Establishment of School base Organic Farms in 15 selected School for sustainable Food & nutrition Programme in schools	No. of farms and gardens established, No of farms and garden produce.	9m	9m	9m	9m	36m	MBSE	ODA
38	Monitoring and Evaluation	Assessing, Analysing and Monitoring Nutrition Situations	Incorporate nutrition education in the curricula of Primary, Secondary .	To promote and strengthen nutrition education for the Pupil and Students through peer and multi-media communication approach	Primary and Secondary institutions in Delta State	All Public and Private Primary and Secondary Schools in Delta State	Very Low	Sensitization, Consultancy, Production of curricula	Curricula developed and being used in both primary and secondary schools	7m	8m	7m	8m	30m	MBSE	ODA

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										2018	2019	2020	2021			
39	Training	Enhancing Care-giving Capacity	Capacity building of mother and care-givers in Early Child Care Development Centres (ECCD)	To Train and Enhance and sustain the service delivery of care Givers in all ECCD centres in the State	5 participants per LGA trained for 5 days	Selected Schools With ECCD Centres in the State	Low	Enhancement of Capacity of Care-givers	No. of mothers & care-givers trained	6m	7m	7m	6m	26m	MBSE	ODA
40	Production and Distribution of Fliers and EBF sensitization of women and family members on EBF through jingles, flyers and Bill Board.	Print and audio media sensitization	1) Develop jingle on EBF for airing in major media house and the print. 2) Print posters, make bill board in strategic places and fier on EBF	To create awareness among the people for a positive behavioral change	25 LGAs	Media	Low	Positive BCC	1) No. of bill board mounted, 2. No. of jingles in different language produce and the airing slots on both radio and TV	5m	3m	3m	3m	14m	PHCDA	Mol/ NOA
41	In-service training of nurses and other health workers on Infant and Young Child Feeding.	Capacity building	1) TOT for resource persons at the state level. 2) Cascade training to lower level on IYCF. 3) Introduction of Food demonstration in all health facilities 4) Monitoring and supervision	To ensure that all cases of severe acute malnutrition are properly managed and reduce infant mortality	4 LGAs/ Senatorial district	LGA/ PHCs	Low	Reduction in infant mortality rate	No. of HW trained	4m	4m	4m	4m	16m	PHCDA	MoH

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										2018	2019	2020	2021			
42	Cascade SAM training, monitoring and supportive supervision of LGAs level on Infant and Young Child feeding practices.	Capacity building	1) TOT for resource persons on IYCF at the State level. 2) Cascade training to lower level on IYCF 3) Practical demonstration. 4) Monitoring and supervision	To ensure that all PHCs are in compliance with implementation of the global policy on IYCF and thus reduce infant mortality	4 LGAs/ Senatorial district	LGA/ PHCs	Low	Reduction in infant mortality rate	No. of PHCs implementing IYCF	5m	5m	5m	5m	15m	PHCDA	MoH
43	Scale-up the establishment of breastfeeding support group in 17 LGAs	Training and Inter personal counseling as an agent of change	TOT for resource persons at the State level. 2) Select two PHCs/LGA 3. Cascade training to lower level. 4. Established BFSG within the catchment 5) Monitoring and supervision	To improve the current low breastfeeding rate in the State	17 LGAs	LGA/ PHCs	Low	Increased number of women practicing exclusive breastfeeding	No. of Breast-feeding support group established	5m	5m	5m	5m	20m	PHCDA	ODA

DELTA STATE STRATEGIC PLAN OF ACTION ON NUTRITION (SSPAN)

S/N	INTERVENTION	STRATEGY OF INTERVENTION	ACTIVITIES	OBJECTIVES	TARGET POPULATION	DELIVERY PLATFORM	CURRENT COVERAGE/BASELINE	EXPECTED OUTCOME	INDICATORS	TIMELINE/BUDGET				TOTAL BUDGET	RESPONSIBLE MDAs	COLLABORATORS			
										2018	2019	2020	2021						
44	Re-orientation of Health workers to implement early initiation of breastfeeding within 30 minutes of birth in all health facilities.	Training and Inter personal counseling as an agent of change	1) Training of health workers on the need to enforce early initiation of breastfeeding in all PHCs 2) Enforcement of the international code for marketing of breastmilk substitute..	To improve the current low breastfeeding rate in the State	25 LGAs	LGA/ PHCs	Low	Increased number of women that practice early initiation	Increase in rate of early initiation	3m	3m	3m	3m	12m	PHCDA	MoH			
45	Capacity building of health workers in the management of severe acute malnutrition	Capacity building	1) TOT for resource persons on SAM at the State level. 2) Cascade training on SAM management to secondary, private and tertiary institution. 3) Practical demonstration on how to prepare F75 and F100 at the facility level. 4) Monitoring and supervision	To ensure that all cases of severe acute malnutrition are properly managed and reduce infant mortality	4 Selected secondary and private health facility/ Senatorial zones	LGA/ PHCs	Low	Increased knowledge and skill of health workers in the management of SAM	Number of SAM cases successfully managed	5m	5m	5m	5m	20m	PHCDA	MoH			
46	Support micronutrient deficiency control among U5 children	Supervision	Support outreach centers giving VAS, FeFol and deworming	To reduce micronutrient deficiency among U5 children as well as anaemia among pregnant women	25 LGAs	Primary, Nursery and creches	Low	Increased coverage of micronutrient supplementation	No. of women and children supplemented	3m	3m	3m	3m	12m	PHCDA	ODA			
GRAND TOTAL															425,767,500	424,067,500	222,767,500	280,067,500	1,352,670,000

DELTA STATE STRATEGIC PLAN OF ACTION ON NUTRITION



SSPAN